

LABORATORY TELEPHONE REPORT

PATIENT NAME:		ROOM #:	PHYSICIAN:
HEMATOLOGY REPORT		CHEMISTRY REPORT	
WBC x 10 ³ 4.0 - 10.2		GLUCOSE 74 - 105	
RBC's F 4.0 - 5.5 M 4.5 - 6.0		BUN 6 - 21	
F 11.5 - 16 GM HEMOGLOBIN - - M 13.0 - 16.8 GM		SODIUM 133 - 145	
F 37 - 47% HEMATOCRIT - - M 40 - 54%		POTASSIUM 3.5 - 5.0	
PLATELET COUNT 140 / 400 x 10 ³		CHLORIDE 98 - 107	
RETIC COUNT 0.5 - 1.5		CO ₂ 18 - 32	
SEDIMENTATION RATE (WESTERGREIN)		CREATININE 0.4 - 1.3	
male: 0-20 mm/hr female: 0-15 mm/hr		SGPT 28 - 66	
ESR _____ hr		GGT 10 - 85	
PROTHROMBIN TIME (PT)		BILIRUBIN	
Patient _____ INR _____ (12.8 - 14.8) (0.9 - 1.09)		TOTAL 0.0 - 1.0	
PARTIAL PROTHROMBIN TIME (PTT)		DIRECT 0.0 - 0.3	
Patient _____ Ratio _____ (21.3 - 35.8)		INDIRECT	
BLEEDING TIME (TBLX)		TOTAL PROTEIN 6.3 - 8.3	
Min _____ Sec _____ Normal 2.5 - 9.5 Min		ALBUMIN 3.2 - 5.0	
MICROBIOLOGY REPORT		CALCIUM 8.5 - 10.1	
GRAM STAIN:		PHOSPHORUS 2.5 - 4.9	
		URIC ACID 2.6 - 7.2	
		ALK PHOS 50 - 136	
		SGOT 15 - 37	
CULTURE REPORT:		LDH 100 - 190	
		CHOLESTEROL less than 200	
		ALCOHOL 0.0	
MISCELLANEOUS		AMMONIA 10 - 37	
		AMYLASE 25 - 133	
		QUANT HCG	
		CPK M 21 - 232 F 21 - 215	
		CKMB less than 5.0	
		CKMB INDEX less than 5.0	
		TROPONIN 0 - 0.1	
		LIPASE 114 - 286	
		MAGNESIUM 1.6 - 2.4	
		PREGNANCY NEG	
URINALYSIS REPORT		THERAPEUTIC DRUGS	
APPEARANCE		DIGOXIN 0.8 - 2.0	
COLOR		DILANTIN 10 - 20	
SPECIFIC GRAVITY		GENTAMYCIN	
PH		TROUGH less than 2	
PROTEIN		PEAK 5 - 10	
GLUCOSE		PHENOBARB 15 - 40	
KETONES			
BILIRUBIN		TEGRETOL 4.0 - 12.0	
OCCULT / BLOOD		THEOPHYLLINE 10 - 20	
UROBILINOGEN		VANCOMYCIN	
NITRITE		TROUGH 5 - 10	
LEUKOCYTE ESTERASE		PEAK 20 - 40	
RBC		BLOOD GASES REPORT	
WBC		PH 7.35 - 7.45	
		PCO ₂ 35 - 48	
		PO ₂ 83 - 108	
		BICARBONATE 18 - 23	
		CO ₂ CONTENT 22 - 29	
		O ₂ SAT 95 - 98	
		FIO ₂	
DATE TAKEN:	TIME TAKEN: (Military Time)	REPORT TAKEN BY:	REPORT GIVEN BY:

HOSPITAL PANIC VALUES

" PANIC VALUE " is defined as any laboratory value that is life threatening and requires immediate medical attention. All All panic values are reported to a physician or nurse on the floor and will be documented in the laboratory report, including the name of the individual to whom the results were called.

DEPARTMENT	TEST NAME	PANIC RANGE		UNITS
		LESS than	GREATER than	
1. CHEMISTRY:	Sodium, Serum	125.0	155.0	mEq / L
	Potassium, Serum	3.0	6.0	mEq / L
	Glucose, Serum	40.0	400.0	mEq / L
	Glucose, Fasting	40.0	400.0	mg / dL
	Calcium	7.0	12.0	mg / dL
	Magnesium	1.0	5.0	mg / dL
	Bilirubin, Total Neonates	N / A	15.0	mg / dL
	Ammonia, Plasma	N / A	100.0	umol / L
	Uric Acid	N / A	12.0	mg / dL
	2. THERAPEUTIC DRUGS:	Acetaminophen (Tylenol ®)	N / A	50.0
Carbamazepine (Tegretol ®)		N / A	15.0	ug / mL
Digoxin (Lanoxin ®)		N / A	3.0	ug / mL
Gentamicin, Peak		N / A	10.0	ug / mL
Phenobarbital (Luminal ®)		N / A	55.0	ug / mL
Phenytoin (Dilantin ®)		N / A	25.0	ug / mL
Theophylline (Aminophylline ®)		N / A	25.0	ug / mL
Valporic Acid (Depakote ®)		N / A	100.0	ug / mL
Vancomycin Peak		N / A	40.0	ug / mL
Salicylates (ASA, Aspirin)		N / A	30.0	mg / dL
3. HEMATOLOGY:		Total White Blood Count	1.5	25.0
	Hemoglobin, Blood	7.0	N / A	gm / dL
	Hematocrit, Blood	21.0	55.0	%
	Platelet Count	30.0	1,000.0	x 10 ³ mm
4. COAGULATION:	Prothrombin Time	N / A	30.0	seconds
	APTT	N / A	90.0	seconds
	Bleeding Time, Template	N / A	15.0	minutes
5. ARTERIAL BLOOD GAS:	pO2, Whole Blood	39.0	N / A	mmHg
	pCO2, Whole Blood	19.0	71.0	mmHg
	pH, Whole Blood	7.2	7.6	units
6. MICROBIOLOGY:	All Body Fluid Gram Stain	Positive		
	Bacterial Meningitis	Positive		
7. OFF-SITE TESTING:	Amikacin, Peak	N / A	greater than 30.0	mg / L
	Primidone (Mysoline ®)	N / A	greater than 15.0	ug / mL
	Procanamide (Pronestyl ®)	N / A	greater than 14.0	ug / mL
	Tobramycin, Peak	N / A	greater than 12.0	ug / mL
	Lithium	N / A	greater than 2.0	mmol / L
	Acid Fast Smear	Positive	organism noted	
	Blood Culture	Positive	organism noted	
	CSF Culture	Positive	organism noted	
	Salmonella Typhe Culture	Positive	organism noted	
	CSF Cryptococcus Antigen Screen	Positive	Includes Titer	
	Mycobacterium Culture Blood (AFB)	Positive	organism noted	
	Mycobacterium Culture Other (AFB)	Positive	organism noted	

Approved By: _____
Doctor Name, MD Laboratory Director

8 / 23 / 2006
DATE