



0600000

**OUTPATIENT POINT OF CARE  
LABORATORY TEST REPORT FORM**

PLACE LABEL HERE.  
  
IF LABEL NOT AVAILABLE, WRITE IN PT NAME & MR#

**OFFICE NAME:** Forest Lakes Health Center  
**OFFICE ADDRESS:** 3081 Timberwood Boulevard  
Charlottesville, VA 22911  
**OFFICE PHONE#:** 434-975-7700

Date: \_\_\_\_\_ ICD9CODE: \_\_\_\_\_

**DIPSTICK URINALYSIS:** expiration date of dipsticks within limits  yes  no If NO, a new bottle of dipsticks with appropriate expiration date opened.

Color	Clarity	pH	Sp. Gravity	Protein	Glucose*	Ketone	Bilirubin	Nitrite	Leukocyte Esterase	Blood	Urobilinogen

Clinitest\* (patients <2years old)  
Source: Random Clean Catch Cath: I&O Foley Condom  
Comments: \_\_\_\_\_ ID: \_\_\_\_\_ Requested by: \_\_\_\_\_

**FECAL OCCULT BLOOD**

**MUST IDENTIFY:**  
 SYMPTOMS (**FOBPOC**)  
 NO SYMPTOMS (**OBSPOC**)

#1 Patient Result \_\_\_\_\_  
Date Obtained \_\_\_\_\_  
Internal Control Acceptable  Yes  No  
If NO, test must be repeated.  
ID \_\_\_\_\_

#2 Patient Result \_\_\_\_\_  
Date Obtained \_\_\_\_\_  
Internal Control Acceptable  Yes  No  
If NO, test must be repeated.  
ID \_\_\_\_\_

#3 Patient Result \_\_\_\_\_  
Date Obtained \_\_\_\_\_  
Internal Control Acceptable  Yes  No  
If NO, test must be repeated.  
ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**KOH**

**MUST IDENTIFY:**  
 Skin scrapings (**KOHPOC**)  
 GYNECOLOGICAL (**KOBPOC**)  
**(Check all that apply)**  
 No fungal elements seen  
 Fungal elements seen  
 Budding yeast forms seen

**RAPID STREP (STRPOC)**

Patient Result: \_\_\_\_\_  
 Positive  Negative  Invalid  
Internal Control  
Acceptable  Yes  No  
If NO, test must be repeated.

**CONFIRMATORY CULTURE**

Sent to \_\_\_\_\_ or Sent out  
 Positive  Negative  Invalid  
Comments: \_\_\_\_\_  
\*ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**COAGULATION**

Prothrombin Time  
Patient Results (secs) \_\_\_\_\_  
INR \_\_\_\_\_  
Operator ID \_\_\_\_\_  
Instrument ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**HEMOGLOBIN (HBPOC)**

Patient Result \_\_\_\_\_  
ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**WHOLE BLOOD GLUCOSE (GLUPOC)**

Patient Result: \_\_\_\_\_  
Control Acceptable  Yes  No  
ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**MONO SCREEN (MNOPOC)**

Patient Result \_\_\_\_\_  
Internal Control  
Acceptable  Yes  No  
If NO, test must be repeated.  
ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**PREGNANCY (UPGPOC)**

Patient Result \_\_\_\_\_  
Internal Control  
Acceptable  Yes  No  
If NO, test must be repeated.  
ID \_\_\_\_\_  
Requested by: \_\_\_\_\_

**PROVIDER PERFORMED MICROSCOPY PROCEDURES**

Requested by: \_\_\_\_\_ ID \_\_\_\_\_

**MICROSCOPIC URINALYSIS**

**SALINE WET MOUNTS**

WBC	RBC	CASTS	EPITHELIAL CELLS	CRYSTALS	BACTERIA	OTHER	TRICH.	BACTERIA	EPITHELIAL CELLS	CLUE CELLS	WBC

**FERN TEST**

**PH**

Neg	Pos	Result

**Post Coital Direct**

**Miscellaneous**

Neg	Pos	Test: _____	Test: _____
		Test Result: _____	Test Result: _____

## REFERENCE RANGES

TEST UNITS	<u>CBC and Diff</u>					<u>Dipstick Urinalysis</u>	<u>Microscopic Urinalysis</u>
	REFERENCE RANGES						
WBC	<b>Male</b>		<b>Female</b>		K/pL	Yellow-amber and clear pH = 5 - 8 Sp.gr. = 1.001 - 1.030 Protein, glucose, ketone, Bilirubin, nitrite, leukocyte, esterase, blood = NEG. urobilinogen = 0.1 - 1.0 Erlich units	WBC = 0 - 1/HPF RBC = 0 - 2/HPF cast = occ hyaline/LPF Normal crystals: Acid pH = amorphous urates, calcium oxalate, triple phosphate, calcium phosphate, calcium carbonate, ammonium biurate
	12y	4.0 - 11.0	12y	4.0 - 11.0			
	6y	5.0 - 14.5	6y	5.0 - 14.5			
	1y	6.0 - 17.5	1y	6.0 - 17.5			
	1m	5.0 - 19.5	1m	5.0 - 19.5			
	1d	9.4 - 34.0	1d	9.4 - 34.0			
RBC	12y	4.60 - 6.20	12y	4.20 - 5.20	M/pL	<b>Prothrombin Time - Coumadin</b> The optimal therapeutic ranges for the International Normalized Ratio (INR) for patients on oral anticoagulant therapy, according to the American College of Chest Physicians and the National Heart, Lung and Blood Institute ( <i>CHEST</i> , volume 108 [supplement], page 231S, 1995), are shown below.	
	6y	4.00 - 5.20	6y	4.00 - 5.20			
	1y	3.70 - 5.30	1y	3.70 - 5.30			
	1m	3.00 - 5.40	1m	3.00 - 5.40			
	1d	4.00 - 6.60	1d	4.00 - 6.60			
HGB	12y	14.0 - 18.0	12y	12.0 - 16.0	g/dL	<b>Indication</b>	<b>INR</b>
	6y	11.5 - 15.5	6y	11.5 - 15.5			
	1y	10.5 - 13.5	1y	10.5 - 13.5			
	1m	10.0 - 18.0	1m	10.0 - 18.0			
	1d	14.5 - 22.5	1d	14.5 - 22.5			
HCT	12y	40.0 - 52.0	12y	35.0 - 47.0	%	Prophylaxis of venous thromboembolism (high-risk surgery)	2.0 - 3.0
	6y	35.0 - 45.0	6y	35.0 - 45.0			
	1y	33.0 - 39.0	1y	33.0 - 39.0			
	1m	31.0 - 55.0	1m	31.0 - 55.0			
	1d	45.0 - 67.0	1d	45.0 - 67.0			
MCV	12y	83.0 - 95.0	12y	83.0 - 95.0	fl	Treatment of venous thrombosis	2.0 - 3.0
	6y	83.0 - 95.0	6y	83.0 - 95.0			
MCH	12y	28.0 - 32.0	12y	28.0 - 32.0	pg	Treatment of pulmonary embolism	2.0 - 3.0
	6y	28.0 - 32.0	6y	28.0 - 32.0			
MCHC	12y	32.0 - 36.0	12y	32.0 - 36.0	gm/dL	Prevention of systemic evaluation Tissue heart valves	2.0 - 3.0
	6y	32.0 - 36.0	6y	32.0 - 36.0			
RDW	12y	11.0 - 14.0	12y	11.0 - 14.0	%	Acute myocardial infarction (to prevent systemic embolism)	2.0 - 3.0
	6y	11.0 - 14.0	6y	11.0 - 14.0			
PLT	12y	150 - 450	12y	150 - 450	K/pL	Valvular heart disease	2.0 - 3.0
	6y	150 - 450	6y	150 - 450			
Neutrophils (relative)	12y	47 - 82	12y	47 - 82	%	Atrial Fibrillation	2.0 - 3.0
	6y	47 - 82	6y	47 - 82			
	1y	47 - 82	1y	47 - 82			
Neutrophils (absolute)	12y	1.8 - 8.0	12y	1.8 - 8.0	K/pL	Mechanical prosthetic valves (high risk)	2.5 - 3.5
	6y	1.5 - 8.0	6y	1.5 - 8.0			
	1y	1.5 - 8.5	1y	1.5 - 8.5			
Lymphocytes (relative)	12y	15 - 45	12y	15 - 45	%	Myocardial infarction (prevention of recurrence)	2.5 - 3.5
	6y	15 - 45	6y	15 - 45			
	1y	15 - 45	1y	15 - 45			
Lymphocytes (absolute)	12y	1.0 - 5.0	12y	1.0 - 5.0	K/pL	<b>Note:</b> The INR is intended for use only for monitoring the degree of anticoagulation in patients receiving oral coumarin derivatives; most commonly Coumadin (warfarin)	
	6y	1.5 - 7.0	6y	1.5 - 7.0			
	1y	4.0 - 10.5	1y	4.0 - 10.5			
Monocytes (relative)	12y	2 - 12	12y	2 - 12	%	Fecal Occult Blood = Negative	
	6y	2 - 12	6y	2 - 12			
	1y	2 - 12	1y	2 - 12			
Monocytes (absolute)	12y	0.0 - 1.0	12y	0.0 - 1.0	K/pL	Gastrocult = Negative	
	6y	0.0 - 0.8	6y	0.0 - 0.8			
	1y	0.5 - 1.1	1y	0.5 - 1.1			
Eosinophils (relative)	12y	0 - 6	12y	0 - 6	%	Mono Screen = Negative	
	6y	0 - 6	6y	0 - 6			
	1y	0 - 6	1y	0 - 6			
Eosinophils (absolute)	12y	0 - 0.6	12y	0 - 0.6	K/pl	Rapid Strep = Negative	
	6y	0 - 0.65	6y	0 - 0.65			
	1y	0 - 0.7	1y	0 - 0.7			
Basophils (relative)	12y	0 - 2	12y	0 - 2	K/L	Confirmatory Culture = Negative	
	6y	0 - 2	6y	0 - 2			
	1y	0 - 2	1y	0 - 2			
Basophils (absolute)	12y	0 - 0.2	12y	0 - 0.2	%	Saline Wet Mount = Negative	
	6y	0 - 0.2	6y	0 - 0.2			
	1y	0 - 0.2	1y	0 - 0.2			
<b>Whole Blood Glucose</b>						KOH = Negative	
<b>Adult Fasting: 74 - 100 mg/dL</b>							
<b>Child Fasting: 60 - 100 mg/dL</b>							