





















**MOBILE PHLEBOTOMY LOG**

(Use separate form for each client lab book)

Tech #:

Phlebotomist:

Date:	TOA:	TOD:	CLIENT:				CLIENT #:		
Patient Name	Lab Orders	DOC	TOC	Site			SUF Reason	SUF F/U Plan	Results Received
				1	2	3			

DONs may direct their nurses to utilize this column to record when the result for the lab orders have been received across their printer or fax machine.

Total #

Patients:

Phlebotomist Signature:

Nurse Signature:

SUF Reason:	1-Not collected 2-Hospital 3-Patient expired 4-Patient refused 5-Discharged 6-Order DC'd 7-Venipuncture failed 8-Patient not fasting 9-Patient not at facility 10-No homebound cert.
SUF F/U Plan:	1-Same day return requested 2-Draw tomorrow 3-Draw next routine day 4-Delete order 5-Will call when collected







