

LOCAL CBC RESULTS

PART I: IDENTIFYING INFORMATION

1. Patient's ID Number: ^{ID}

2. Current Clinic: ^{SITE}

3. Patient's Letter Code: ^{INITS}

4. Visit: ^{VISIT} - ^{sequence #} ^{SEQNO}

5. Visit Date: - - ^{VIS_DT}
 Month Day Year

PART II: LAB RESULTS

1. A. Are these lab results for an unscheduled visit that resulted in a toxicity or alert? ^{UNSCHVIS} Yes (1) No (2)

B. Label number put on lab specimens ^{LABEL}

2. A. White Blood Cell Count (WBC) . K/mm³ ^{WBC}

B. Red Blood Cell Count (RBC) . M/mm³ ^{RBC}

C. Hemoglobin . g/dL ^{HB}

D. Hematocrit . % ^{PCV}

E. Platelet Count K/mm³ ^{PLAT}

3. A. Differential Type: ^{DIFFTYPE} (1) Manual (2) Automated

B. Absolute Neutrophil Count . K/mm³ ^{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/mm³ ^{CWBC}

G. Reticulocytes (% of RBC) . % ^{RETIC_PT}

H. Reticulocyte count . K/mm³ ^{RETIC_CT}

I. MCV fL ^{MCV}

PART III: COORDINATION

1. Checked for completeness and accuracy:

A. Certification number:

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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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