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ABIGYA MEDIUM CLINIC

0911 66 58 17 / ☎0118 89 91 98

Laboratory Request Format

ቀን Date 9/10/2017

Name of patient Azmeya Belay Age 29 Sex F Card No. _____

Name of Physician Requested _____ Dep. _____

HEMATOLOGY

- ☐ CBC
- ☐ WBC..... mm/cm
- ☐ Diff:- . Neutrophils.....%
  - . Lyphocytes.....%
  - . Monocytes.....%
  - . Basophils.....%
  - . Eosinophils.....%
- ☐ Hgb..... g/d1
- ☐ HCT..... %
- ☐ ESR..... mm/hrs
- ☐ Blood Group & RH factor.....

PARASITOLOGY

- ☐ Stool Examination
  - . Appearance .....
  - . Consistence .....

Microscopic

- . Parasite .....
- . .....
- . .....
- . Pus cells .....
- . Rbcs .....
- . Bacteria .....
- ☐ Occult Blood .....
- ☐ Blood film .....

SEROLOGY

- ☐ Widal S.H
  - . S.O .....
- ☐ Welfiles 0x19 .....
- ☐ RF.....
- ☐ ASO .....

VDRL/RPR .....
HBSAg.....
HCV.....
H.Pylorin Ab.....
H.Pylorin Ag .....

BACTERILOGY

AFB [X3] .....
.....
.....
Gram - stain .....
KOH .....
Wet smear .....
.....

URINE ANALYSIS

- ☐ Color .....
- ☐ odour .....
- ☐ Sp.gr .....
- ☐ PH .....
- ☐ Protein .....
- ☐ Glucose .....
- ☐ Bilirubin .....
- ☐ Urobilinogen .....
- ☐ ketone .....
- ☐ Nitrite .....
- ☐ Blood .....
- ☐ Leukocyte .....

Microscopical

- ☐ Pus cells .....
- ☐ RBes .....
- ☐ epithelial cells .....
- ☐ Bacteria
- ☐ Casts .....
- ☐ HCG ..... Negative

Clinical Chemistry	Result	Normal Value
Total Bilirubin		
Driect Bilirubin		
Total Protein		
BUN		
Creatinine		
Alkaline Phosphatese		
Uric Acid		
CPK		
LDH		
RBS/FBS		
Urea		
SGOT/AST		
SGPT/ALT		
Cholesterol		
GGT		
LDL-C		
HDL		
Thglycerides		

Reported by laboratory technician _____ Signature _____ Date _____