DOWNTIME TEST REQUEST (TOTAL NETWORK FAILURE)

Mandatory Information
Name:
NRIC:
Gender:
Date of Birth:
Account Number:
Please paste label upright and within the box

Service Code Prefix	Ward	Bed	Clinic
003			

For Laboratory use only:
GOLD
RED
GREEN / PST
LILAC
GREY
PAEDS

Laboratory Accession Number

Doctor

MCR No

Clinical Diagnosis / Medication

STAT ☐

Collected Date: _____ Collected Time: _____ Urine Volume: _____

1054	TNI			Troponin I
1049	PBNP			NT-proBNP
1110	RP1			Renal Panel #1
1120	RP2			Renal Panel #2
1010	LFT1			Liver Panel
1021	CA			Calcium, Total
1022	NCA			Calcium, ionised
1024	CAI			Calcium, Total/Adjusted
1305	MG			Magnesium
1023	PO4			Phosphate
1201	GLUF			Glucose, fasting
1117	GLU			Glucose, random
1620	TY			Thyroid Screen #1
1933	CRP			C-Reactive Protein
1304	TBP	CAP		Bilirubin, neonatal
1907	DEND			Dengue Screen
1240	CSF	CSF		CSF Panel
1501	LACC	CSF		Lactate, CSF

1000	ABG	SYR		Blood Gases, Arterial
1000	VBG	SYR		Blood Gases, Venous
1005	COHB	SYR		Carboxyhaemoglobin
2315	MHB	SYR		Methaemoglobin
1301	AMY			Amylase
1307	OSM			Osmolality, serum
1308	OSMU	U		Osmolality, urine
1929	NH3	ICE		Ammonia
1206	BOHB			Beta-Hydroxybutyrate
1502	LAC	ICE		Lactate
1945	LIPA			Lipase
1806	PCHE			Pseudocholinesterase
1801	ACMP			Acetaminophen
1805	CBZ			Carbamazepine
1809	DIGX			Digoxin
1822	PHNT			Phenytoin
1825	SAL			Salicylate
1835	VALP			Valproate
1800	VAN			Vancomycin
3201	UFE	U		Urine Formed Elements
3301	DX	U		Urine Dipstick

ADDITIONAL TESTS / COMMENTS

CLINICAL CHEMISTRY

LIVER PANEL
Albumin, Bilirubin Total,
Bilirubin Conjugated, ALT,
AST, ALP, LDH

RENAL PANEL #1
Urea, Sodium, Potassium, Creatinine

RENAL PANEL #2
Renal Panel #1, Carbon Dioxide, Chloride,
Uric Acid, Total Calcium, Phosphate, ALP

THYROID SCREEN #1
Free Thyroxine, TSH

URINES & FLUIDS

URINE DIPSTICK
Colour, Clarity, Glucose, Ketone, Protein,
Bilirubin, Urobilinogen, Blood, pH,
Leucocytes, Nitrates, Specific Gravity

URINE FORMED ELEMENTS
WBC, RBC, Epithelial cells, Casts,
Crystals, Others

CSF PANEL
Glucose, Protein