# LABORATORY TESTS



PRG Notes

# Hematology / Coagulation

## → Complete Blood Count

Use: basic blood evaluation AKA: CBC

Note: usually includes Hct, Hgb, WBC counts and differential, platelet count, and often RBC count.

# **→** Erythrocyte Count

AKA: RBC Count (red blood cell) High: acute hepatitis, acute MI, PID, rihetumatoiid arthritis

Low: anemias, leukemias, and following severe hemorrhage

## → Hematocrit

Use: determines the % of whole blood composed of red blood cells AKA: Het HOT

High: dehydration, Addison's disease, polycythemia due to dehydration and shock.

Low: anemia, severe hemorrhage

#### Hemoglobin

Use: measures High in the blood AKA: Hb. Hob

High: dehydration, pernicious anemia,

sickle cell anemia, thalassemia, polycythemia, obstructive pulmonary diseases, CHF

Low: excessive fluid intake, iron deficiency anemia, pregnancy

# → Hemoglobin, Glycosylated

Use: monitors blood sugar control AKA: HbA1C, GHb. DM control index Note: Abnormal results over time indicate inadequate control.

#### → Leukocyte Count

AKA: WBC Count (white blood cell) High: acute infections, leukemias. noute hemorrhage

Low: chemotherapy, shock, cachexia

#### → Partial Thromboplastin Time Use: measures intrinsic clotting time

AKA: APTT, Activated High: cirrhosis, leukemia, vitamin K. deficiency, hemophilia

Low: extensive ca, early stages of disseminated intravascular coagulation

#### → Platelet Count

Use: dx a bleeding disorder or bone marrow disease

AKA: thrombocyte count. High: iron deficiency anemia, post-op patients, malignancies, polycythemia Low: acute leukemia, aplastic anemia, thrombocytopenic purputa

#### → Prothrombin Time

Use: monitor blood-thinning medications used to prevent blood clots. AKA: PT. Pro Time Prolonged: severe liver damage, heparin use, low vitamin K diet, colitis, chronic diarrhea

#### → Reticulocyte Count

Use: measures % of reticulocytes (slightly immature red blood cells) High: need for RBCs, hemolytic anomias, acute or severe bleeding Low: bone marrow failure (toxicity, tumor, fibrosis, infection), cirrhosis, iron deficiency radiation therapy

#### → Sedimentation Rate

Use: monitors inflammatory and malignant diseases, and acute Mil AKA: erythocyte sedimentation rate. sed rate, ESR

High: pregnancy, menstruation, infectious diseases, tissue damage

## Serum Electrolytes

Note: essential to normal metabolism. exist as acids, bases, and salts AKA: "Lytos:

#### → Calcium, Total

Use: blood test to screen/monitor diseases of bone or calcium regulation (diseases of parathyroid and kidneys). AKA: Ca+2, Ca++, serum calcium High: metastatic ca of bone, lung. breast, hyperparathyroidism, Paget's disease, excess vitamin D Low: severe pancreatitis, uremia, renal insufficiency, malabsorption.

osteomalacia, hypoparathyroidism

#### - Chloride

AKA: CI

High: renal insufficiency, necrosis. dehydration, renal tubular acidosis. Cushing's syndrome, hyperventilation Low: CHF, chronic renal failure, diabetic acidosis, diarrhea, excessive sweating, emphysema.

#### - Magnesium

AKA: Mo+2 High; renal insufficiency, use of antacids with magnesium

Low: chronic alcoholism, chronic diarrhea, hepatic insufficiency

#### → Phosphorus

AKA: PO4 High; renal insufficiency, healing fx, hypoparathyroidism, excess vitamin D Low: chronic alcoholism, ketoacidosis, hyperalimentation, hyperparathy-

#### → Potassium:

AKA: K

High; renal insufficiency, adrenal insufficiency, Addison's disease, hypoventilation.

Low: chronic diamhea, vomiting or malabsorption syndrome, diabetic acidosis, chronic kidney disease, use of this zide diunetics.

## **→** Sodium

AKA: NA

High: (hypernatremia) excessive dietary intake, Cushing's disease. excessive sweating, diabetes incipitus Low: (hyponatremia): ascites, CHF, insufficient intake, diarrhea, vemiting, SIADH (syndrome of inappropriate diuretic hormone), diuretic use. chronic renal insufficiency, expessive water intake, peripheral edema relevational authorizana

## Serum / Urine / Stool

#### → Acid Phosphatase

High: metastatic ca of bone, prostatic ca, some liver diseases, Ml. pulmonary embolism, hyperparathyroidism. hepatobiliary diseases

## → Alanine Aminotransferase

Use: screens for liver disease AKA: ALT, SGPT

High: acute hepatitis, liver necrosis.

## **→** Albumin

Use: screen for liver or kidney disease or evaluate nutritional status. AKA: ALB

Note: albumin is a protein

High: shock, dehydration, multiple

## **Abbreviations**

AKA..... also known as DM ..... diabetes melitus Ca cancer, calcium Fx fracture CHF .... congestive heart failure GI gastrointestinal \_\_\_\_diagnosis IV ..... intravenous Dx....

......myocardial infarction NIDDM non-insulin dependent DM NSAID non-steroidal arctir/flammatory beatment.

Generally accepted examples of conditions indicated by high and low results are provided. However, laboratory tests are only part of the diagnostic process and other documentation needs to be reviewed

# **Prg Quick Notes Laboratory Tests**

Michael J. Stewart, James
Shepherd, Allan Gaw, Michael
Murphy, Robert A. Cowan, Denis St. J.
O'Reilly

# **Prg Quick Notes Laboratory Tests:**

2004 Coding Workbook for the Physician's Office Alice Covell, 2004 This workbook contains coding exercises referencing each section of the CPT 4 and ICD 9 CM coding manuals Exercises requiring HCPCS Level II codes are also provided Condition and procedure statements in the exercises reflect the current annual editions of the coding manuals by completing the exercises learners will expand their medical vocabulary and increase their coding skills for the physician s office Also included are the Centers for Medicare and Medicaid Services CMS guidelines for diagnosis coding and reporting by physicians Learners need current CPT 4 ICD 9 CM and HCPCS codin Professional Review Guide for the CCA Examination, 2004 Edition Patricia J. Schnering, Christine Wagner, Calee Leversee, Toni Cade, Anita Hazelwood, Carol Venable, 2004 This valuable manual contains Study tips and a comprehensive resource list Multiple choice questions to review Biomedical Sciences Information Technology Healthcare Data Content Health Care Delivery Systems Clinical Classification Systems ICD 9 CM and CPT coding Official Coding Guidelines Billing Reimbursement and Compliance Commonly Administered Drugs Lab Values Official Guidelines for ICD 9 CM Guidelines for Coding and Reporting Use the book and the Interactive CD ROM to practice interpreting documentation and applying your clinical knowledge in assigning codes to diagnoses and procedure for a variety of patient settings This program has been approved for 6 continuing education credits for use in fulfilling the continuing education requirements of the American Health Information Management Association AHIMA Population Health Analytics Martha L. Sylvia, Ines Maria Vigil, 2021-03 Binding PB

The Essentials of Instructional Design Abbie H. Brown, Timothy D. Green, 2015-06-26 The Essentials of Instructional Design 3rd Edition introduces the essential elements of instructional design ID to students who are new to ID The key procedures within the ID process learner analysis task analysis needs analysis developing goals and objectives organizing instruction developing instructional activities assessing learner achievement and evaluating the success of the instructional design are covered in complete chapters that describe and provide examples of how the procedure is accomplished using the best known instructional design models Unlike most other ID books The Essentials of Instructional Design provides an overview of the principles and practice of ID without placing emphasis on any one ID model Offering the voices of instructional designers from a number of professional settings and providing real life examples from across sectors students learn how professional organizations put the various ID processes into practice This introductory textbook provides students with the information they need to make informed decisions as they design and develop instruction offering them a variety of possible approaches for each step in the ID process and clearly explaining the strengths and challenges associated with each approach

Clinical Biochemistry Allan Gaw, 2008-01-01 2014 BMA Medical Book Awards Highly Commended in Basic and Clinical Sciences category This fully revised edition of Clinical Biochemistry offers essential reading for today s medical student and all those who require a concise practical introduction to this subject Topics are clearly presented in a series of

double page learning units each covering a particular aspect of clinical biochemistry Four sections provide a core grounding in the subject Introducing clinical biochemistry gives a basic insight in to the workings of a modern hospital laboratory and the interpretation of test results Core biochemistry covers the bulk of routine analyses undertaken and their relevance in a clinical setting Endocrinology covers the thyroid adrenal pituitary and gonadal function testing Specialised investigation provides an overview of less requested yet important analyses Every learning unit has been thoroughly checked and updated to reflect the latest field developments and clinical best practice and all new material is included on Myocardial infarction Gastrointestinal disorders Osteoporosis Proteinuria The diagnosis of diabetes Trace metals Screening tests Paediatrics Covers clinical biochemistry from the point of view of the clinician using the diagnostic service Presents topics in easily accessible two page spreads Includes mini case histories key point boxes flowcharts and summary points Well illustrated with four color drawings and clinical photographs New appendix added of annotated web resources for students to take further many of the topics covered in the book To reflect the difficulties people have sometimes in analyzing hyper and hypo kalaemia the existing spread is split into two one spread on hyperkalaemia and another on hypokalaemia The spread on hypertension will be revised and updated to reflect the fact that biochemistry is used as much or more in guiding treatment as it is in screening for secondary hypertension Spreads on Myocardial Infarction Cancer and Tumour Markers will all Public Health 101 with Navigate Advantage Access Richard Riegelman, Brenda substantially revised and updated Kirkwood, 2023-10-06 Public Health 101 Improving Community Health Fourth Edition by Riegelman and Kirkwood provides a big picture population perspective on the determinants of health and disease and the tools available to protect and promote health Through a unique set of case studies vignettes and extensive examples readers will come away with a clear understanding of how public health affects their everyday lives They will learn and apply frameworks for thinking about public health issues and gain a deeper understanding about the health news they are exposed to each day International Conference on the Bearing Capacity of Roads, Railways and Airfields Inge Hoff, Rabbira Saba, Helge Mork,2022-07-07 Innovations in Road Railway and Airfield Bearing Capacity Volume 3 comprises the third part of contributions to the 11th International Conference on Bearing Capacity of Roads Railways and Airfields 2022 In anticipation of the event it unveils state of the art information and research on the latest policies traffic loading measurements in situ measurements and condition surveys functional testing deflection measurement evaluation structural performance prediction for pavements and tracks new construction and rehabilitation design systems frost affected areas drainage and environmental effects reinforcement traditional and recycled materials full scale testing and on case histories of road railways and airfields This edited work is intended for a global audience of road railway and airfield engineers researchers and consultants as well as building and maintenance companies looking to further upgrade their practices in the field

MEDINFO 2019: Health and Wellbeing e-Networks for All Lucila Ohno-Machado, 2019-11-15 Combining and

integrating cross institutional data remains a challenge for both researchers and those involved in patient care Patient generated data can contribute precious information to healthcare professionals by enabling monitoring under normal life conditions and also helping patients play a more active role in their own care This book presents the proceedings of MEDINFO 2019 the 17th World Congress on Medical and Health Informatics held in Lyon France from 25 to 30 August 2019 The theme of this year's conference was Health and Wellbeing E Networks for All stressing the increasing importance of networks in healthcare on the one hand and the patient centered perspective on the other Over 1100 manuscripts were submitted to the conference and after a thorough review process by at least three reviewers and assessment by a scientific program committee member 285 papers and 296 posters were accepted together with 47 podium abstracts 7 demonstrations 45 panels 21 workshops and 9 tutorials All accepted paper and poster contributions are included in these proceedings. The papers are grouped under four thematic tracks interpreting health and biomedical data supporting care delivery enabling precision medicine and public health and the human element in medical informatics. The posters are divided into the same four groups The book presents an overview of state of the art informatics projects from multiple regions of the world it will be of interest to anyone working in the field of medical informatics Clinical Biochemistry E-Book Michael J. Stewart, James Shepherd, Allan Gaw, Michael Murphy, Robert A. Cowan, Denis St. J. O'Reilly, 2011-12-05 This edition covers all aspects of the subject needed by medical students It is a volume in the Illustrated Colour Text series with the subject matter divided into double page spreads this makes the information very accessible to the reader Full use is made of flow charts and other graphics clinical boxes summary points case histories and clinical photographs. The whole orientation of the book is to concentrate on how clinical biochemistry relates to the care of the patient and to ensure that the medical student understands how to interpret laboratory Covers clinical biochemistry from the point of view of the clinician using the diagnostic service Presents topics in easily accessible two page spreads Includes mini case histories key point boxes flowcharts and summary points Well illustrated with four color drawings and clinical photographs New appendix added of annotated web resources for students to take further many of the topics covered in the book To reflect the difficulties people have sometimes in analyzing hyper and hypo kalaemia the existing spread is split into two one spread on hyperkalaemia and another on hypokalaemia The spread on hypertension will be revised and updated to reflect the fact that biochemistry is used as much or more in guiding treatment as it is in screening for secondary hypertension Spreads on Myocardial Infarction Cancer and Tumour Markers will all substantially revised and updated *Drug Discovery and Development Explained:* Introductory Notes for the General Public Bruno Villoutreix, Jean-Luc Poyet, Katya Tsaioun, 2024-12-11 Drug discovery and development involve complex processes highly integrated interdisciplinary research and collaborations between academic groups and the private sector It is a long and resource intensive endeavor characterized by a high attrition rate Yet new strategies are being explored aiming at accelerating the development of novel treatments from the combination of artificial

intelligence with cutting edge experimental approaches and the development of novel types of therapeutic agents to personalized medicine Because drug discovery and development is a vast field with many stakeholders and potential conflicts of interest it is important that the general public gains basic knowledge about the main concepts to be able to make informed healthcare decisions for themselves and family members understand discussions in the news and social networks or proposals from policymakers and politicians Furthermore people are directly affected by the field as patients seeking novel and better treatments as volunteers in clinical trials or as members of patient organizations Building public knowledge and understanding about the field of drug discovery and development will also help to address growing public concerns about how health data should be collected and used

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