

Urinalysis Test Strip Record

(First Morning Urine - Record Monthly)

By Dr. Donna F. Smith

CLIENT (First/Last):

Date	Time	Time TEST RESULTS						
		Glucose	Protein	Nitrite	рН	Blood	Leuk*	Comments

^{*}Leuk = Leukocytes. Record monthly and submit a copy of this record to Dr. Smith on the day before Progress Reporting and Report of Finding Consultations. Refer to the document titled, "Urinalysis Test Strips - Instructions for Testing" for how to use this record sheet. When you need more copies of this record form, go to the "All Forms & Questionnaires" client webpage.

TO AVOID DELAYS IN YOUR ASSESSMENT, PLEASE CALL (940) 761-4045 IMMEDIATELY IF YOU HAVE ANY QUESTIONS RECORDING OR SUBMITING THIS RECORD BY THEIR DUE DATES.