

**LABORATORY - LIVER AND RENAL FUNCTION TESTS  
PARTIAL CHEMISTRIES**

**FORM L5**

ID LABEL  
HERE --->

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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. SGOT            |\_|\_|\_|\_|        (IU/L or U/L or MU/ML)
- b. SGPT            |\_|\_|\_|\_|        (IU/L or U/L or MU/ML)
- c. ALK. PHOS.    |\_|\_|\_|\_|        (IU/L or U/L)
- d. Albumin        |\_|\_|\_|. |\_|      (gm/dl)
- e. BUN             |\_|\_|\_|         (mg/dl)
- f. Creatinine      |\_|\_|\_|. |\_|      (mg/dl)