



SCC-LIS_TIP OF THE WEEK

MODULE: SoftLab/SoftMic/SoftBank	SOFTWARE VERSION: 4.04/4.08
TOPIC: Softprint File ID On Reports	ISSUE DATE: 28October2016
DISTRIBUTION: End Users_All	PAGE: 1 of 1
ISSUED BY: M-L Dufresne, Territorial LIS Administrator	

TOPIC/QUESTION:

What is all this new verbage at the bottom or reports?

Why should I care?

LABORATORY REPORT Lab No: 70180322

Hav River Regional Health Centre
37911 MacKenzie Highway
Hay River, NT X0E 0R6
Phone: 867-874-8300 Fax: 867-874-8316

Patient: [REDACTED]	Age: [REDACTED]	Sex: [REDACTED]	Encounter: [REDACTED]
HCN: [REDACTED]	Client ID: [REDACTED]		Requested by: NURSE, IN CHARGE
Stanton Chart No: [REDACTED]			Send to: FORT RESOLUTION HEALTH CENT
Pt. Phone: [REDACTED]			Copy to:
Location: FORT RESOLUTION HEALTH CENTRE			
Room: [REDACTED]	Adm. Date: [REDACTED]		

CBC With Platelet and Differential, Glucose Random, ALT, AST, ALP, GGT, Total Protein, Triglycerides, Random

LABORATORY

Requested on: 18/10/16 15:27 Status: FINAL

NURSE, IN CHARGE - Dennis Kue Health Centre General Delivery Fort Resolution NT X0E0M0 CA

TEST	RESULT	REF-RANGES	TEST	RESULT	REF-RANGES
CBC					
<small>Specimens Collected/Rcv'd: LAV 18/10/2016 10:00 18/10/2016 15:27</small>					
WBC	9.6 x10 ⁹ /L	4.0-10.0	CHEMISTRY		
RBC	5.57 x10 ¹² /L	4.50-6.00	General		
Hemoglobin	164 g/L	135-175	Glucose Random	6.0 mmol/L	3.3-11.0
HCT	0.51 L/L	0.41-0.52	As per the Canadian Diabetes Association 2013 Clinical Practice Guidelines, result is Diagnostic of Diabetes when:		
MCV	91 fL	80-100	Random Glucose \geq 11.1 mmol/L and symptoms are present		
MCH	30 pf	26-35	Note: A confirmatory laboratory glucose test (a fasting glucose, random glucose, or 75 g GTT) must be done in all cases on another day in the absence of unequivocal hyperglycemia accompanied by acute metabolic decompensation. However, in individuals in whom type 1 diabetes is a possibility (younger individuals and lean older individuals), to avoid rapid deterioration, confirmatory testing should not delay initiation of treatment.		
MCHC	322 g/L	320-360	Total Protein	78 g/L	60-80
RDW	12.3 %	<15.6	ALT	120 H U/L	21-72
Platelet Count	284 x10 ⁹ /L	140-450	AST	54 U/L	17-59
MPV	8.8 fL		ALP	124 U/L	38-126
DIFFERENTIAL					
Differential					
Neutrophils	58 %		GGT	177 H U/L	15-78
Lymphocytes	26 %		Triglycerides, Random	2.55 mmol/L	0.00-2.83
Monocytes	9 %		Special Reference Ranges - Triglycerides		
Eosinophils	7 %		Desirable: <2.83 mmol/L		
Basophils	1 %		Borderline: 2.83-5.65 mmol/L		
Absolute Cell Count					
Absolute Neutrophils	5.6 x10 ⁹ /L	1.8-7.5	High: >5.65 mmol/L		
Absolute Lymphocytes	2.5 x10 ⁹ /L	1.0-4.5			
Absolute Monocytes	0.9 x10 ⁹ /L	0.0-1.1			
Absolute Eosinophils	0.6 x10 ⁹ /L	0.0-0.7			
Absolute Basophils	0.1 x10 ⁹ /L	0.0-0.2			
CHEMISTRY					
General					
<small>Specimens Collected/Rcv'd: SST 18/10/2016 10:00 18/10/2016 15:27</small>					
Glucose Random	6.0 mmol/L	3.3-11.0			

Lab Key for Results: L - Low H - High AB - Abnormal C - Critical X - Absurd

Form: MM_03L1H
Printed: 10/18/16 23:57

ANSWER/TIP:

This is the Softprint file number for the report. It can be useful as a troubleshooting tool. It shows you where this particular report was actually sent. In the above example you can see that this report was sent to fax code **RES**. If the report was sent to a networked printer you will see the printer code as part of the Softprint ID instead... i.e **F06, H05, I08, S01**