



Province of Laguna  
 City of Santa Rosa  
 City Health Office II



## LABORATORY DEPARTMENT

NAME: \_\_\_\_\_  
 REQUESTING PHYSICIAN: \_\_\_\_\_

AGE: \_\_\_\_\_  
 DATE REQUESTED: \_\_\_\_\_

SEX: \_\_\_\_\_

### URINALYSIS

PHYSICAL CHARACTERISTICS		CRYSTALS	
Color		Amorphous Urates	
Transparency		Amorphous PO4	
Reaction		Ca Oxalates	
Specific Gravity		Others	
CHEMICAL TESTS		CASTS	
Albumin/Protein		Hyaline	
Glucose		Pus Cell Cast	
MICROSCOPIC FINDINGS		Red Blood Cell Cast	
Pus Cells		<i>Granular</i>	
RBC		Coarse	
<i>Epithelial Cells</i>		Fine	
Squamous		OTHERS	
Renal			

*Mary Ann O. Cabrera*

**MARY ANN O. CABRERA, M.D., D.P.S.P.**

License Number: 78803

**Medical Technologist**

**Pathologist**