

Metabolics

GENERAL INSTRUCTIONS

This form captures results from <u>all</u> metabolic tests performed from the onset of the episode of ALF through the 12 month follow-up period. The exception is results from historical newborn screens or genetic tests, which may be captured regardless of when the tests were performed.

If no metabolic tests were performed on the patient then the form does not have to be completed.

This form is in log format and each line should be completed as needed to record new information.

SPECIFIC INSTRUCTIONS

Patient ID: Record the Patient ID

Metabolic test: Select the metabolic test performed. If the child has a metabolic test performed that is

not listed, please contact the DCC.

Sample date: Record the date that the sample was drawn to perform the metabolic test. The date is

recorded in month/day/year format (2 digits). If any part of the date is unknown, enter -

3 for the unknown part of the date and enter the other parts of the date that are

known. If the entire date is unknown, check "Unknown".

Sample time: Record the time that the sample was drawn to perform the metabolic test. The time is

recorded in 24-hour/military time (e.g. 00:00 = midnight, 06:00 = 6 A.M., 12:00 = noon, and 20:00 = 8 P.M.). If any part of the time is unknown, enter -3 for the unknown part of the time and enter the other parts of the time that are known. If the entire time is

unknown, check "Unknown".

Result: Record the result of the metabolic test as normal, abnormal-diagnostic, abnormal-non-

specific, or not definitive. If the test result is pending, leave this column blank and

complete this item when the result is known.

System ID: Record the system generated ID for the record.