

Appendix 6: i-STAT Patient Log

Site/Location: \_\_\_\_\_

i-STAT Serial #: \_\_\_\_\_

**\*\*Note: non-reportable Chem 8+ tests – Ionized Calcium (unless applicable at your site); do not use for eGFR calculation; do not use for oral glucose tolerance test**

Date / Time	Patient Name <i>(first and last)</i>	Patient ID (PHIN)	Chem 8+** *Calculated Tests									CG4+ *Calculated Tests							cTnl	PT/ INR	Staff Initials				
			Sodium	Potassium	Chloride	Total CO2	Glucose	Urea	Creatinine	Anion Gap*	Ionized Calcium	pH	PCO2	pO2	TCO2*	HCO3*	sO2*	Base excess*				Lactate	Troponin I	PT/INR	

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_