Common Laboratory Values

			CBC			
Test	Normal value	Function			Significance	
Hemoglobin	12-18 g/100 mL	Measures ox	ygen carrying capacity of blo	ood	Low: hemorrhage, anemia High: polycythemia	
Hematocrit	35%-50%	Measures relative volume of cells and plasma in blood			Low: hemorrhage, anemia High: polycythemia, dehydration	
Red blood cell	4-6 million/mm ³	Measures oxygen-carrying capacity of blood			Low: hemorrhage, anemia High: polycythemia, heart disease, pulmonary disease	
White blood cell Infant 4-7 y 8-18 y	8,000-15,000/mm ³ 6,000-15,000/mm ³ 4,500-13,500/mm ³	1		tory agents	Low: aplastic anemia, drug toxicity, specific infections High: inflammation, trauma, toxicity, leukemia	
			Differential Count			
Test	Normal value	Significance				
Neutrophils	54%-62%	Increase in bacterial infections, hemorrhage, diabetic acidosis				
Lymphocytes	25%-30% Viral and bacterial infection, acute and chronic lymphocytic leukemia, antigen reaction					
Eosinophils	1%-3%					
Basophils	1%					
Monocytes	0%-9% Hodgkin's disease, lipid storage disease, recovery from severe infections, monocytic leukemia					
1.1011007.003	370 770		olute Neutrophil Count (AN		actere infections, monocytic feukeima	
Calculation		Aust		rmal value	Significance	
(% Polymorphonuclear Leukocytes + % Bands)×Total White Cell Count >15					<1000 Patient at increased risk for	
	100		DI II C	-	infection; defer elective dental care	
T.	N. 1 1		Bleeding Screen	01 10		
Test	Normal value		Function	Significance		
Prothrombin time	1-18 sec		Measures extrinsic clotting factors	Prolonged in liver disease, impaired Vitamin K production, surgical trauma with blood loss		
Partial thromboplastin By laboratory control time			Measures intrinsic clotting of blood, congenital clotting disorders	Prolonged in hemophilia A,B, and C and Von Willebrand's disease		
Platelets	140,000-340,000/mL		Measures clotting potential	Increased in polycythemia, leukemia, severe hemorrhage; decreased in thrombocytopenia purpura		
Bleeding time	1-6 min		Measures quality of platelets	Prolonged in	n thrombocytopenia	
International Normalized Ratio (INR)	Without anticoagulant therapy: 1 Anticoagulant therapy target range: 2-3		Measures extrinsic clotting function	Increased with anticoagulant therapy		
· · · · · · · · · · · · · · · · · · ·	0 0		Urinalysis			
Test	Normal value	Functio		Significance	e	
Volume	1,000-2,000 mL/d		•		diabetes mellitus, chronic nephritis	
Specific gravity	1.015-1.025	Measures the degree of tubular reabsorption and dehydration		Increase in diabetes mellitus; decrease in acute nephritis, diabetes insipidus, aldosteronism		
рН	6-8	Reflects acidosis and alkalosis		Acidic: diab	petes, acidosis, prolonged fever rinary tract infection, alkalosis	
Casts	1-2 per high power fi	eld		Renal tubul	le degeneration occuring in cardiac gnancy, and hemoglobinuric-nephrosis	
			Electrolytes	•		
Test	Normal valu	ie I	unction	Signif	ficance	
Sodium (Na)	135-147 mI	Eq F	Reflects acid-base balance		sse in Cushing's syndrome	
Potassium (K)	3.5-5 mEq				ise in tissue breakdown	
Bicarbonate (HCC				Incica	Se ii dodde bleakdowii	
Chloride (Cl)				т	11.	
Chioride (CI)	100-106 mI	² q		Increa	se in renal disease and hypertension	

Copyright of Pediatric Dentistry is the property of American Society of Dentistry for Children and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.