

LABORATORY - FLOW CYTOMETRY

FORM L4

ID LABEL HERE ---> |_| - |_|_| - |_|_|_|_| - |_|

VISIT #: _____ FORM COMPLETED BY: _____

VERSION DATE: 08/15/94

ANY MISSING OR INCOMPLETE TEST RESULTS MUST BE EXPLAINED ON THIS FORM.

A1. ARE TEST RESULTS AVAILABLE?

- Yes 1 (A2)
- No, Sample Inadequate 2 (END)
- No, Other Reason..... 3

_____ (END)
(SPECIFY)

A2. DATE SAMPLE DRAWN:

___M___ / ___D___ / ___Y___

a) DATE SAMPLE PREPARED:

___M___ / ___D___ / ___Y___

				<u>QUADRANT #</u>	<u>RESULT</u>
A3.	a)	CD45 (Bright +) CD14+	(MONOS)	Q2	_ _ %
	b)	CD45 (Bright +) CD14-	(LYMPHS)	Q4	_ _ _ %
A4.	a)	CD3- CD4+		Q1	_ _ %
	b)	CD3+ CD4+		Q2	_ _ %
	c)	CD3- CD4-		Q3	_ _ %
	d)	CD3+ CD4-		Q4	_ _ %
A5.	a)	CD3- CD8+		Q1	_ _ %
	b)	CD3+ CD8+		Q2	_ _ %
	c)	CD3- CD8-		Q3	_ _ %
	d)	CD3+ CD8-		Q4	_ _ %

WIHS ID#

VISIT #

				<u>QUADRANT#</u>	<u>RESULT</u>
A6.	a)	CD3-	CD19+	Q1	_ _ _ %
	b)	CD3+	CD19+	Q2	_ _ _ %
	c)	CD3-	CD19-	Q3	_ _ _ %
	d)	CD3+	CD19-	Q4	_ _ _ %
A7.	a)	CD3-	(CD56+ and CD16+)	Q1	_ _ _ %
	b)	CD3+	(CD56+ and CD16+)	Q2	_ _ _ %
	c)	CD3-	(CD56- and CD16-)	Q3	_ _ _ %
	d)	CD3+	(CD56- and CD16-)	Q4	_ _ _ %

A8. Comments

Yes 1
 No..... 2 (END)

<u>CODES FOR COMMENTS</u>	
[01] SPECIMEN CLOTTED	[20] SCATTER POOR, CANNOT SET GATE
[02] SPEC. HELD AT 4 DEGREES C	[24] DISTINCT LYMPH, CLUSTER NOT SEEN
[03] SPEC. REC'D AT >25 DEGREES	[31] HIGH BACKGROUND IN ALL TUBES
[04] SPECIMEN QNS	[40] ANTIBODY PATTERN UNUSUAL
[05] LAB ACCIDENT/ERROR	[41] INCOMPLETE HEMOLYSIS
[10] <2000 CELLS ANALYZED	[50] FLOW CYTOMETER MALFUNCTION
[11] INSUFFICIENT CELLS	[51] NRBCs PRESENT
[12] HIGH FL SUBTRACTION REQ'D	[99] OTHER (SPECIFY BELOW)

b.
PLEASE SPECIFY IF COMMENT CODE IS "99"

A9.	_ _ _	_____
A10.	_ _ _	_____
A11.	_ _ _	_____
A12.	_ _ _	_____
A13.	_ _ _	_____