PathCare
www.pathcarenigeria.com

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Abuja Laboratory: 17 Aminu Kano Crescent, (Opp. Banex Plaza) Wuse II, Abuja. Tel: (09) 291 2563

Ibadan Laboratory: 11 Ladoke Akintola St. Off Are Avenue, New Bodija, Ibadan Tel: 0703 852 3828

Port Harcourt Lab: 41 Evo Road, G.R.A. Phase II, Port Harcourt Tel: (084) 847 193, 463 349

Enugu Laboratory: 26A, Forest Crescent, by Parklane Teaching Hospital, G.R.A. Enugu Tel: 0810 572 9846

Referring Doctor | File Number

Hospital & Ward

RESULT DELIVERY — KEEP FOR PATIENT ☐ | SEND TO HOSPITAL ☐ | E-MAIL ☐

URGENT ☐

Contact Person:

Please tick no. supplied (✓) Tel ☐ Cell ☐

Patient Surname | Patient First Name

Address / Postal Address

Tel. (h) | Tel. (w) | Cell | E-mail

Date of Birth D M Y | GENDER (✓) M ☐ F ☐ | Company / Health Insurance | Company I.D No. / Health Insurance No.

I certify that the above information is correct and give specific consent for selected test(s) to be done. I authorise you to disclose these results to my medical administrators and/or HMOs. I undertake to pay all outstanding monies not covered by the HMO. I fully understand the implication of the test(s) I requested.

SIGNATURE

BILL COMPANY / HEALTH INSURANCE ☐

BILL HOSPITAL ☐ **BILL PATIENT** ☐

Relevant Clinical Data and Present Medication: LMP D ☐☐ M ☐☐ Y ☐☐☐☐ FASTING (✓) ☐ YES ☐ NO

Other Tests:

CHEMISTRY

RENAL / ELECTROLYTES / BONE

1001 ☐ U&E, CREAT
1263 ☐ ELECTROLYTES
1002 ☐ SODIUM
1003 ☐ POTASSIUM
1262 ☐ UREA
1261 ☐ CREATININE
1005 ☐ CREATININE CLEARANCE
1006 ☐ PROTEIN (24hr urine)
1007 ☐ URIC ACID
1008 ☐ URIC ACID (24hr urine)
1009 ☐ MAGNESIUM
1010 ☐ CALCIUM (serum - no cuff)
1011 ☐ PHOSPHATE (serum)
1015 ☐ CALCULUS ANALYSIS
BLD ☐ LD-H
BALB ☐ ALBUMIN (SERUM)

LIVER / PANCREAS

3331 ☐ LFT
1016 ☐ LFT + PROTEINS
1031 ☐ PROT ELECTROPH (Incl. myeloma)
1019 ☐ PROTEIN TOTAL / ALBUMIN
1021 ☐ BILIRUBIN (total, conj)
1022 ☐ ALP
1023 ☐ GGT
1024 ☐ AST
1025 ☐ ALT
1027 ☐ AMYLASE
1029 ☐ LIPASE

CARDIAC

BMYOC ☐ MYOGLOBIN
BCKMBC ☐ CK-MB MASS
2757 ☐ TROPONIN I
BTROPTC ☐ TROPONIN T
1036 ☐ CK

LIPIDS / CAD RISK

1038 ☐ LIPOGRAM
1041 ☐ CHOLESTEROL
BTR ☐ TRIGLYCERIDES

DIABETES

1044 ☐ GLUCOSE fasting
1045 ☐ GLUCOSE Random
3038 ☐ GLUCOSE 2 hr post prandial
1046 ☐ GLUCOSE TOLERANCE TEST (2Hrs)
1048 ☐ HBA1C
EPEPS ☐ C-PEPTIDE
SIGADIA2 ☐ ANTI GAD/IA2 ANTI BODIES
1049 ☐ MICROALBUMIN (urine / quantitative)
BFRU ☐ FRUCTOSAMINE SERUM

INFLAMMATION / IMMUNE

1051 ☐ CRP
1052 ☐ COMPLEMENT C3/C4

ENDOCRINOLOGY

ENDOCRINE - THYROID

1058 ☐ TSH
1060 ☐ FREE T4
1061 ☐ FREE T3
1062 ☐ THYROID FUNCTIONS (TSH / fT4)
☐ THYROID FUNCTIONS TSH / FT3 Ft4
1063 ☐ THYROID ANTIBODIES
2767 ☐ TSH RECEPTOR ANTIBODIES
1012 ☐ PTH

ENDOCRINE - REPRODUCTIVE

1064 ☐ MENOPAUSAL SCREEN
3203 ☐ OVULATORY PROFILE (day 21)
1067 ☐ INFERTILITY (female day 3)
1068 ☐ INFERTILITY (male)
1069 ☐ SEMEN ANALYSIS
1071 ☐ β-HCG quantitative
EHCGM ☐ β-HCG (MALE)
1073 ☐ PROLACTIN (rest 15 minutes)
1074 ☐ FSH
1075 ☐ LH
1076 ☐ OESTRADIOL (E_2)
1077 ☐ PROGESTERONE (Ovulation day 21)
1078 ☐ 17-OH PROGESTERONE
1079 ☐ DHEA-S
1080 ☐ TESTOSTERONE
EAMH ☐ ANTI MULLERIAN HORMONE
ESHBG ☐ SEX HORMONE BINDING GLOBULIN

HYPERTENSION / OTHER ENDOCRINE

3495 ☐ METANEPHRINES 24hr urine (pheo)
2320 ☐ RENIN / ALDOSTERONE
1084 ☐ CORTISOL (serum)
1085 ☐ CORTISOL (24hr urine)
1087 ☐ GROWTH HORMONE
1361 ☐ PITUITARY SCREEN

TUMOUR MARKERS

1088 ☐ PSA
1090 ☐ CEA (G.I.T. , lung, breast)
1091 ☐ CA 19-9 (G.I.T. , pancreas)
1092 ☐ CA 125 (ovary)
1093 ☐ CA 15-3 (breast)
1094 ☐ AFP
1095 ☐ BENCE-JONES PROT (urine)
1096 ☐ β2-MICROGLOBULIN
1097 ☐ OCCULT BLOOD (faeces)

HAEMATOLOGY

GENERAL

1107 ☐ ANTENATAL SCREEN
1108 ☐ ANTENATAL SCREEN + HIV
1110 ☐ FBC
1114 ☐ ESR
1112 ☐ HAEMOGLOBIN
1113 ☐ WBC + DIFF COUNT
1115 ☐ RETICULOCYTES
1116 ☐ IRON STUDIES
1117 ☐ FERRITIN
1118 ☐ FOLATE (serum / rbc)
1119 ☐ VIT B12
5133 ☐ Hb ELECTROPHORESIS (sickling)
1125 ☐ ABO / RH (Blood Grouping)
HG6PD ☐ G6PD
3201 ☐ COOMBS TEST (INDIRECT)
HMALQBC ☐ MALARIA (QBC)
HPCV ☐ PCV
HPLT ☐ PLATELET

COAGULATION

1130 ☐ PT+INR
1132 ☐ PTT
HFIB ☐ FIBRINOGEN
1133 ☐ DIC SCREEN
BXDPC ☐ D-DIMER
HPC ☐ PROTEIN C
HPS ☐ PROTEIN S
HFVIII ☐ FACTOR VIII

ALLERGY

1102 ☐ IgE Total
2265 ☐ PAEDIATRIC FOOD SCREEN
1105 ☐ ADULT FOOD SCREEN
1103 ☐ PHADIATOP (Inhalents)

Other ALLERGIES please specify under OTHER TESTS

DRUGS

DRUG SCREEN

4870 ☐ OPIATES
4871 ☐ COCAINE
4858 ☐ CANNABIS
BALC ☐ ALCOHOL
BUAMPS ☐ AMPHETAMINE
BUBARS ☐ BARBITURATES
BUBENS ☐ BENZODIAZEPINES
BUMAND ☐ MANDRAX
BUNET ☐ METHADONE
BUPCP ☐ PHENCYCLIDINE

Please specify individual or other drugs under OTHER TEST

DRUG SCREEN

1149 ☐ CARBAMAZEPINE
1150 ☐ DIGOXIN
1151 ☐ LITHIUM
1153 ☐ PHENYTOIN
1154 ☐ SODIUM VALPROATE
1785 ☐ CYCLOSPORIN

Please specify OTHER DRUGS under OTHER TEST

SEROLOGY

AUTO-IMMUNE

1396 ☐ ARTHRITIS SCREEN
1165 ☐ AUTO-IMMUNE SCREEN
1214 ☐ ANF + ANTI DNA (ds DNA)
2049 ☐ RHEUMATOID FACTOR (NEPH)
SRAL ☐ RHEUMATOID FACTOR (semi quantitative)
1170 ☐ ENA SCREEN
1171 ☐ CARDIOLIPIN Ab (Lupus anticoagulant)
SSMO ☐ SMOOTH MUSCLE Ab.

INFECTIVE

1372 ☐ ASOT
1363 ☐ ANTI-DNAse B
1174 ☐ CMV
1175 ☐ EBV SEROLOGY
SHEL ☐ H.PYLORI (SERUM)
2345 ☐ RUBELLA IgM
1179 ☐ RUBELLA IMMUNITY (IgG only)
4541 ☐ TOXOPLASMA IgM
1184 ☐ CHLAMYDIA PCR (urine)
SCHL ☐ CHLAMYDIA IGG (SERUM)
1186 ☐ HERPES SIMPLEX I & II (IgM/IgG)
2342 ☐ RPR / VDRL
1194 ☐ WIDAL
SMUM ☐ MUMPS ELISA IGG / IGM
SPOLIO ☐ POLIO VIRUS ANTI BODY
2480 ☐ TORCH SCREEN

HEPATITIS TESTS

1198 ☐ Hep A
1213 ☐ Hep B (s Ag)
SHBSAB ☐ Heb B s (ab) -
SHBE ☐ Heb B e (ag/ab)
SHBCAB ☐ Heb B Core Ab (Total)
SHBCABM ☐ Heb B Core Ab (Igm)
1202 ☐ Hep C
1018 ☐ ACUTE HEPATITIS SCREEN (Hep A IgM +Hep B sAg + Hep Bc IgM)
1201 ☐ CHRONIC SCREEN (Hep B sAg, Hep B cAb, Hep B sAb, HCV Ab)
SHBPCRQ ☐ HEPATITIS B DNA VIRAL LOAD
PPCRHCQ ☐ HEPATITIS C RNA VIRAL LOAD

HIV TESTS

SHIVCOMBO ☐ P24 ANTIGEN +HIV 1 & 2 Ab
1203 ☐ HIV 1 & 2 Ab
1207 ☐ HIV 1 & 2 WESTERN BLOT (confirmation)
1210 ☐ CD4
1211 ☐ HIV VIRAL LOAD

530 ☐ Home

Collected by | Date

Location code | Time

FOR LABORATORY USE

Received by | Logged by

Date | Time | Checked by

☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7
☐8 ☐9 ☐10 ☐20 ☐30 ☐40

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Warri Depot: 61, Effurun/Sapele Rd, Opp. Urhobo College by Odibo Housing Est.,Delta State. Tel: 0702 816 1957

Benin Depot: 1 Coronation Drive, Off Aideyan Street, (Edi Hospital) G.R.A. Benin City, Edo State. Tel: 0810 460 7695

Kaduna Depot: 26, Kinshasa Road Ungwan Rimi, G.R.A. Kaduna North, Tel: 0806 966 0644

Gwagwalada Depot: 249, Community Bank Rd, Phase 2 Gwagwalada, F.C.T.. Tel: (09) 291 3324

Festac Depot: Nymph Plaza, Plot E, First Avenue Festac Town, Lagos. Tel: 0806 304 9410

Ikeja Depot: 63 Oduduwa Cr., G.R.A. Ikeja. Tel: (01) 730 0999 Tel: (01) 448 5403

Referring Doctor	File Number	RESULT DELIVERY: KEEP FOR PATIENT	SEND TO HOSPITAL	E-MAIL	URGENT
Hospital & Ward					Contact Person:
Patient Surname	Patient First Name				Please tick no. supplied (✓) Tel ☐ Cell ☐
Address / Postal Address					
Tel. (h)	Tel. (w)	Cell			E-mail
Date of Birth D M Y	GENDER (✓) M ☐ F ☐	Company / Health Insurance			Company I.D No. Health Insurance No.

I certify that the above information is correct and give specific consent for selected test(s) to be done. I authorise you to disclose these results to my medical administrators and/or HMOs. I undertake to pay all outstanding monies not covered by the HMO. I fully understand the implication of the test(s) I requested.

SIGNATURE

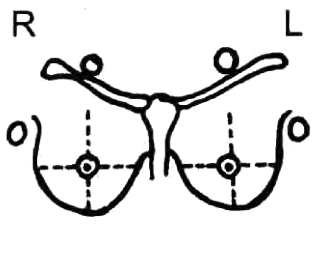
BILL COMPANY / HEALTH INSURANCE ☐

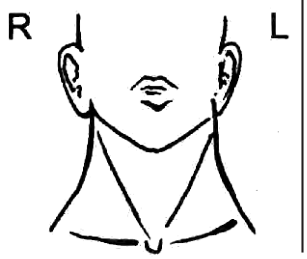
BILL HOSPITAL ☐ BILL PATIENT ☐

Relevant Clinical Data and Present Medication: LMP D ☐☐ M ☐☐ Y ☐☐☐☐ FASTING (✓) ☐ YES ☐ NO

Other Tests:

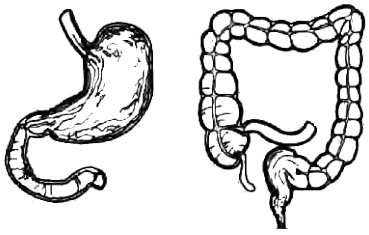
NON-GYNAECOLOGICAL CYTOLOGY





☐ PLEURAL ASRIRATE
☐ PERITONEAL ASRIRATE
☐ BRONCHIAL WASHINGS
☐ SPUTUM
☐ URINE
☐ CSF
☐ FNA
☐ VOIDED
☐ CATHETER

G.I.T. BIOPSY SITE

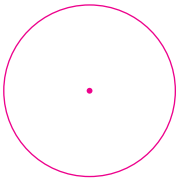


GYNAECOLOGICAL CYTOLOGY (PAP SMEAR)

SPECIMEN SITE

☐ PREGNANT /40W
☐ POST PARTUM /52W
☐ LACTATING
☐ POST MENOPAUSAL
☐ LASER/CRYO.THER.
☐ RADIO/CHEM. R_X
☐ IUD
☐ HORMONES (SUPPLY):
☐ ECTO CERVIX
☐ ENDO CERVIX
☐ POST FORNIX
☐ LATERAL FORNIX FOR HORMONAL ASSESSMENT
☐ ENDOMETRIUM
☐ VAGINAL VAULT
☐ VULVA

PREVIOUS REFERENCE No. _____



MICROBIOLOGY / VIROLOGY

URINE
Midstream: ☐ other: ☐
catheter indwelling/Temporary ☐
MUMC ☐ Urine Microscopy + Chemistry
MUR ☐ Urine MC&S

STOOL
MFMIC ☐ Stool Microscopy
MFAE ☐ Stool MC&S
MFO ☐ Faecal occult blood
M FHPAG ☐ Helicobacter Pylori antigen

CSF CEREBROSPINAL FLUID
MCSF ☐ MC&S plus cell count and chemistry
MCMC ☐ CSF Cellcount + Chemistry

BLOOD
MBCNA ☐ Blood culture MC&S (additional charge for bottle)

4874 ☐ Blood Microscopy (parasites) EDTA bottle
Suspected parasites.....

SWABS
MGMIC ☐ SWAB MICROSCOPY
MPUS ☐ SWAB MC&S
Please state site.....
Throat/nose/ eye/ ear
MSTD ☐ Swab MC&S Vaginal/urethral/cervical

PPCRMRSA ☐ PCR MRSA/MSSA screen culture: (nose, throat, perineum swab) each swab diff lab no/charge

SPUTUM
MSPT ☐ Sputum MC&S
MGAFB ☐ ZN Smear (acid fast bacilli)

FLUIDS
MGA ☐ Aspirate MC&S
Site.....
MGCR ☐ Polarised microscopy for crystals only (synovial fluid)
BFPERI ☐ Fluid chemistry
BFADA ☐ Adenosine deaminase
MFCC ☐ Fluid Cell count
MSTD ☐ Semen MC&S

TB
MTBR ☐ TB culture only (non sputum)
STBGOLD ☐ TB Quantiferon
PPCRMMYCOB ☐ TB PCR screen (Sputum)
BPCRMTB1 ☐ TB PCR (Others)
PPCRMDRTB ☐ TB Sensitivity 1st line
PPCRMDRTBSL ☐ TB Sensitivity 2nd line

CATHETER TIPS:
Please state site.....
Vascular tips/ Non vascular tips/ IUD culture

FUNGI/YEAST
MMKOH ☐ Fungal Microscopy
MMCUL ☐ Fungal culture

TISSUE:
Please state site.....
MGTISS ☐ Tissue MC&S

RESPIRATORY PCR SCREENING
PPCRRB ☐ Respiratory Bacteria Panel
PPCRRV ☐ Respiratory Virus Panel

530		Home
Collected by		Date
Location code		Time

FOR LABORATORY USE

Received by		Logged by
Date	Time	Checked by

☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7 ☐8 ☐9 ☐10 ☐20 ☐30 ☐40

Other countries \ Nigeria \ Nigeria\Microbiology /MSC 06.01.2013

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