

Rev00
Fecha de Vig
15/2/17

SOLICITUD DE ANALISIS VETERINARIOS



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| | |
|------------------------|--------------------|
| NOMBRE | FECHA |
| ESPECIE | RAZA |
| PROPIETARIO | SEXO |
| DIAGNOSTICO PRESUNTIVO | EDAD |
| | HORA DE EXTRACCION |

| | Tipo de tubo | | | | Tipo de tubo | | | | Tipo de tubo | | |
|--------------------------------------|--------------|------|---------|---|--------------|------|---------|--------------------------------------|--------------|------|---------|
| | violeta | rojo | celeste | | violeta | rojo | celeste | | violeta | rojo | celeste |
| <input type="radio"/> Hemograma | X | | | <input type="radio"/> GGT | X | | | <input type="radio"/> Reticulocitos | X | | |
| <input type="radio"/> Uremia | | X | | <input type="radio"/> LDH | X | | | <input type="radio"/> Colesterol | | X | |
| <input type="radio"/> Glucemia | | X | | <input type="radio"/> Amilasa | X | | | <input type="radio"/> Calcio | | X | |
| <input type="radio"/> Creatininemia | | X | | <input type="radio"/> Proteinas Totales | X | | | <input type="radio"/> Fosforo | | X | |
| <input type="radio"/> Hepatograma | | X | | <input type="radio"/> Albumina | X | | | <input type="radio"/> TSH | | X | |
| <input type="radio"/> GOT | | X | | <input type="radio"/> Coagulograma | | X | | <input type="radio"/> T3 | | X | |
| <input type="radio"/> GPT | | X | | <input type="radio"/> TP | | X | | <input type="radio"/> T4 | | X | |
| <input type="radio"/> FAL | | X | | <input type="radio"/> KPTT | | X | | <input type="radio"/> T4 Libre | | X | |
| <input type="radio"/> Bilirrubinemia | | X | | <input type="radio"/> Plaquetas | X | | | <input type="radio"/> Orina completa | | | |

- Perfil Tiroideo: HEM COL TSH T4 T4 Libre
- Perfil Hepatico: HEM HEP PROT ALBUMINA GGT
- Perfil Renal: HEM URE CRE FOS ORI

Otros estudios:

SOLICITADO POR Dr./Dra.