

**BASSETT HEALTHCARE NETWORK
REFERENCE LAB**

LAB TEST REQUEST FORM #2

#0102(rlab1.doc)

1/06,7/06,10/4/06,1/07,4/07,8/1/07,1/31/08,7/1/08,8/25/08,10/6/08,4/6/09,
7/6/09,10/5/09,1/4/10,3/29/10,7/19/10,10/4/10,1/31/11,4/4/11,10/3/11,
1/16/12,4/1/13,4/7/14,7/7/14,10/6/14,5/14/15,8/3/15,2/10/22,3/13/23,12/5/25

Date of Request _____ Visit Number _____

Ordering Provider: _____
Medicaid ID: _____

Chart #: _____ Location: _____

Attending Provider: _____

Patient Name _____

Please circle requests below.

Date of Birth _____ Medicaid ID#: _____

SPECIMEN COLLECTED BY:	TIME:	DATE:

Diagnosis Code:
or
Descriptive Diagnosis:

PROVIDERS: Compliance is mandatory and regulated. For the laboratory to bill properly and receive payment, you must provide the specific Diagnosis codes for each outpatient test ordered. Additionally, only tests that are medically necessary for the indicated diagnosis or treatment should be ordered, with supporting documentation in the medical record. For tests included in each panel and reflexive testing, please refer to the back of the requisition form. Under current Medicare regulations, when certain laboratory tests (indicated by an *) are ordered, and the diagnosis is not listed in the Local Coverage Determination or National Coverage Determination for that test, payment may be denied. In these cases Medicare requires an Advance Beneficiary Notice (waiver of liability) be signed to allow the hospital to bill the patient. The ABN box on the requisition MUST be checked when an ABN is obtained.

Patient has signed ABN Waiver (ABN) Patient refused to sign ABN Waiver (ABNR) ABN not required

SERUM/PLASMA

Code	Test Name
LAB836	MG Evaluation MuSK Reflex
◆ LAB511	Adrenocorticotropic Hormone (ACTH)
LAB556	Aldolase
LAB557	Aldosterone
LAB741	Alkaline Phosphatase Isoenzymes
LAB810	Alpha-1 Antitrypsin, QN
LAB3728	Alpha-1 Antitrypsin Quantitative and Phenotype
LAB692	Alpha Fetoprotein (AFP) – Single Marker, Maternal
LAB559	Alpha Fetoprotein (AFP) – Tumor Marker
LAB3768	ANCA Panel for Vasculitis
LAB179	Angiotensin Converting Enzyme (ACE)
LAB2001	Smith (SM) Antibodies, IgG
LAB759	Anti-Thrombin III, Antigen
LAB311	Anti-Thrombin III, Activity
LAB1193	Streptococcal Antibody Profile
LAB3745	BCR/ABL, p210, Quant, Monitor
LAB785	Bartonella Antibody Panel, IgG & IgM (Cat Scratch AB)
LAB49	Beta-2 Microglobulin
LAB776	CA 15-3*
LAB777	CA 19-9*
LAB853	CA 27.29*
LAB519	Calcitonin
LAB1735	Cardiolipin Antibodies (IgG, IgM)
LAB17351	Cardiolipin Antibodies (IgA)
LAB870	Catecholamines, Fractionated
LAB21164	Centromere Antibody, IgG
LAB703	Ceruloplasmin
LAB21165	Chromogranin A
LAB467	CMV Antibody (IgG)
LAB861	CMV Antibody (IgM)
LAB154	Complement, Total (CH50)
LAB521	C-Peptide
♥ LAB569	Cryoglobulin & Cryofibrinogen Panel (2 Reds & 1 Lav)*
LAB21169	Cyclosporine
LAB458	Cytoplasmic Neutrophilic Ab
LAB524	DHEA-sulfate
LAB648	Double Stranded DNA (dsDNA) Antibody, IgG
LAB2457	Epstein-Barr Virus Antibody Profile
LAB1373	Epstein-Barr Virus DNA, QN Real Time PCR
LAB873	Erythropoietin (EPO)
LAB3770	Estril (E3), Unconjugated, Serum
LAB981	Estrogens, E1+E2, Fractionated
LAB346	Factor V Leiden (R506Q) Mutation
LAB304	Factor V Activity, Clotting
LAB305	Factor VII Activity, Clotting
LAB571	G6PD, RBC
LAB80	Gastrin
LAB727	Glomerular Basement Membrane Antibody, IgG
LAB22146	Glutamic Acid Decarboxylase (GAD65) Antibody
LAB525	Growth Hormone (GH)
LAB89	Haptoglobin
LAB752	HCG, Tumor Marker*
LAB833	Hereditary Hemochromatosis DNA Mutation Analysis
LAB288	Hemoglobin Electrophoresis Evaluation
LAB3737	Heparin Anti-Xa
LAB2291	Herpes Simplex Virus Type 1-2, IgG
▶ LAB869	HLA -B27 Antigen (Ethnic Origin _____)
◆ LAB93	Homocysteine, Plasma
LAB74	Immunoglobulin E (IgE)
LAB1001	IgG Subclasses Panel
LAB526	IGF-1 (Insulin Like Growth Factor-1), (LC/MS)

Code	Test Name
LAB828	Insulin
LAB3781	Liver Fibrosis, FibroTest *
LAB3114	Lupus Anticoagulant Evaluation
LAB3758	CD4 T-Cell Count, NY *
LAB22153	Metanephrines, Fractionated, Free –Plasma
LAB835	Methylmalonic Acid, Quant.
LAB724	Mitochondrial M2 Ab, IgG
LAB160	Mumps Antibody, IgG
LAB161	Mumps Antibody, IgG and IgM
LAB656	Mycoplasma Pneumoniae Antibody (IgG/IgM)
LAB530	17-OH Hydroxypregnenolone
LAB720	17-OH Hydroxyprogesterone
LAB704	Parathyroid Hormone (PTH)-Related Peptide (PTHrP)
LAB800	Parvovirus B-19 Antibody IgG/IgM
LAB1177	Platelet Associated Ab, Direct Assay
LAB767	Platelet Antibody Screen
LAB489	Protein C Activity
LAB490	Protein C Antigen
LAB491	Protein S Activity
LAB760	Protein S Antigen
LAB3845	Proteinase 3 Antibodies (PR3)
LAB834	Prothrombin G20210A Mutation
LAB1209	Q Fever (Coxiella Burnetii) Ab, IgG/IgM
LAB3110	Quantiferon Gold
LAB5157	Red Cell Folate
◆ LAB532	Renin, Activity
LAB1266	Rotavirus Antigen, Feces
LAB121	Serotonin
LAB3862	Sjogren's Antibodies (SS-A, SS-B)
LAB512	Smooth Muscle Antibody Screen
LAB3599	Treponema Pallidum Ab by TP-PA
LAB137	T3 (Triiodothyronine), Free
LAB126	T4 (Thyroxine), Total
LAB173	Testosterone, Free (Dialysis) and Total, MS ¹
LAB515	Thyroglobulin, Tumor Marker
LAB3887	Thyroglobulin Ab & Thyroid Peroxidase Ab
LAB3892	Toxoplasma Gondii Antibodies (IgG, IgM)
LAB827	Trypsin
LAB746	TSI (Thyroid Stimulating Immunoglobulin)
● LAB125	Vitamin B1 (Thiamin)
LAB536	Vitamin D, Calcitriol 1,25-Dihydroxy
LAB535	Vitamin D, 25-Hydroxy* D2/D3, Fractionated
LAB757	von Willebrand Factor Ag

VIRAL TESTING²

CULTURE	
LAB22152	Viral Culture, Non-Respiratory
LAB1844	Respiratory Viral Panel, PCR, NP
DETECTION BY PCR	
LAB913	Cytomegalovirus, Quant, Real-Time PCR, Varies
LAB2448	Cytomegalovirus, Qual, PCR, Varies
LAB3784	Herpes Simplex Virus (HSV), Type 1/2, QL, PCR, Varies
LAB1372	Varicella-Zoster Virus (VZV) PCR, Varies

OTHER BODY FLUIDS

LAB923	Bordetella pertussis, Qual, PCR (Nasopharyngeal)
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24 HOUR URINE (Includes 24 hr container)

Code	Test Name
TOTAL VOLUME: (24UR) _____	
LAB352	5 HIAA (5-Hydroxyindolacetic Acid) w/o Creat
LAB373	Catecholamines, Fractionated, w/o Creat
LAB568	Cortisol, Free
LAB21058	Metanephrines, Fractionated
LAB21061	UroRisk® (Supersaturation) Panel
LAB452	Vanillylmandelic Acid (VMA)

RANDOM URINE

LAB412	Myoglobin
LAB414	Nicotine and Cotinine (Metabolites)
LAB21062	Stone Analysis (Calculi)

STOOL

LAB9998	Helicobacter pylori Ag, EIA
LAB3868	Fecal Lipids, Quant, (Fecal Fat), (random or timed)

MISCELLANEOUS DRUGS

LAB681	Amitriptyline & Nortriptyline
LAB1744	Drug (Controlled Substance) Monitoring Assess Panel, Volatiles
LAB475	Lamotrigine (Lamictal)
LAB477	Levetiracetam
LAB3569	Methotrexate, Routine
LAB481	Methotrexate, STAT to Albany Medical Center
LAB484	Oxcarbazepine Metabolite (MHC) (Trileptal)
LAB32	Phenytoin, Free
LAB808	Primidone & Phenobarbital
LAB875	Sirolimus (Rapamycin) to Quest
LAB876	Tacrolimus (FK506, Prograf) to Quest
LAB498	Topiramate (Topamax)

CELIAC DISEASE TESTING

LAB774	Endomysial Antibody, IgA
LAB24540	Inflammatory Bowel Disease Panel
LAB3760	HLA-DQ Typing, Celiac Associated Disease
LAB3813	Mercaptopurine and Metabolites (Thiopurine)
LAB3883	TPMT (Thiopurine methyltransferase Activity Profile, Erythrocytes)
▶ LAB38360	TPMT (Thiopurine Methyltransferase and Nudix Hydrolase (NUDT15) Genotyping)

OTHER TESTING (Test Name)

Provider's Signature: _____

Signed Date and Time: _____

Received by: _____

1. LAB173 includes both a Total Testosterone and a Free Testosterone by equilibrium dialysis.
2. When a Cryoglobulin, Plasma and Serum (LAB569) is ordered both Cryoglobulin and Cryofibrinogen will be performed. Both plasma and serum need to be sent (lavender top and two large red tops) need to be drawn and kept @ 37⁰ C while clotting.

◆ PLACE ON ICE IMMEDIATELY

♥ KEEP AT 37 DEGREES C

● PROTECT FROM LIGHT

▶ **NEED QUEST CONSENT FORM**