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|---|---|----------------------------|---|
|  Wake Forest™ Baptist Health Diagnostic Laboratories | Medical Center Boulevard Winston Salem, NC 27157 Client Services: 877-933-9522 Fax: 336-716-8866 | Location: XXXXXX | Practice Name: Address: Phone: Fax: |
| | PLEASE FILL IN COMPLETELY OR ATTACH LABEL BELOW—PLEASE PRINT | | |

| | | | | | | | | | |
|--|------------------------|--|-----------------------------|-------------------|--------------------|---------------------|-----------------|----------|-----------|
| STAT | Call To: | Fax To: | Bill Type: | __Insurance | __Patient | __Client | | | |
| WF MRN: | Office ID: | Patient Name: | Race: | Sex: M F U | D.O.B: | | | | |
| Ordering Physician Name: | Collect Date and Time: | Patient Address: | Guarantor Name and Address: | | | | | | |
| Ordering Physician Code: | Collector: | Insurance Name and Code (Attach Copy): | Subscriber Name: | Relationship: | | | | | |
| | | Group Name: | Policy ID: | Group ID: | | | | | |
| List Diagnosis Code(s) (must be provided): | Specimen Source/ Type: | Tube Type Abbreviations and Totals: | | | | | | | |
| | | Red (R) | Mint (Mt) | Lavender (L) | Gold (G) | Lt. Blue (B) | Green (GR) | Pink (P) | Gray (GY) |
| | | Swab: | Urine: | Stool: | Other (specify) #: | Total Specimen (s): | Total Test (s): | | |

| Chemistry Panels/ Profiles | | | |
|----------------------------|---------|--|---|
| @ Mt | LAB15 | | Basic Metabolic Panel |
| @ Mt | LAB17 | | Comprehensive Metabolic Panel |
| @ Mt | LAB20 | | Hepatic Function Panel |
| Mt | LAB19 | | Renal Function Panel |
| B Mt | LAB2960 | | Lipid Profile |
| Mt | LAB2890 | | Free Thyroxine Index (TT4, T3U, calc. FTI) |
| Mt | LAB2939 | | Iron Profile (Transferrin, Ferritin, Iron, % Sat.) |
| Individual Tests | | | |
| G | LAB5071 | | Antinuclear Ab, HEp-2 Substrate, IgG |
| L | LAB47 | | Ammonia (Draw on Ice) |
| Mt | LAB48 | | Amylase |
| L | LAB2803 | | BNP (Brain Natriuretic Peptide) |
| Mt | LAB3054 | | BUN |
| Mt | LAB53 | | Calcium |
| B G | LAB2836 | | CEA |
| B Mt | LAB3245 | | Cholesterol |
| Mt | LAB62 | | CK |
| Mt | LAB2857 | | CK Total and Isoenzymes |
| G | LAB3257 | | DHEA Sulfate |
| Mt | LAB3767 | | Creatinine |
| @ G | LAB23 | | Digoxin |
| Mt | LAB523 | | Estradiol |
| Mt | LAB86 | | FSH |
| Mt | LAB2884 | | Folate |
| L | LAB3264 | | RBC Folate |
| B Mt | LAB85 | | GGT |
| Mt | LAB3270 | | HCG |
| B L | LAB90 | | Hemoglobin A1C |
| Mt | LAB94 | | Iron |
| Mt | LAB2950 | | LDH |
| Mt | LAB99 | | Lipase |
| Mt | LAB103 | | Magnesium |
| G | LAB529 | | Progesterone |
| B Mt | LAB531 | | Prolactin |
| F G | LAB3018 | | PSA (Screening) |
| Mt | LAB124 | | Testosterone - Total |
| P Z | LAB3532 | | Testosterone - Free |
| P Z | LAB3337 | | Testosterone (Free , Total, Bioavailable) Serum binding Globulin, Albumin |
| B Mt | LAB3344 | | TSH |
| B Mt | LAB3048 | | Thyroxine (T4) - Total |
| Mt | LAB2889 | | Thyroxine (T4) - Free |
| B Mt | LAB4728 | | T3 - Total |
| Mt | LAB2886 | | T3 - Free |
| G | LAB3345 | | Valproic Acid |
| Mt | LAB2808 | | Vitamin B12 |
| Mt | LAB3961 | | Vitamin D, 25-Hydroxy |

| Quantitative Urine Chemistry | | | |
|--------------------------------|---------|--|--------------------------------|
| (Random ___ / Interval ___ Hr) | | | |
| | LAB4089 | | Urine Albumin |
| | LAB2751 | | Urine Drug Screen |
| | LAB2732 | | Urine Protein |
| | LAB2721 | | Urine Creatinine |
| | LAB2728 | | Urine Na/K |
| | LAB437 | | Urine Pregnancy Test |
| Urinalysis and Fecal Testing | | | |
| | LAB348 | | Urinalysis with Microscopic |
| | LAB2738 | | Routine Urinalysis |
| | LAB420 | | Urine Osmolality |
| | LAB3107 | | Fecal Occult Blood |
| Hematology/ Coagulation | | | |
| @ L | LAB294 | | CBC |
| @ L | LAB293 | | CBC with Diff |
| | LAB299 | | WBC |
| L | LAB3332 | | ESR |
| L | LAB296 | | RETIC |
| | LAB339 | | Sickle Cell Screen |
| B B | LAB3144 | | Prothrombin Time including INR |
| @ B | LAB3146 | | PTT Activated |
| B | LAB314 | | Fibrinogen |
| B | LAB313 | | Dimertest |
| B | | | Factor Assays (specify) |
| | | | Consult Lab First 716-4509 |
| CSF/ Body Fluids | | | |
| | | | Protein |
| | | | Glucose |
| | | | Cell Count and Diff |
| Indicate Source: | | | |
| Blood Bank | | | |
| P | LAB2612 | | ABO/RH |
| P | LAB278 | | Antibody Screen |
| P | LAB274 | | Direct Combs |

Medicare Limited Coverage Tests

@ =May not be covered for diagnosis
 F = Has prescribed rules for frequency
 B = Has both diagnosis and frequency

Provide signed ABN when necessary

| Microbiology | | | |
|-----------------------------|---------|--|---|
| | LAB503 | | Bacterial Culture (specify site) |
| | LAB250 | | Gram Stain |
| | LAB3939 | | Gastrointestinal Pathogen Panel (for Stool Culture) |
| | LAB228 | | Throat Culture |
| @ | LAB239 | | Urine Culture |
| AFB/ Mycology/ Parasitology | | | |
| | LAB2629 | | AFB Smear and Culture |
| | LAB251 | | KOH/Wet Prep |
| | LAB240 | | Fungal Culture |
| | LAB3939 | | Gastrointestinal Pathogen Panel (Ova and Parasite Exam) |
| Virology | | | |
| | LAB3178 | | GC/Chlamydia Amp. |
| | LAB253 | | Clostridium Difficile Toxin |
| B G | LAB3307 | | HIV Antibody |
| | LAB3191 | | HSV by PCR |
| | LAB2646 | | Rotavirus |
| | LAB2647 | | Rapid RSV |
| | LAB3568 | | Rapid Influenza A & B |
| | LAB3171 | | CMV by PCR - Quant |
| | LAB3170 | | CMV Antibody - IgG |
| | LAB957 | | CMV Antibody - IgM |
| | LAB3184 | | Hep B Surface Antigen |
| G | LAB3186 | | Hep A Ab – IgM and IgG |
| G | LAB3182 | | Hep B Core – IgM and IgG |
| G | LAB3187 | | Hep C Antibody |
| G | LAB3309 | | Hepatitis Panel (Hep B(s) Ag, Hep A Total, Hep B(c) Total, Hep C Atb) |
| H | LAB3196 | | Measles, Mumps, Rubella |

OTHER TESTS:

() UCI-Urine culture if indicated, a UA w/o micro must also be selected.