

100843.322 NICU Hypoglycemia Lab Sheet

Copy of version 1.0 (approved and current)

**Last Approval or
Periodic Review Completed** 8/17/2022

**Next Periodic Review
Needed On or Before** 8/17/2023

Effective Date 8/17/2022

Controlled Copy ID 379826

Location NICU Resource Tab Laboratory
Test Directory

Organization WBH Lab

Comments for version 1.0

Initial version

Version History

Version	Status	Type	Date Added	Date Effective	Date Retired
1.0	Approved and Current	Initial version	8/17/2022	8/17/2022	Indefinite

TITLE: NICU HYPOGLYCEMIA LAB SHEET

Lab Name	Sample Container	Volume Needed
Insulin Level	2 Gold Microtainers	1mL of blood
Lactate	Gray Top Tube	.5mL of blood (send on ice)
CMP	1 Gold Microtainer	.6mL of blood
BOHB	1 Gold Microtainer	.6mL of blood
Ammonia	1 Light Green or Green Microtainer (Lithium Heparin)	.5mL of blood (send on ice)
Cortisol	1 Gold Microtainer	.6mL of blood
Amino Acids	1 Light Green or Green Microtainer (Lithium Heparin)	.5mL of blood
Urine Amino Acids (Unidentified-sent to CHOP)	Sterile Urine Cup	2mL of urine (minimum), preferred 5mL
		Total Blood Needed= 4.3mL