

EMORY WRP Medical Laboratory

Outreach Laboratory Request Form

Patient Information (print or use label)

Last First Middle

MRN Number : _____ Sex: M / F

Date of Birth: _____ Dx / ICD-10: _____

Address: _____

Specimen Collection Information: Date _____ Time: _____

Client Information:

Client: _____

Address: _____

Requesting Physician: _____

Phlebotomist Name: _____

Redraws & Recollects: _____

Fax Results to: _____

Criticals called to : _____

	Chemistry		Chemistry (cont)		Hematology/Coagulation
	Ammonia Level		Lactic Acid Level		Body Fluid Cell Count with Differential
	Acetaminophen Level		Lipase		Body Fluid Crystals
	Albumin Level		Lithium Level		Complete Blood Count Order Panel (CBC)
	Amylase Level		Liver Function Panel		CBC w/ Auto Diff
	ALT		Magnesium Level		D-Dimer, Quantitative
	AST		Phenobarbital Level		Hematocrit
	Basic Metabolic Panel		Phenytoin Level (Dilantin)		Hemoglobin
	Bilirubin Total		Potassium Level		Partial Thromboplastin Time* (APTT/PTT,A)
	Bilirubin Total and Direct		Protein Total		Platelet Level
	Blood Urea Nitrogen (BUN)		Renal Function Panel		Protime- INR
	B-natriuretic Peptide (BNP)		Sodium Level		
	Calcium Level Total		Theophylline		Microbiology
	Carbamazepine Level		Troponin-I, HS		Aerobic Culture
	Chemistry Profile Lipid		TSH		Spec Type: Source:
	Chloride Level		Uric Acid		Anaerobic/Aerobic Culture
	Carbon Dioxide		Valproic Acid Level		Spec Type: Source:
	CK		Vancomycin Level Peak		Blood Culture
	Comprehensive Metabolic Panel		Vancomycin Level Random		Body Fluid Culture – Source:
	Creatinine		Vancomycin Level Trough		Gram Stain
	Digoxin Level				Urine Culture
	Electrolyte Panel (CO2,CL,K,NA)				Source:
	Ethanol Level (ALC)		Urinalysis		Other
	Gentamycin Level Peak		Toxicology Drug Screen, Urine		
	Gentamycin Level Random		Urinalysis Dipstick		
	Gentamycin Level Trough		Urinalysis Microscopic		
	Glucose Quantitative Serum				

See reverse for detailed drop off instructions for each campus.

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Drop off Instructions

- **All specimens must be clearly labeled with full name, DOB, and date & time of collection.**
- **All specimens should be accompanied by a requisition and packaged as one patient per bag.**
- **Please call us at 478-542-7770 for collection information.**

Emory Warner Robins Hospital

1601 Watson Blvd, Warner Robins, GA 31093

Enter through Same Day Services (back of hospital, next to emergency room) and speak to registration. They will register your samples and direct you to the lab. They are open 6:30a -5:00pm, M-F.

Emory Perry Hospital

1120 Morningside Dr, Perry GA, 31069

Enter through Emergency Room entrance and go to left. The left side is Registration and the Laboratory.