



For outpatient use only - waiting for results

Reg No 52839081C

**HAEMATOLOGY / COAGULATION**

Patient's Name Label

(For Downtime Use)

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

Ward/Bed: \_\_\_\_\_ Clinic: \_\_\_\_\_ Class: \_\_\_\_\_

|   |                                     |                         |
|---|-------------------------------------|-------------------------|
| Patient Type<br><input type="checkbox"/> Gynae <input type="checkbox"/> Obst <input type="checkbox"/> Neo<br><input type="checkbox"/> Medicine <input type="checkbox"/> Surgery | Relevant History/Findings/Treatment | Laboratory Barcode      |
| Clinical Diagnosis  |                                     | For Laboratory Use Only |
| Name & Signature of Requesting Doctor   | Specimen Taken By                   |                         |
| Hp / Contact No (indicate if urgent)  | Date & Time Specimen Taken          |                         |
| Name of Consultant I/C  | Date _____ Time _____ am/pm         |                         |

Please (tick) appropriate boxes below

| ROUTINE HAEMATOLOGY         |                          |  |
|-----------------------------|--------------------------|--|
| HA0033                      | <input type="checkbox"/> | Full Blood Count (FBC)   |
| HA0033H                     | <input type="checkbox"/> | Full Blood Count (for husband / partner)   |
| HA0062                      | <input type="checkbox"/> | FBC with Thalassemia Screen (FBC with PBF, Hb Electrophoresis include HbH Inclusion Bodies)                        |
| HA0062H                     | <input type="checkbox"/> | FBC with Thalassemia Screen (for husband/ partner) (FBC with PBF, Hb Electrophoresis include HbH Inclusion Bodies) |
| HA0102                      | <input type="checkbox"/> | Hb Electrophoresis   |
| HA0102H                     | <input type="checkbox"/> | Hb Electrophoresis (for husband / partner)   |
| HA0250                      | <input type="checkbox"/> | White Blood Cells Count (WBC)  |
| HA0101                      | <input type="checkbox"/> | Haemoglobin (Hb)   |
| HA0192                      | <input type="checkbox"/> | Platelet Count   |
| HA0201                      | <input type="checkbox"/> | Reticulocyte Count   |
| HA0034                      | <input type="checkbox"/> | Peripheral Blood Film (PBF)  |
| HA0190                      | <input type="checkbox"/> | Malarial Parasite, blood film  |
| HA0103                      | <input type="checkbox"/> | Haemoglobin H Inclusion Bodies   |
| HA0130                      | <input type="checkbox"/> | Kleihauer Betke Test   |
| HA0220                      | <input type="checkbox"/> | Erythrocyte Sedimentation Rate (ESR)   |
| HA0050                      | <input type="checkbox"/> | Differential Count for Body Fluid<br>Specimen Type: _____  |
| HA0055                      | <input type="checkbox"/> | Blast Cells, CSF   |
| HA0104                      | <input type="checkbox"/> | Plasma Haemoglobin (for ECMO)  |
| HA0061                      | <input type="checkbox"/> | Dengue Virus NS1 Antigen and IgG / IgM Antibodies  |
| SPECIALISED TEST (in-house) |                          |  |
| HA0324                      | <input type="checkbox"/> | Bone Marrow Aspirate Morphology Report   |
| HA0323                      | <input type="checkbox"/> | CD34 HSC Enumeration   |
| HT0214                      | <input type="checkbox"/> | STR Chimerism Analysis*  |
| HT0217X                     | <input type="checkbox"/> | CD3 STR Chimerism Analysis   |
|                             |                          | * Please accompany a matching form for baseline sample   |
| SPECIALISED TEST            |                          |  |
| HA0353                      | <input type="checkbox"/> | Bone Marrow Immunophenotyping  |
| HA0040                      | <input type="checkbox"/> | CD4/CD8 Assay  |
| IH0072                      | <input type="checkbox"/> | HLA ABC  |
| IH0074                      | <input type="checkbox"/> | HLA typing B27   |
| IH0073                      | <input type="checkbox"/> | HLA-DR, blood  |
| HA0170                      | <input type="checkbox"/> | NBT Test   |
| HA0355                      | <input type="checkbox"/> | VNTR Analysis (Donor)  |
| HA0355                      | <input type="checkbox"/> | VNTR Analysis (Recipient)  |
| CYTOCHEMICAL STAINS         |                          |  |
| HA0035                      | <input type="checkbox"/> | Bone Marrow Differential   |
| HA0231                      | <input type="checkbox"/> | PAS, blood   |
| HA0231                      | <input type="checkbox"/> | PAS, bone marrow   |
| HA0232                      | <input type="checkbox"/> | Peroxidase, blood  |
| HA0232                      | <input type="checkbox"/> | Peroxidase, bone marrow  |
| HA0230                      | <input type="checkbox"/> | Sudan Black, blood   |
| HA0230                      | <input type="checkbox"/> | Sudan Black, bone marrow   |

| ROUTINE COAGULATION                               |                          |   |
|---|--------------------------|---|
| CG0111  | <input type="checkbox"/> | APTT & PT (INR)                         |
| CG0100  | <input type="checkbox"/> | APTT                                    |
| CG0123  | <input type="checkbox"/> | APTT 50%                                |
| CG0110  | <input type="checkbox"/> | PT (INR)                                |
| CG0122  | <input type="checkbox"/> | PT 50%                                  |
| CG0073  | <input type="checkbox"/> | Fibrinogen                              |
| CG0011  | <input type="checkbox"/> | Anti Xa Assay (LMWH)                    |
| CG0011  | <input type="checkbox"/> | Anti Xa Assay (UFH)                     |
| CG0124  | <input type="checkbox"/> | Factor VIII Assay                       |
| CG0125  | <input type="checkbox"/> | Factor IX Assay                         |
| CG0120  | <input type="checkbox"/> | Thrombin Time                           |
| SPECIALISED COAGULATION                           |                          |   |
| CG0010  | <input type="checkbox"/> | Anti Thrombin III                       |
| CG0040  | <input type="checkbox"/> | D-Dimer Quantitation                    |
| CG0066  | <input type="checkbox"/> | Factor VIII Circulating Inhibitor       |
| CG0061  | <input type="checkbox"/> | Factor V Assay                          |
| CG0142  | <input type="checkbox"/> | Factor V Leiden                         |
| CG0062  | <input type="checkbox"/> | Factor VII Assay                        |
| CG0075  | <input type="checkbox"/> | Factor VIII Assay Chromogenic           |
| CG0076  | <input type="checkbox"/> | Factor VIII Inhibitor Chromogenic       |
| CG0074  | <input type="checkbox"/> | Factor IX Inhibitor                     |
| CG0068  | <input type="checkbox"/> | Factor X Assay                          |
| CG0069  | <input type="checkbox"/> | Factor XI Assay                         |
| CG0070  | <input type="checkbox"/> | Factor XII Assay                        |
| CG0071  | <input type="checkbox"/> | Factor XIII Assay                       |
| CG0030  | <input type="checkbox"/> | Lupus Anticoagulant                     |
| CG0144  | <input type="checkbox"/> | Protein C (Functional)                  |
| CG0112  | <input type="checkbox"/> | Protein S (Functional)                  |
| CG0060  | <input type="checkbox"/> | Prothrombin Assay                       |
| CG0130  | <input type="checkbox"/> | Reptilase Time                          |
| CG0115  | <input type="checkbox"/> | Von Willebrand Factor Activity Assay    |
| CG0118  | <input type="checkbox"/> | Soluble Fibrin Monomer                  |
| CG0065  | <input type="checkbox"/> | Von Willebrand Factor Antigen           |
| PLATELET FUNCTION (Call 63214629 for Appointment) |                          |   |
| CG0102  | <input type="checkbox"/> | Platelet Aggregation Test (ADP)         |
| CG0143  | <input type="checkbox"/> | Platelet Aggregation Test (Arach Acid)  |
| CG0103  | <input type="checkbox"/> | Platelet Aggregation Test (Collagen)    |
| CG0104  | <input type="checkbox"/> | Platelet Aggregation Test (Epinephrine) |
| CG0105  | <input type="checkbox"/> | Platelet Aggregation Test (Ristocetin)  |

Others: Please specify : \_\_\_\_\_