



SRU

CLINICAL LABORATORY REQUISITION

Room # _____ Test Priority: **STAT**
 Collection Date: _____ Time _____ Collected by: _____

DOWNTIME NOTIFICATION of RESULTS: Select option

TUBE to station# _____ FAX to: _____ CALL to: _____

ORDERS IN LASTWORD: YES NO

PATIENT INFORMATION OR ADDRESOGRAPH LABEL

Medical Record #
 Account #
 Ordering Doctor
 Patient Last Name
 Patient First Name
 Patient Date of Birth
 Patient Gender

FREQUENT LABS								
BASIC METABOLIC PANEL**	EP1	LTG	COMP METABOLIC PANEL**	METAPNL	LTG	**Basic Metabolic Panel		
BLOOD GAS, VENOUS	VBG	SYR	DILANTIN/Phenytoin	PTN	R	Ca, CO2, CL, Creatinine, Glucose, K, Na, BUN		
BLOOD GAS +LYTES+GLU+LAC+Hb	VORBG	SYR	D-DIMER	DDIMER	B			
BNP (RAPID)	POCBNP	L	DIGOXIN	DIG	R			
CBC	CBC	L	FIBRINOGEN	FGN	B			
D-DIMER (RAPID)	POCDDI	L	GLUCOSE	GLU	LTG	** Renal Panel		
DIFFERENTIAL	DIFF	L	HCG, QUALITATIVE	HCG	LTG	Albumin, Ca, CO2, CL, Creatinine, Glucose, K, Na, BUN, Phosphorus		
DRUG SCREEN	EDS	UY	HCG, QUANTITATIVE	HCGQUANT	LTG			
HCG, QUALITATIVE, URINE	PREG	UY	HGB/HCT	HH	L			
INR (RAPID)	POCPTINR	SYR	LDH	LDH	LTG			
LACTATE (RAPID)	LAVBG	SYR	LITHIUM	LI	S	**Comprehensive Metabolic Panel		
LIPASE	LIP	LTG	MAGNESIUM	MG	LTG			
LIVER PANEL**	LIVP	LTG	NT-ProBNP	NTPROBNP	L	Basic Metabolic + Albumin, Alk Phos, Bilirubin – Total, Protein – Total, ALT, AST		
PT/INR	PT	B	OSMOLALITY	OSMO	LTG			
PTT	PTT	B	RENAL PANEL**	KIDNEY	LTG			
TROPONIN (RAPID)	POCTRO	DK	SALICYLATE	SAL	R			
TYPE AND SCREEN	TS	P	SODIUM	NA	LTG			
URINALYSIS (MACRO W/REFLEX TO MICRO)	UMACRO	UR	TEG (Thromboelastograph)	RTEG	B	**Liver Panel		
AMMONIA (on ice)	AMON	L	VALPROIC Acid/Depakane	VPA	R	Albumin, Alk Phos, Bilirubin – Total+Direct, Protein – Total, ALT, AST		
ACETAMINOPHEN	ACET	R	ADDITIONAL LABS:					
ANTI Xa LMW. HEPARIN	AXALMWH	B						
ANTI Xa UNF. HEPARIN	AXAUFH	B						
CALCIUM	CA	LTG						
CALCIUM, IONIZED, BLOOD	FCAB	SYR						
CK, TOTAL	CK	LTG						
CK-MB	CKMB	LTG						

B – Blue LTG – Light Green DK – Dark Green GR – Gray L – Lavender P – Pink R – Red S – SST/Gold SYR – Syringe URY – Urine Red/Yellow UY – Urine Yellow