

SC-LA-۰۰۲	کد سند:	محدوده بحرانی آزمایشات	 
Blood Chemistry	Low	High	
Ammonia	None	$> 40 \mu\text{mol/L}$	
Amylase	None	$> 200 \text{ U/L}$	
Arterial pCO_2	$< 20 \text{ mm Hg}$	$> 70 \text{ mm Hg}$	
Arterial pH	$< 7.2 \text{ U}$	$> 7.6 \text{ U}$	
Arterial pO_2 (adults)	$< 40 \text{ mm Hg}$	None	
Arterial pO_2 (newborns)	$< 37 \text{ mm Hg}$	92 mm Hg (SD=12)	
Bicarbonate	$< 10 \text{ mEq/L}$	$> 40 \text{ mEq/L}$	
Bilirubin, total (newborns)	None	$> 10 \text{ mg/dL}$	
Calcium	$< 6 \text{ mg/dL}$	$> 13 \text{ mg/dL}$	
Carbon dioxide	$< 10 \text{ mEq/L}$	$> 40 \text{ mEq/L}$	
Cardiac troponin T (cTnT)	None	$> 0.1 \mu\text{g/L}$	
Cardiac troponin I (cTnI)	None	$> 1.6 \mu\text{g/L}$	
Chloride	$< 80 \text{ mEq/L}$	$> 110 \text{ mEq/L}$	
CK	None	$> 3 \times \text{upper limit of normal (ULN)}$	
CK-MB	None	$> 0\% \text{ or } \geq 10 \mu\text{g/L}$	
Creatinine (except dialysis patients)	None	$> 0.5 \text{ mg/dL}$	
Glucose	$< 40 \text{ mg/dL}$	$> 450 \text{ mg/dL}$	
Glucose (newborn)	$< 30 \text{ mg/dL}$	$> 300 \text{ mg/dL}$	
Magnesium	$< 1.0 \text{ mg/dL}$	$> 4.7 \text{ mg/dL}$	

Phosphorus	<1 mg/dL	None
Potassium	<5, 6 mEq/L	>6, 7 mEq/L
Potassium (newborns)	<5, 6 mEq/L	>6, 7 mEq/L
Sodium	<120 mEq/L	>160 mEq/L
BUN (except dialysis patients)	7 mg/ dL	>10 mg/dL
Cerebrospinal Fluid	Low	High
Glucose	<10 % of blood level	
Protein, total positive bacterial stain, antigen detection, culture or India ink preparation	None	>10 mg/dL
WBC in CSF	None	>10 / cu mm
Presence of malignant cells or blast or any other body fluid		

CHEMISTRY

Test Report Name	Age	Critical Low	Critical High	Units
Ammonia – (Florida units are $\mu\text{mol/L}$, MCHS&RST units are mcmol/L)	≥ 1 yr	–	≥ 200	mcmol/L
*Ammonia – Arizona (Deviation in units)	≥ 1 yr	–	≥ 500	mcg/dL
Ammonia – (Florida units are $\mu\text{mol/L}$, MCHS&RST units are mcmol/L)	< 1 yr	–	≥ 100	mcmol/L
*Ammonia – Arizona (Deviation in units)	< 1 yr	–	≥ 150	mcg/dL
Bilirubin Total, Serum	< 1 yr	–	≥ 15.0	mg/dL
Calcium, Total		≤ 6.5	≥ 13.0	mg/dL
Calcium, Ionized, Blood	< 1 yr	≤ 2.0	≥ 6.0	mg/dL
Calcium, Ionized, Blood	≥ 1 yr	≤ 3.0	≥ 6.5	mg/dL
*Calcium, Ionized, Blood - Florida (Deviation due to methodology difference)	< 1 yr	≤ 3.0	≥ 5.5	mg/dL
*Calcium, Ionized, Blood - Florida (Deviation due to methodology difference)	≥ 1 yr	≤ 3.0	≥ 6.0	mg/dL
Carbon Monoxide (Carboxyhemoglobin Level)		–	≥ 20	%
Creatinine, Blood/Plasma/Serum	1 day – 4 weeks	–	≥ 1.5	mg/dL
Creatinine, Blood/Plasma/Serum	5 weeks – 23 mos	–	≥ 2.0	mg/dL
Creatinine, Blood/Plasma/Serum	2 yrs – 11 yrs	–	≥ 2.5	mg/dL
Creatinine, Blood/Plasma/Serum	12 yrs – 15 yrs	–	≥ 3.0	mg/dL
Creatinine, Blood/Plasma/Serum	16 yrs – 17 yrs	–	≥ 10.0	mg/dL
Creatine Kinase, Total		–	$\geq 10,000$	U/L
FT4 (Free Thyroxine)	< 50 yrs	–	≥ 7.8	ng/dL
FT4 (Free Thyroxine)	≥ 50 yrs	–	≥ 6.0	ng/dL
FT4 (Free Thyroxine) – Florida	All ages	–	≥ 7.8	ng/dL
Glucose, Plasma/Serum	< 4 weeks	≤ 40	≥ 400	mg/dL
Glucose, Plasma/Serum	≥ 4 weeks	≤ 50	≥ 400	mg/dL
Magnesium, Serum		≤ 1.0	≥ 9.0	mg/dL
Osmolality		≤ 190	≥ 390	mOsm/Kg
*pH (MCHS and AZ only)		≤ 7.200	≥ 7.600	pH
*pCO ₂ , arterial (MCHS and AZ only)		≤ 20.0	≥ 70.0	mmHg
*pO ₂ (MCHS)		≤ 40.0	–	mmHg
*pO ₂ (AZ)		≤ 45.0	–	mmHg
Phosphorus		≤ 1.0	–	mg/dL
Potassium		≤ 2.5	≥ 6.0	mmol/L
Sodium		≤ 120	≥ 160	mmol/L

HEMATOLOGY

Test Report Name	Age	Critical Low	Critical High	Units
Activated Partial Thromboplastin Time, Plasma		–	≥ 150	sec
Fibrinogen		≤ 60	–	mg/dL
Hemoglobin	0 – 7 weeks	≤ 6.0	≥ 24.0	g/dL
Hemoglobin	> 7 weeks	≤ 6.0	≥ 20.0	g/dL
INR (International Normalizing Ratio)		–	≥ 5.0	
Leukocytes		–	≥ 100.0	$\times 10^9/L$
Absolute Neutrophil Count		≤ 0.5	–	$\times 10^9/L$
Neutrophils		≤ 0.5	–	$\times 10^9/L$
Platelets, Blood		≤ 40	≥ 1000	$\times 10^9/L$
CSF White Blood Cell Count			≥ 100.0	Cells/mcL

Microbiology

Positive blood culture

Positive Gram stain or culture from any site

Positive culture or isolate for *Carynebacterium diphtheriae*, *Cryptococcus neoformans*, *Bordetella pertussis*, *Neisseria gonorrhoeae* (only nongenital sites), dimorphic fungi (*Histoplasma*, *Coccidioides*, *Blastomyces*, *Paracoccidioides*)

Presence of blood parasites (e.g. malaria organisms, *Babesia*, *microfiaria*)

Postive antigen detection (e.g. *Cryptococcus*, group B streptococci, *Haemophilus influenzae* type B, *Neisseria meningitidis*, *Streptococcus pneumoniae*)

Stool culture positive for *Salmonella*, *Shigella*, *Oampylobacter*, *Vibrio*, or *Yersinia*

هریک از موارد زیر میبایستی در اسرع وقت توسط کارکنان میکروبیشناسی به اطلاع پزشک مربوطه یا کادر پرستاری رسانده شده و سوابق آن (نام بیمار، تشخیص احتمالی، زمان تماس و نام پزشک یا پرستار مورد تماس) نگهداری گردد. ضمناً میبایستی نتایج نهایی آزمایش نیز به پزشک ارسال گردد.

– کشت خون مثبت

– موارد کشت یا گسترش مستقیم مثبت در مایع مغزی نخاعی

- وجود کشت یا گسترش مستقیم مثبت در مایعات استریل بدن (مایع نخاع، مایع مفصل، مایع پریکارد، مایع پلورو پریتون) - استرپتوکوک پیوژن بدنبال زخم های جراحی - گسترش خون محیطی مثبت از نظر مالاریا - گسترش مثبت نمونه از نظر باسیل اسید فست - گسترش مثبت از نظر باسیلوس انتراسیس - تشخیص پاتوژن های مهم نظیر لژیونلا، بروسلا - موارد مثبت کریپتوکوکوس در آزمون شناسایی آنتی ژن - استافیلوکوک اورئوس مقاوم به ونکومايسين	
Urinalysis	
Strongly positive test for glucose and ketone	
Presence of reducing sugars in infants	
Presence of pathological crystals (urate, cysteine, leucine, tyrosine)	
Serology	
Incompatible cross match	
Positive direct and indirect antiglobulin (Coombs') test on cord blood	
Titers of significant RBC alloantibodies during pregnancy	
Transfusion reaction workup showing incompatible unit of transfused blood	
Failure to call within ۷۲ hrs for Rh Ig after possible or known exposure to Rh-positive RBCs	
Positive confirmed test for hepatitis, syphilis, acquired immunodeficiency syndrome (AIDS)	
Increased blood antibody levels for infectious agents	
Therapeutic Drugs	Blood Levels
Acetaminophen	>۱۵۰ µg/mL

Carbamazepine	>2.0 µg/mL
Chloramphenicol	>5.0 µg/mL (peak)
Digitoxin	>30 ng/mL
Digoxin	>2.0 ng/mL
Ethosuximide	>2.0 µg/mL
Gentamicin	>12 µg/mL
Imipramine	>4.0 ng/mL
Lidocaine	>9 µg/mL
Lithium	>2 mEq/L
Phenytoin	>7.0 µg/mL
Phenytoin	>4.0 µg/mL
Primidone	>24 µg/mL
Quinidine	>1.0 µg/mL
Salicylate	>7.0 µg/mL
Theophylline	>20 µg/mL
Tobramycin	>12 µg/mL (peak)
In Addition the physician is promptly notified of any of the following:	
Serum glucose, fasting	>13.0 mg/dL
Serum glucose, random	>25.0 mg/dL
Serum Cholesterol	>3.0 mg/dL
Serum total protein	>9.0 mg/dL
Blood lead	Increased
Urinalysis	Plus, blood, or protein ≥ 2+

Urine colony count/ culture	>10 ⁵ , . . . colonies/mL of single organism
Respiratory culture	Heavy growth of pathogen
Peripheral blood smear	Atypical Lymphocytes, plasma cells