

**McLaren Print System Order**

Order No: 53434  
 Order Date: 2020-03-20  
 User: Judy Fago  
 Phone: 586-493-3610

Ship Location: Gratiot Medical Building  
 36500 Gratiot, Suite 102  
 Clinton Twp, MI 48035

**Forms**

Quantity: 500  
 Paragon Dept No: 60330  
 Dept Name: Multispecialty  
 Company Number: 260

Order Total Price: 18.00

Item Number: MO-415-B  
 Item Description: LAB TEST RESULTS - Multi Specialty  
 Revision Date: 3/2020  
 Print: 1 sided black and white  
 Paper: 20# White Text  
 Size: 8.5 x 11  
 Fold: None  
 Finish: None  
 Drill: 2 Hole Top  
 Misc Info:

		<b>LAB TEST RESULTS</b>	
Multi Specialty 36500 Gratiot, Suite 102 Clinton Twp, MI 48035 586-790-9003		Patient Name: Last, first, middle	
<b>URINALYSIS</b>	<b>CLARITY</b> <input type="checkbox"/> Clear <input type="checkbox"/> Hazy <input type="checkbox"/> Cloudy <input type="checkbox"/> Turbid	<b>COLOR</b> <input type="checkbox"/> Pale Yellow <input type="checkbox"/> Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Amber <input type="checkbox"/> Other	<b>MULTISTIX</b> Leukocytes _____ Nitrites _____ Urobilinogen _____ Protein _____ pH (Normal 4.5-8.5) _____ Blood _____ Specific Gravity (Normal 1.000-1.030) _____ Ketones _____ Bilirubin _____ Glucose _____ Microalbumin _____ Creatinine _____
<b>SEROLOGY</b>	<b>HEPATIC</b> HBIG _____ HBIG _____ HBIG _____ HBIG _____	<input type="checkbox"/> Positive _____ <input type="checkbox"/> Negative _____ <input type="checkbox"/> Positive _____ <input type="checkbox"/> Negative _____ <input type="checkbox"/> Positive _____ <input type="checkbox"/> Negative _____	Q1 HSG <input type="checkbox"/> Q2 HSG <input type="checkbox"/> Q3 HSG <input type="checkbox"/> Q4 HSG <input type="checkbox"/>
<b>OTHER ORDERED TESTS</b>		<b>NORMAL</b> BUNCRE _____ 70-120 mg/dl CREA _____ 4.0-6.0% ESR _____ 0-50 mm/hr HEMOGLOBIN _____ Male 13.0-17.0 g/dl _____ Female 12.0-16.0 g/dl _____ Children 2-16 yrs 11.0-16.0 g/dl _____ Microscopic	
Spec Info: _____			
Medical Assistant: _____		DATE: _____	
Physician: _____		DATE: _____	