

<p align="center">Comprehensive Sickle Cell Centers</p>	<p align="center">Hematology Labs</p>	<p align="center">Screening/Baseline Page: 06</p>
<p align="center">Dexamethasone for ACS</p>		<p>CSCC ID: {subject.name} Center Code: {center.name} Hospital Code: {center.hospital.name}</p>

Collection Date: / /
DD MMM YYYY

Collection Time: :
(24-hour clock) Hour Min

Labs not done (provide a comment)
(HEMA:NOTDO)

Test	Value
WBC (x10 ³ /mm ³)	<input type="text" value="HEMA:WBC"/>
RBC (x10 ⁶ /mm ³)	<input type="text" value="HEMA:RBC"/>
HGB (g/dL)	<input type="text" value="HEMA:HGB"/>
HCT (%)	<input type="text" value="HEMA:HCT"/>
MCV (fL)	<input type="text" value="HEMA:MCV"/>
Platelets (x10 ³ /mm ³)	<input type="text" value="HEMA:PLATE"/>
Abs. reticulocyte count (x10 ³ /mm ³)	<input type="text" value="HEMA:ABRETIC"/>
OR % Reticulocyte	<input type="text" value="HEMA:RETICPT"/>

Comments for page:

[Form Completion Help](#)