

PEDIATRIC HYDROXYUREA CLINICAL TRIAL

LOCAL LABORATORY RESULTS

**Active – Entry, Q12 Months, Exit**

**Passive – Entry, Exit**

**PART I: IDENTIFYING INFORMATION**

1. Patient's ID Number: \_\_\_\_\_ **SUBJECT\_ID**      2. Current Clinic: \_\_\_\_\_ **SITE\_ID**  
sequence # **VISIT\_NBR**
3. Patient's Letter Code: \_\_\_\_\_ **LETTER\_CD**      4. Visit: \_\_\_\_\_ - 0 0
5. Visit Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **VISIT\_DT**  
Month      Day      Year

**PART II: LAB RESULTS**

1. A. White Blood Cell Count (WBC)      \_\_\_\_\_ . \_\_\_\_\_ K/mm<sup>3</sup>      **WBC**
- B. Red Blood Cell Count (RBC)      \_\_\_\_\_ . \_\_\_\_\_ M/mm<sup>3</sup>      **RBC**
- C. Hemoglobin      \_\_\_\_\_ . \_\_\_\_\_ g/dL      **HB**
- D. Hematocrit      \_\_\_\_\_ . \_\_\_\_\_ %      **PCV**
- E. Platelet Count      \_\_\_\_\_ . \_\_\_\_\_ K/mm<sup>3</sup>      **PLAT**
2. A. Differential Type:      (1) Manual      (2) Automated      **DIFFTYPE**
- B. Absolute Neutrophil Count      \_\_\_\_\_ . \_\_\_\_\_ K/mm<sup>3</sup>      **NEUT\_CT**
- C. Neutrophils (% of WBC)      \_\_\_\_\_ %      **NEUT\_PT**
- D. Lymphocytes (% of WBC)      \_\_\_\_\_ %      **LYMPH\_PT**
- E. Monocytes (% of WBC)      \_\_\_\_\_ %      **MONO\_PT**
- F. Nucleated Red Blood Cells (nRBC)\*      \_\_\_\_\_ **NRBC**
- \*1. If not 0, corrected WBC Count†      \_\_\_\_\_ . \_\_\_\_\_ K/mm<sup>3</sup>      **CWBC**

- G. Reticulocytes (% of RBC)      \_\_\_\_ . \_\_\_\_ %      **RETIC\_PT**
- H. Absolute Reticulocyte count      \_\_\_\_ . \_\_\_\_ K/mm<sup>3</sup>      **RETIC\_CT**
- I. MCV      \_\_\_\_ . \_\_\_\_ fL      **MCV**
3. A. LDH      \_\_\_\_\_ U/L      **LDH**
- B. Bilirubin, Total      \_\_\_\_ . \_\_\_\_ Mg/DL      **T\_BILI**
- C. Bilirubin, Direct      \_\_\_\_ . \_\_\_\_ Mg/DL      **D\_BILI**
- D. ALT      \_\_\_\_\_ U/L      **ALT**
4. A. Urine Osmolality (Active-Entry/Exit Only)      \_\_\_\_\_ mOsm/kg      **U\_OSMO**
1. Hours NPO      \_\_\_\_      **URN\_NPO**

**PART III: COORDINATION**

1. Checked for completeness and accuracy:

- A. Certification number:      \_\_\_\_ - \_\_\_\_      **CERT\_NO**
- B. Signature:      \_\_\_\_\_      **CERT\_SIG**
- C. General Comments:      \_\_\_\_\_      **GEN\_CMNT**

ID Number

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Visit

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Seq

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