



CLINICAL CHEMISTRY FORM A

Paste Patient's Name Label Here (If available)

Name:
MRN:
Account Number:
Date of Birth:
Sex: M / F (Circle One)

Routine Urgent

Ward/Bed: _____ Clinic: _____ Class: _____

Requestor's Name & Signature _____ Requestor's Contact Number _____ Name of Consultant I/C _____ Date _____	Specimen Taken By _____ Date & Time Specimen Taken Date _____ Time _____	Laboratory Barcode
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Please (tick) appropriate boxes below

Renal Function Tests	Liver Function Test	
BC5517 <input type="checkbox"/> Renal Panel (U/E/Bicarb/Cre)	BC5514 <input type="checkbox"/> Liver Function Test	BC0025 <input type="checkbox"/> Alphafoeto Protein, serum
BC5519 <input type="checkbox"/> Renal Panel with glucose	BC0011 <input type="checkbox"/> Alanine Transaminase, serum	XU0060 <input type="checkbox"/> Beta-hCG, serum
BC0303 <input type="checkbox"/> Renal Panel(Na/K/Cl)-Electrolytes	BC6062 <input type="checkbox"/> Albumin, serum	BC0068 <input type="checkbox"/> CA-125, serum
BC0042 <input type="checkbox"/> Bicarbonate, serum	BC0265 <input type="checkbox"/> Alkaline Phosphatase, serum	BC0074 <input type="checkbox"/> Carcinoembryonic Antigen, serum
BC0071 <input type="checkbox"/> Calcium Total, serum	BC0023 <input type="checkbox"/> Aspartate Transaminase, serum	XU0020 <input type="checkbox"/> Cortisol, serum
BC0075 <input type="checkbox"/> Chloride, serum	BC0047 <input type="checkbox"/> Bilirubin Total, serum	XU0090 <input type="checkbox"/> Estradiol, serum
BC0102 <input type="checkbox"/> Creatinine, serum	BC0045 <input type="checkbox"/> Bilirubin Direct, serum	XU0040 <input type="checkbox"/> Follicle Stimulating Hormone (FSH)
BC0220 <input type="checkbox"/> Magnesium, serum	BC0094 <input type="checkbox"/> Bilirubin, Pediatric, Plasma	XU1009 <input type="checkbox"/> FSH/LH serum + Prolactin, Serum
BC0267 <input type="checkbox"/> Phosphate Inorganic, serum	BC0141 <input type="checkbox"/> Gamma-Glutamyl Transferase	XU1003 <input type="checkbox"/> FSH/LH, serum
BC0273 <input type="checkbox"/> Potassium, serum	BC0012 <input type="checkbox"/> Protein Total, serum	XU1007 <input type="checkbox"/> FSH/LH/E2, serum
BC0301 <input type="checkbox"/> Sodium, serum	BC0020 <input type="checkbox"/> Amylase, serum	BC0050 <input type="checkbox"/> G6PD (Quantitative) Cord Blood
BC0331 <input type="checkbox"/> Urea, serum	BC0026 <input type="checkbox"/> Ammonia, plasma	BC0051 <input type="checkbox"/> G6PD (Quantitative) RBC
Lipids		XU0070 <input type="checkbox"/> Insulin, serum
BC5512 <input type="checkbox"/> Lipid Panel (CHO/HDL/TG/LDLc)	BC0106 <input type="checkbox"/> C-Reactive Protein, serum	XU0080 <input type="checkbox"/> Luteinizing Hormone, serum
BC0081 <input type="checkbox"/> Cholesterol Total, serum	BC0084 <input type="checkbox"/> C3 complement, serum	IC5554 <input type="checkbox"/> Ovarian Cancer Profile
BC0080 <input type="checkbox"/> Cholesterol HDL, serum	BC0085 <input type="checkbox"/> C4 complement, serum	XU1011 <input type="checkbox"/> Procalcitonin
BC0320 <input type="checkbox"/> Triglycerides, serum	BC0100 <input type="checkbox"/> Creatine Kinase, serum	XU0101 <input type="checkbox"/> Progesterone, serum
Diabetic Tests		XU0102 <input type="checkbox"/> Prolactin (after PEG precipitation)
BC0147 <input type="checkbox"/> HBA1c, blood (EDTA)	BC0101 <input type="checkbox"/> Creatine Kinase-MB	XU0102 <input type="checkbox"/> Prolactin, serum
BC0142 <input type="checkbox"/> Glucose, plasma	HA0080 <input type="checkbox"/> Ferritin, serum	IC5553 <input type="checkbox"/> Repro Endo Profile 1
BC0142B <input type="checkbox"/> Glucose, serum	BC0180 <input type="checkbox"/> IgA, serum	IC5000 <input type="checkbox"/> Repro Endo Profile 2
BC0146 <input type="checkbox"/> Glucose Tolerance Test (Antenatal)	BC0181 <input type="checkbox"/> IgG, serum	XU0121 <input type="checkbox"/> Testosterone, Total, serum
BC0148 <input type="checkbox"/> Glucose Tolerance Test (Postnatal)	BC0182 <input type="checkbox"/> IgM, serum	XU1002 <input type="checkbox"/> Thyroid Panel (TSH/FT4)
BC0145 <input type="checkbox"/> Glucose Tolerance Test (Standard)	BC0186 <input type="checkbox"/> Iron, TIBC, TS	XU0122 <input type="checkbox"/> Thyroid Stimulating Hormone, serum
BC0049 <input type="checkbox"/> Blood gases(arterial,venous,capillary)	BC0039 <input type="checkbox"/> Iron, serum	XU0041 <input type="checkbox"/> Thyroxine (T4) Free, serum
BC6061 <input type="checkbox"/> Calcium Ionic	BC0201 <input type="checkbox"/> Lactate Dehydrogenase, serum	HS0011 <input type="checkbox"/> TSH Cord
BC0109 <input type="checkbox"/> Carboxyhaemoglobin, blood	BC0200 <input type="checkbox"/> Lactate, plasma	RV0078 <input type="checkbox"/> Hepatitis B Immunity Profile
HA0310 <input type="checkbox"/> Methaemoglobin,(Quantitative) blood	BC0240 <input type="checkbox"/> Osmolality, serum	RV0072 <input type="checkbox"/> Hepatitis B surface antigen
BC0191 <input type="checkbox"/> Ketones,blood	BC5523 <input type="checkbox"/> Troponin-I high sensitive, serum	RV0071 <input type="checkbox"/> Hepatitis B e Antigen
BD0010 <input type="checkbox"/> Amikacin (Trough/Peak/Random)	BC0330 <input type="checkbox"/> Uric Acid, serum	RV0012 <input type="checkbox"/> Hepatitis B Surface Antibody
BD0040 <input type="checkbox"/> Gentamicin, (Trough/Peak/Random)	BC0104 <input type="checkbox"/> CSF Profile	RV0014 <input type="checkbox"/> Hepatitis B Core Total Antibody
BD0060 <input type="checkbox"/> Paracetamol, serum	BC5521 <input type="checkbox"/> Fluid Profile (Peritoneal / Pericardial / Pleural Others)	RV0077 <input type="checkbox"/> Hepatitis B e antibody (anti-HBE)
BC0300 <input type="checkbox"/> Salicylate, serum	BC5520 <input type="checkbox"/> Synovial Profile	RV0080 <input type="checkbox"/> Hepatitis C Total Antibody Screen
BD0080 <input type="checkbox"/> Valproic Acid, serum	RU0001 <input type="checkbox"/> Urinalysis (Urine FEME)	IM0170 <input type="checkbox"/> Syphilis screening
BD0083 <input type="checkbox"/> Vancomycin (Trough/Peak/Random)	RU0005 <input type="checkbox"/> Urine Phase Contrast	HS0009 <input type="checkbox"/> HIV Screen
BD0081 <input type="checkbox"/> Vancomycin (Random), serum	BC0240U <input type="checkbox"/> Osmolality, Urine	RV0120 <input type="checkbox"/> Rubella Virus IgG antibody
BD0082 <input type="checkbox"/> Vancomycin (Trough), serum	RU0003 <input type="checkbox"/> Protein/Cre Ratio, urine	<input type="checkbox"/> Others, please specify: _____
	IC5598X <input type="checkbox"/> Antenatal Profile	
	IC5599X <input type="checkbox"/> Antenatal Profile with Thalassaemia screen	