

AANVRAAGFORMULIER VOOR GENEESMIDDELBEPALINGEN IN LICHAAMSVLOEISTOFFEN

Brocacef Ziekenhuisfarmacie - De Amfoor 1 - 5807 GW Oostrum - tel. 0478-509234 - www.brocacefziekenhuisfarmacie.nl - Farmaceutisch Laboratorium

Ponsplaatje	Gegevens aanvrager:	Advies : ja / nee
Klinisch / Poliklinisch	Telefoon:	Email:
Datum + tijdstip afname bloed/urine:	Datum + tijdstip laatste inname geneesmiddel:	

Actuele medicatie (volledig a.u.b.):

1. _____ dagdosis: _____ 2. _____ dagdosis: _____ 3. _____ dagdosis: _____
4. _____ dagdosis: _____ 5. _____ dagdosis: _____ 6. _____ dagdosis: _____

Reden van aanvraag : controle / bijwerkingen / mogelijke therapieontrouw / onvoldoende effect / overig, nl: _____

Antidepressiva	Uitslag µg/l	Ther.geb. µg/l	Antipsychotica	Uitslag µg/l	Ther.geb. µg/l	Antiepileptica	Uitslag mg/l	Ther.geb. mg/l
<input type="checkbox"/> AMITRIPTYLINE (Tryptizol) nortriptyline <input type="checkbox"/> hydroxy metab.amitrip/nortrip		samen 100-300	<input type="checkbox"/> ALIMEMAZINE (Nedeltran)		50-400	<input type="checkbox"/> CARBAMAZEPINE (Tegretol) carbamazepine-epoxide		4-12 1-3
<input type="checkbox"/> BUPROPION (Wellbutrin) hydroxybupropion som bupropion + OH-bupropion		> 37 >575 225-1500	<input type="checkbox"/> ARIPIPAZOL (Abilify) dehydroaripirazol		100-300 40-200	<input type="checkbox"/> CLONAZEPAM (Rivotril)		25-60 µg/l
<input type="checkbox"/> CITALOPRAM (Cipramil) desmethylcitalopram		50-160 25-60	<input type="checkbox"/> BENPERIDOL (Frenactil)		1-20	<input type="checkbox"/> ETHOSUXIMIDE (Zarontin)		40-80
<input type="checkbox"/> CLOMIPRAMINE (Anafranil) desmethylclomipramine		samen 150-400	<input type="checkbox"/> BROOMPERIDOL (Impromen)		1-20	<input type="checkbox"/> FENOBARBITAL		25-35
<input type="checkbox"/> DOSULEPINE (Prothiaden) desmethylDOSULEPINE		50-150 kwalitatief	<input type="checkbox"/> CLOZAPINE (Leponex) desmethylclozapine		250-600 250-600	<input type="checkbox"/> FENYTOINE (Diphantoine) <input type="checkbox"/> vrije fractie fenytoine		10-20 1-2
<input type="checkbox"/> DOXEPINE (Sinequan) desmethylDOXEPINE		samen 100-250	<input type="checkbox"/> FLUFENAZINE (Anatensol)		0,5-2	<input type="checkbox"/> GABAPENTINE (Neurontin)		2-20
<input type="checkbox"/> DULOXETINE (Cymbalta)		30-120	<input type="checkbox"/> cis-FLUPENTIXOL (Fluanxol)		1-20	<input type="checkbox"/> LAMOTRIGINE (Lamictal)		3-14
<input type="checkbox"/> ESCITALOPRAM (Lexapro) desmethylcitalopram		10-100	<input type="checkbox"/> HALOPERIDOL (Haldol) gereduceerd haloperidol		5-12	<input type="checkbox"/> LEVETIRACETAM (Keppra)		5-25
<input type="checkbox"/> FLUOXETINE (Prozac) norfluoxetine		75-450 50-350	<input type="checkbox"/> LEVOMEPRMAZINE (Nozinan)		25-150	<input type="checkbox"/> OXCARBAZEPINE (Trileptal) monohydroxycarbazepine		12-30
<input type="checkbox"/> FLUVOXAMINE (Fevarin)		50-250	<input type="checkbox"/> OLANZAPINE (Zyprexa)		20-50	<input type="checkbox"/> PREGABALINE (Lyrica)		1,5-6
<input type="checkbox"/> IMIPRAMINE desipramine <input type="checkbox"/> hydroxy metab.imipr/desipr		samen 200-300	<input type="checkbox"/> PALIPERIDON (Invega)		20-60	<input type="checkbox"/> PRIMIDON (Mysoline) fenobarbital		8-12 25-35
<input type="checkbox"/> MAPROTIline (Ludiomil) desmethylmaprotiline		samen 100-400	<input type="checkbox"/> PENFLURIDOL (Semap)		1-20	<input type="checkbox"/> TOPIRAMAAT (Topamax)		2-20
<input type="checkbox"/> MIRTAZAPINE (Remeron) desmethylmirtazapine		20-100 samen 50-300	<input type="checkbox"/> PERFENAZINE (Trilafon)		0,8-2,4	<input type="checkbox"/> VALPROINEZUUR (Depakine) <input type="checkbox"/> vrije fractie valproïnezuur		50-120 5-12
<input type="checkbox"/> MOCLOBEMIDE (Aurorix)		400-1000	<input type="checkbox"/> PERICIAZINE (Neuleptil)		5-30			
<input type="checkbox"/> NORTRIPTYLINE <input type="checkbox"/> hydroxy metab.nortriptyline		50-150	<input type="checkbox"/> PIMOZIDE (Orap)		10-20			
<input type="checkbox"/> PAROXETINE (Seroxat)		20-200	<input type="checkbox"/> PIPAMPERON (Dipiperon)		100-400			
<input type="checkbox"/> SERTRALINE (Zoloft) desmethylsertraline		50-250	<input type="checkbox"/> QUETIAPINE (Seroquel) desalkylquetiapine		50-500	<input type="checkbox"/> AMIODARON (Cordarone) (mg/l) desethylamiodaron		samen 1-5
<input type="checkbox"/> TRAZODON (Trazolan)		500-2500	<input type="checkbox"/> RISPERIDON (Risperdal) 9-hydroxyrisperidon		samen 20-60	<input type="checkbox"/> CLOBAZAM (Frisium) (µg/l) desmethylclobazam (µg/l)		100-400 2000-4000
<input type="checkbox"/> VENLAFAXINE (Efaxor) desmethylvenlafaxine		50-250 100-600	<input type="checkbox"/> SERTINDOL (Serdolect) dehydrosertindol norsertindol		80-140	<input type="checkbox"/> DIAZEPAM (Valium) (µg/l) desmethylDIAZEPAM (µg/l) hydroxydiazepam (µg/l) oxazepam (µg/l)		125-750 200-800 10-50 10-30
			<input type="checkbox"/> TRIFLUOPERAZINE (Terfluzine)		10-50	<input type="checkbox"/> BENZODIAZEPINES (op aanvraag)		
			<input type="checkbox"/> ZUCLOPENTIXOL (Cisordinol)		10-50	<input type="checkbox"/> DIGOXINE (µg/l)		0,5-0,8
			Drugs Of Abuse (incl. kreatinine)			<input type="checkbox"/> ETHANOL (promille)		
			<input type="checkbox"/> AMFETAMINE (in urine)			<input type="checkbox"/> LITHIUM (zie opmerking ommezijde)		0,4-1,2 mmol/l
			<input type="checkbox"/> BENZODIAZEPINES (in urine)			<input type="checkbox"/> MEMANTINE (µg/l)		
			<input type="checkbox"/> COCAINE (in urine)			<input type="checkbox"/> PARACETAMOL (mg/l)		10-20
			<input type="checkbox"/> ETG (in urine)			<input type="checkbox"/> THEOFYLLINE (mg/l)		10-20
			<input type="checkbox"/> GHB (in urine)			<input type="checkbox"/> _____		
			<input type="checkbox"/> METHADON (in urine)			<input type="checkbox"/> _____		
			<input type="checkbox"/> OPIATEN (in urine)			<input type="checkbox"/> _____		
			<input type="checkbox"/> THC (in urine)			<input type="checkbox"/> _____		