St. Clair County Community Mental Health

Clozaril White Blood Count (WBC) & Absolute Neutrophil Count (ANC) History

Consumer Name:_____ Case Number:_____

Birthdate: _____ Zip: _____

Pharmacy: _____ Start Date: _____

DATE	WBC	ANC		NOTES

Health-Medical Form: #04-0110
Reviewed Date: 7/1/2024
Policy Ref: #04-001-0085
EHR: Health Services, Health Information Documents, Clozaril