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	Drain 1	Drain 2	Drain 3	Reference interval/Interpretation	Commentary	
[ED Visit 2				
Ī	Subhepatic fluid	Perihepatic fluid	Right upper abdominal fluid		Peritoneal fluid or drainage with	
Identified source	Drain	Drain	Drain		specific anatomic location	
Identified site	Hepatic compartment	Hepatic compartment	Upper abdomen			
Gross appearance	Brown	Purulent	Serous			
Total nucleated cells (cells/μL)	8,602	12,650	3,490	<500 cells/μL		
Neutrophils	79%	100%	88%	<25%		
Lymphocytes	16%	0%	0%	N/A		
lonocytes/Macrophages	0%	0%	12%	N/A		
LDH	9616 U/L	9328 U/L	3850 U/L	Exudate: Result > 2/3 times the upper limit of normal for serum	Consistent with inflammation and influx of nucleated WBC for resolution of infection. Limited use for evaluation of fluid as an exudate.	
Aerobic culture	No growth, 24 days	No growth, 24 days	No growth, 24 days	No growth		
pH	7.5	7.1	7.7	N/A	Limited evidence. Usually evaluate in pleural fluids for drainage of parapneumonic effusion.	
Amylase (BF)	1406 U/L	4712 U/L	1465 U/L		Maximum utility when interpreted	
Amylase (Blood)			_		as a fluid to serum ratio	
Ratio	<u> </u>		_	Ratio >3-5 suggests pancreatic		
Creatinine (BF)	1.1 mg/dL	1.1 mg/dL	0.9 mg/dL		Ratio indicates repeatedly the body fluid is unlikely originating in the urinary tract	
Creatinine (Blood)	1.1 mg/dL	1.1 mg/dL	0.9 mg/dL			
Ratio	1	1	1	Ratio > 1.0 suggests urine present		
Glucose (BF)	71 mg/dL	43 mg/dL	33 mg/dL		Limited evidence	
Glucose (Blood)	110 mg/dL	110 mg/dL	114 mg/dL			
Ratio	0.7	0.4	0.3	Ratio > ? suggests increased cellular metabolism		
Protein (BF)	3.7 g/dL	4.4 g/dL	2.6 g/dL		Limited evidence; suggest SAAG	
Protein (Blood)	5.4 g/dL	5.4 g/dL	5.4 g/dL			
Ratio	0.7	0.8	0.8	Exudate: Ratio > 0.5		
Cholesterol (BF)			45 mg/dL	> 32 to 70 suggest malignant ascites	Limited evidence	
Triglycerides (BF)	not evaluated	not evaluated	30 mg/dL	pseudochylous effusion</td		
Chylomicrons (BF)			Absent	Absent		

LDH: lactate dehydrogenase BF: body fluid WBC: white blood cell SAAG: semi-ascites albumin gradient