

**ROMEL CRUZ HOSPITAL**

702 Matimbo, Malolos, Bulacan

DOH-BRL LICENSE NO. 2480

HEMATOLOGY LABORATORY RESULT FORM

NAME OF PATIENT	AGE/SEX	WARD	DATE

EXAMINATION	VALUE	UNIT	REFERENCE VALUE
WBC		/L	4.0 - 10.0
Lymph#		/L	0.8 - 4.0
Mid#		/L	0.1 - 1.5
Gran#		/L	2.0 - 7.0
Lymph%		%	20.0 - 40.0
Mid%		%	3.0 - 15.0
Gran%		%	50.0 - 70.0
RBC		/L	3.50 - 5.50
HGB		g/L	110 - 160
HCT		%	37.0 - 54.0
PLT		/L	100 - 300
CLOTTING TIME		Min ; Sec	2'00" - 7'00"
BLEEDING TIME		Min ; Sec	1'00" - 5'00"

MEDICAL TECHNOLOGIST