

## Evidence podání G-CSF

Jméno: .....

search č.: .....

RČ: .....

kod dárci: .....

preparát: Neupogen® jiný:

		1. den	2. den	3. den	4. den	5. den	6. den
G-CSF	datum						
	čas podání						
	počet ampulí						
	počet µg						
	č. šarže						
	komplikace						
	změna dávky						
	podpis						

vyšetření	váha		---	---	---	---	---
	podané léky						
	fyzik. vyš.						
	TK						
	P						
	TT						

laboratoř	Hb						
	HTK						
	leuko						
	diff						
	trombo						
	CB		---	---	---	---	---
	krea		---	---	---	---	---
	urea		---	---	---	---	---
	AP		---	---	---	---	---
	bili celk.		---	---	---	---	---
	ALT		---	---	---	---	---
	AST		---	---	---	---	---
	glykemie		---	---	---	---	---
	cholesterol		---	---	---	---	---
	TG		---	---	---	---	---
	LDH		---	---	---	---	---
	HCG		---	---	---	---	---
	inf. markery		---	---	---	---	---
	koagul. vyš.		---	---	---	---	---