

**McLaren Print System Order**

Order No: 41709  
 Order Date: 2019-01-07  
 User: Theda Simmonds  
 Phone: 810-667-7025

Ship Location: McLaren Occupational and Convenient Care - Lapeer  
 1254 N Main St  
 Lapeer, MI 48446,

**Forms**

Quantity: 1000  
 Paragon Dept No: 65100  
 Dept Name: Occupational Convenient Care  
 Company Number: 810

Order Total Price: 0.00

Item Number: MM-158  
 Item Description: Waived Test Results  
 Revision Date: 9/2016 - Effective 1/2017  
 Print: 1 sided black and white  
 Paper: 20# White Text  
 Size: 8.5 x 11  
 Fold:  
 Finish:  
 Drill: None  
 Misc Info:

McLaren Medical Group  
**WAIVED TEST RESULTS**

Office: \_\_\_\_\_ Date: \_\_\_\_\_

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**URINALYSIS DIP AND MICRO:**

CLARITY:  Clear      COLOR:  Pale Yellow  
 Hazy                       Yellow  
 Cloudy                       Dark Yellow

**CHEMICAL:**

LEUKOCYTES: \_\_\_\_\_  
 NITRATES: \_\_\_\_\_  
 UROBILINOGEN: \_\_\_\_\_  
 PROTEIN: \_\_\_\_\_  
 pH: \_\_\_\_\_  
 BLOOD: \_\_\_\_\_  
 SPEC GRAVITY: \_\_\_\_\_  
 KETONES: \_\_\_\_\_  
 BILIRUBIN: \_\_\_\_\_  
 GLUCOSE: \_\_\_\_\_  
 MICROALBUMIN: \_\_\_\_\_  
 CREATININE: \_\_\_\_\_

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UCS PREGNANCY:  Positive  Negative      MONOSPOT:  Positive  Negative  
 HEMOCULT:  Positive  Negative      K. PFLOR TEST:  Positive  Negative  
 INFLUENZA:  Positive  Negative      STREP A TEST:  Positive  Negative  
 RSV:  Positive  Negative

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GLUCOMETER: \_\_\_\_\_      HEMOGLOBIN: \_\_\_\_\_  
 Enter Reference Range: \_\_\_\_\_      Enter Reference Range: \_\_\_\_\_  
 HEMOGLOBIN A<sub>1c</sub>: (Normal <5.5): \_\_\_\_\_      PT/INR: \_\_\_\_\_  
 Enter Reference Range: \_\_\_\_\_      Enter Reference Range: \_\_\_\_\_

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MEDICAL ASSISTANT: \_\_\_\_\_ Date/Time: \_\_\_\_\_  
 PROVIDER: \_\_\_\_\_ Date/Time: \_\_\_\_\_

TEST RESULTS

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