

Specimen ID:
 Control ID:

Phone:

Rte:


Patient Details

 DOB:
 Age(y/m/d):
 Gender:
 Patient ID:

Specimen Details

 Date collected:
 Date received:
 Date entered:
 Date reported:

Physician Details

 Ordering:
 Referring:
 ID:
 NPI:

General Comments & Additional Information

 Alternate Control Number:
 Total Volume:

 Alternate Patient ID:
 Fasting:

Ordered Items

CBC With Differential/Platelet; Comp. Metabolic Panel (14)

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
CBC With Differential/Platelet					
WBC	7.8		x10E3/uL	3.4-10.8	01
RBC	4.64		x10E6/uL	4.14-5.80	01
Hemoglobin	13.8		g/dL	13.0-17.7	01
Hematocrit	40.8		%	37.5-51.0	01
MCV	88		fL	79-97	01
MCH	29.7		pg	26.6-33.0	01
MCHC	33.8		g/dL	31.5-35.7	01
RDW	12.0		%	11.6-15.4	01
Platelets	284		x10E3/uL	150-450	01
Neutrophils	63		%	Not Estab.	01
Lymphs	28		%	Not Estab.	01
Monocytes	7		%	Not Estab.	01
Eos	1		%	Not Estab.	01
Basos	1		%	Not Estab.	01
Neutrophils (Absolute)	4.9		x10E3/uL	1.4-7.0	01
Lymphs (Absolute)	2.2		x10E3/uL	0.7-3.1	01
Monocytes (Absolute)	0.5		x10E3/uL	0.1-0.9	01
Eos (Absolute)	0.1		x10E3/uL	0.0-0.4	01
Baso (Absolute)	0.0		x10E3/uL	0.0-0.2	01
Immature Granulocytes	0		%	Not Estab.	01
Immature Grans (Abs)	0.0		x10E3/uL	0.0-0.1	01
Comp. Metabolic Panel (14)					
Glucose	80		mg/dL	65-99	01
BUN	12		mg/dL	6-20	01
Creatinine	1.00		mg/dL	0.76-1.27	01
eGFR If NonAfricn Am	100		mL/min/1.73	>59	
eGFR If Africn Am	115		mL/min/1.73	>59	
BUN/Creatinine Ratio	12			9-20	

FINAL REPORT

Patient:
DOB:
Patient ID:
Control ID:
Specimen ID:
Date collected:

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Sodium	137		mmol/L	134-144	01
Potassium	4.0		mmol/L	3.5-5.2	01
Chloride	99		mmol/L	96-106	01
Carbon Dioxide, Total	24		mmol/L	20-29	01
Calcium	9.7		mg/dL	8.7-10.2	01
Protein, Total	6.9		g/dL	6.0-8.5	01
Albumin	4.9		g/dL	4.0-5.0	01
Globulin, Total	2.0		g/dL	1.5-4.5	
A/G Ratio	1.7			1.2-2.2	
Bilirubin, Total	0.8		mg/dL	0.0-1.2	01
Alkaline Phosphatase	43		IU/L	39-117	01
AST (SGOT)	34		IU/L	0-40	01
ALT (SGPT)	41		IU/L	0-44	01