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| **INSTITUCION** | | **AREA MEDICA** | |  | **LOCALIZACION** | | | | **HISTORIA CLÍNICA** |
|  | |  | | | PARROQUIA CANTÓN PROVINCIA | | | |
|  | |  |  |  |
| **APELLIDO PATERNO** | **APELLIDO MATERNO** | | **PRIMER NOMBRE** | | **SEGUNDO NOMBRE** | | | | **CÉDULA DE CIUDADANIA** |
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| FECHA SOLICITUD | HORA | SERVICIO | SALA | CAMA | PROFESIONAL SOLICITANTE |  |  | PRIORIDAD | |  |  | FECHA TOMA |
|  |  |  |  |  |  | URGENTE |  | NORMAL |  | CONTROL |  |  |

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| **3 COPROLOGICO** | |
| COPROPARASITARIO |  |
| SANGRE OCULTA |  |
| INV. POLIMORFO NUCLEARES |  |
| ROTAVIRUS |  |

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| **2 QUIMICA SANGUINEA** | | | |
| GLUCOSA EN AYUNAS |  | TRANSAMINADA PIRÚVICA |  |
| GLUCOSA 2 HORAS |  | TRANSAMINASA OXALACETICA |  |
| UREA |  | FOSFATASA ALCALINA |  |
| CREATININA |  | COLESTEROL TOTAL |  |
| ACIDO URICO |  | COLESTEROL HDL |  |
| BILIRRUBINAS |  | COLESTEROL LDL |  |
| PROTEINAS |  | TRIGLICERIDOS |  |

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| **1 HEMATOLOGIA** | | | |
| BIOMETRIA HEMÁTICA |  | INDICES HEMÁTICOS |  |
| PLAQUETAS |  | T. PROTROMBINA |  |
| GRUPO / Rh |  | TIEMPO T. PARCIAL |  |
| RETICULOCITOS |  | DREPANOCITOS |  |
| HEMATOZOARIO |  | COOMBS DIRECTO |  |
| CÉLULA L.E. |  | COOMBS INDIRECTO |  |
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| **6 OTROS** |
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| **4 UROANALISIS** | | | |
| ELEMENTAL Y MICROSCOPICO |  | PRUEBA DE EMBARAZO  CULTIVO-ANTIBIOGRAMA |  |
| GOTA FRESCA |  |  |
| GRAM |  |  |  |

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| **5 BACTERIOLOGIA** | | | | |
| GRAM |  | FRESCO  CULTIVO - ANTIBIOGRAMA | |  |
| ZIEHL |  |  |
| HONGOS |  | MUESTRA DE |  | |

**Elaborado y aprobado por: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MÉDICO DEPARTAMENTO BIENESTAR ESTUDIANTIL**