Institut Pasteur du Cambodge	UNITE DE BIOLOGIE MEDICALE	FOR-R1-014
	BLOOD CULTURE FORM	Version 3 31/08/2020

MISE A JOUR LE :	PAR :	NATURE DES MODIFICATIONS :
05/09/202201/09/2020	DELVALLEZ HENG. S	Mise à jour
RENOUVELLEMENT LE :	PAR :	

PATIENT IDENTIFICATION:
- Name:
- First name:
- DOB:

PRESCRIBER IDENTIFICATION

Hospital:

Clinic / Lab:

CLINICAL DATA:
- Fever □ Thrills □
- Others: ……
  ……..
- Sample n°1 □ Sample n°2 □ Sample n°3 □ More: …
- Sample site: Right arm □ Left arm □ Right leg □ Left leg □ Others……
- Date of sampling: ……. Time of sampling: ……..
- Date of sending to Pasteur:

BOTTLE IDENTIFICATION:
- Aerobic bottle □ -BACTALERT bottle □
- Anaerobic bottle* □ -Other bottle □
- Pediatric bottle □

BOTTLE LABEL

***If an aerobic and an anaerobic bottles are both requested:**
- **Draw blood in the anaerobic bottle first, if you use needles and syringes;**
- **Draw blood in the aerobic bottle first, if you use a winged blood collection set.**

LABORATORY DATA/Technician:
- Date of arrival in the lab:
- Loading date: Time:
- Results:
  - Positive □ Date: Time:
  - Negative after 7days □
- Direct examination: Cocci □ Bacilli □
  Mobility: Yes □ No □
- Gram stain:
- Culture:
- Comment:

ETIQUETTE

CODAT

N^0

Result register: **Verificator:** **Biological validation:**

This document must be scanned in the patient file, when the results are entered in CODATEC

La mise à jour de ce document est gérée sur Kalivès.
Veillez régulièrement à l'actualisation de vos éditions papier.