



SMA Medical Laboratories

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MOBILE PHLEBOTOMY FORM

PATIENT INFORMATION

Last Name		First Name		SSN	D.O.B.	M <input type="checkbox"/>
						F <input type="checkbox"/>
Street Address		Apt#	City	State	ZIP	Phone

SPECIMEN INFORMATION

Date of order: ___/___/___

Requested start date: ___/___/___

Date Collected: ___/___/___

Time Collected: _____

Frequency: _____

Ordering Physician: _____

Address: _____

Phone#: _____

Fax#: _____

INSURANCE INFORMATION

Insurance Name _____ I.D.# _____

Bill Medicare Bill Medicaid Bill Patient Bill Client

Duplicate report to: _____

Duplicate to Phone#: _____

Duplicate to Fax#: _____

Fasting: Yes No

STAT:

ICD10 CODES

DIAGNOSIS (ICD-10 Code)* It is the ordering party's responsibility to order only those tests medically necessary for the diagnosis and treatment of the patient.

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> E03.9 Hypothyroidism, unspecified | <input type="checkbox"/> E78.1 Pure hyperglyceridemia | <input type="checkbox"/> J31.0 Chronic rhinitis | <input type="checkbox"/> R53.81 Other malaise |
| <input type="checkbox"/> D51.9 Vitamin B12 deficiency anemia, unspecified | <input type="checkbox"/> E78.2 Mixed hyperlipidemia | <input type="checkbox"/> N42.9 Disorder of prostate, unspecified | <input type="checkbox"/> R79.89 Other specified abnormal findings of blood chemistry |
| <input type="checkbox"/> E11.9 Type 2 diabetes mellitus w/o complications | <input type="checkbox"/> E78.49 Other hyperlipidemia | <input type="checkbox"/> N39.0 Urinary tract infection, site not specified | <input type="checkbox"/> Z79.01 Long term (current) use of anticoagulants |
| <input type="checkbox"/> E53.8 Def of other specified B group vitamins | <input type="checkbox"/> I10 Essential (primary) hypertension | <input type="checkbox"/> R53.1 Weakness | <input type="checkbox"/> Z79.89 Other long term (current) drug therapy |
| <input type="checkbox"/> E55.9 Vitamin D deficiency, unspecified | <input type="checkbox"/> I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris | <input type="checkbox"/> R73.09 Other abnormal glucose | |
| <input type="checkbox"/> E72.11 Homocystinuria | <input type="checkbox"/> J30.89 Other allergic rhinitis | <input type="checkbox"/> R79.9 Ab. finding of blood chemistry, unspecified | |
| <input type="checkbox"/> E78.01 Familial hypercholesterolemia | | <input type="checkbox"/> R97.8 Other abnormal tumor markers | |

CUSTOM DIAGNOSTIC PROFILES (See Back for Panel Description)

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> 110 Abdominal Pain Panel 1UC,1L,2SST,SC | <input type="checkbox"/> 114 Depression Screen 1L,1SST | <input type="checkbox"/> Z2 Cardio Profile 3SST,3LT,1UC,1B | <input type="checkbox"/> 400 Male Weight Loss Panel 1UC,1LT,2SST |
| <input type="checkbox"/> 804 Allergy Profile 2SST | <input type="checkbox"/> 111 Diabetic Screen 1UC,1SST,1L | <input type="checkbox"/> VB Vitamin B Deficiency 1SST,2LT | <input type="checkbox"/> 113 Obesity Panel 1L,1SST |
| <input type="checkbox"/> 107 Anemia Screen 1L,1SST | <input type="checkbox"/> 77 Epstein-Barr Virus Screen 1L,1SST | <input type="checkbox"/> 1018 Heavy Metals RLB | <input type="checkbox"/> 115 STD Screening 1UC,2SST |
| <input type="checkbox"/> 116 Arthritis Eval/ Autoimmune DX Screening 2SST, 1LT, 1UC | <input type="checkbox"/> 101F Female Health Screen I 1L,3SST,1UC | <input type="checkbox"/> 1050 Heavy Metals, Urine UC | <input type="checkbox"/> 118 Systemic Lupus Erythematosus SST |
| <input type="checkbox"/> 100 Cardiac Risk Panel 1L,1SST | <input type="checkbox"/> 103 Female Hormone Screen 2SST | <input type="checkbox"/> 101M Male Health Screen I 1L,3SST,1UC | <input type="checkbox"/> 112 Thyroid Disorders 1L, 1SST |
| <input type="checkbox"/> 399 Female Weight Loss Panel 2SST,1LT,1UC | <input type="checkbox"/> 102 Male Hormone Screen 2SST | | |

INDIVIDUAL DIAGNOSTIC TESTS

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> 503 AFP (Tumor Marker) SST | <input type="checkbox"/> 1321 Cortisol SST | <input type="checkbox"/> 1377 Immunoglobulin A SST | <input type="checkbox"/> 412 Reticulocyte Count L |
| <input type="checkbox"/> 1 Albumin (Alb) SST | <input type="checkbox"/> 1322 C-Peptide SST | <input type="checkbox"/> 1378 Immunoglobulin G SST | <input type="checkbox"/> 1403 Reverse T3 SST |
| <input type="checkbox"/> 2 Alkaline Phosphatase (ALP) SST | <input type="checkbox"/> 18 C-Reactive Protein (CRP) SST | <input type="checkbox"/> 1379 Immunoglobulin M SST | <input type="checkbox"/> 934 Rheumatoid Factor SST |
| <input type="checkbox"/> 3 ALT (SGPT) SST | <input type="checkbox"/> 17 Creatinine with eGFR SST | <input type="checkbox"/> 1337 Immunoglobulin E Total SST | <input type="checkbox"/> 935 RPR SST |
| <input type="checkbox"/> 4 Amylase Serum SST | <input type="checkbox"/> 1326 Creatinine Urine UC | <input type="checkbox"/> 1339 Insulin SST | <input type="checkbox"/> 1418 SARS - CoV2 IgM Ab QL SST |
| <input type="checkbox"/> 8 ANA w/ reflex Cascade SST | <input type="checkbox"/> 14 Creatinine Kinase SST | <input type="checkbox"/> 30 Iron SST | <input type="checkbox"/> 1419 SARS - CoV2 IgG Ab QL SST |
| <input type="checkbox"/> 903 ANA Screen SST | <input type="checkbox"/> 1423 Cystatin C SST | <input type="checkbox"/> 31 LDH SST | <input type="checkbox"/> 1427 SARS - CoV2 IgG Semi QN SST |
| <input type="checkbox"/> 953 ANA Profile SST | <input type="checkbox"/> 1330 DHEA-504 SST | <input type="checkbox"/> 1061 Lead RLB | <input type="checkbox"/> 564 SHBG SST |
| <input type="checkbox"/> 1478 ANCA Profile SST | <input type="checkbox"/> 1459 Digoxin SST | <input type="checkbox"/> 523 LH SST | <input type="checkbox"/> 517 T3 Free SST |
| <input type="checkbox"/> 1473 Anti-Cardiolipin Ab Panel IgA, IgG, IgM SST | <input type="checkbox"/> 1259 EBV Panel SST | <input type="checkbox"/> 33 Lipase SST | <input type="checkbox"/> 537 T3 Total SST |
| <input type="checkbox"/> 1477 Anti-CCP SST | <input type="checkbox"/> 407 ESR or Sedimentation Rate L | <input type="checkbox"/> 34 Lipid Panel SST | <input type="checkbox"/> 540 T3 Uptake SST |
| <input type="checkbox"/> 1456 Anti-Mullerian Hormone (AMH) SST | <input type="checkbox"/> 513 Estradiol SST | <input type="checkbox"/> 1458 Lithium, Serum SST | <input type="checkbox"/> 518 T4 Free SST |
| <input type="checkbox"/> 1461 Anti-Streptolysin-O (ASO) Antibodies SST | <input type="checkbox"/> 23 Fasting Blood Sugar G | <input type="checkbox"/> 1071 Lp(a)mass SST | <input type="checkbox"/> 532 T4 Total - Thyroxine SST |
| <input type="checkbox"/> 932 Anti-TPO Ab SST | <input type="checkbox"/> 514 Ferritin SST | <input type="checkbox"/> 1241 Lp-PLA2 Activity Assay* SST | <input type="checkbox"/> 3238 TBG SST |
| <input type="checkbox"/> 558 Anti-TG Ab SST | <input type="checkbox"/> 515 Folate SST | <input type="checkbox"/> 1343 Lyme Screen Total w/Ref to IgG/IgM SST | <input type="checkbox"/> 539 Testosterone Total SST |
| <input type="checkbox"/> 1904 Apolipoprotein A1 SST | <input type="checkbox"/> 1332 Fructosamine SST | <input type="checkbox"/> 36 Magnesium Serum SST | <input type="checkbox"/> 1198 Testosterone Free SST |
| <input type="checkbox"/> 1307 Apolipoprotein B SST | <input type="checkbox"/> 516 FSH SST | <input type="checkbox"/> 1400 Methylmalonic Acid SST | <input type="checkbox"/> 43 TIBC SST |
| <input type="checkbox"/> 5 AST (SGOT) SST | <input type="checkbox"/> 24 GGT SST | <input type="checkbox"/> 1002 Microalbumin Urine UC | <input type="checkbox"/> 44 Total Protein Serum SST |
| <input type="checkbox"/> 7 Basic Metabolic Panel SST | <input type="checkbox"/> 25 Glucose Serum SST | <input type="checkbox"/> 1344 Microalbumin/Creatinine ratio UC | <input type="checkbox"/> 1355 Transferrin SST |
| <input type="checkbox"/> 520 Beta HCG - Serum SST | <input type="checkbox"/> 401 Glyco Hgb A1c L | <input type="checkbox"/> 200 MMR + V IgG SST | <input type="checkbox"/> 940 Treponema palladium Ab Cascade SST |
| <input type="checkbox"/> 21 Bilirubin Direct (Dbili) SST | <input type="checkbox"/> 1244 GlycoMark SST | <input type="checkbox"/> 1465 Myoglobin SST | <input type="checkbox"/> 1426 Trichomonas vaginalis, NAA UC |
| <input type="checkbox"/> 42 Bilirubin Total (Tbili) SST | <input type="checkbox"/> 28 HDL SST | <input type="checkbox"/> 948 Neisseria gonorrhoeae, NAA UC | <input type="checkbox"/> 45 Triglycerides (Trig) SST |
| <input type="checkbox"/> 1022 BNP PL | <input type="checkbox"/> 1466 Hgb Fractionation Cascade L | <input type="checkbox"/> 1102 Non-GYN Cytology, Urine UC | <input type="checkbox"/> 538 TSH (High Sensitivity) SST |
| <input type="checkbox"/> 10 BUN / Creatinine Ratio SST | <input type="checkbox"/> 563 H.Pylori IgG SST | <input type="checkbox"/> 1457 NT-proBNP SST | <input type="checkbox"/> 47 Uric Acid Serum SST |
| <input type="checkbox"/> 9 BUN (Urea Nitrogen) SST | <input type="checkbox"/> 29 Hepatic Function Panel SST | <input type="checkbox"/> 1004 Occult Blood FECEs | <input type="checkbox"/> 51 Uric Acid, Urine UC |
| <input type="checkbox"/> 947 Chlamydia trachomatis, NAA UC | <input type="checkbox"/> 543 Hepatitis A IgM SST | <input type="checkbox"/> 37 Phosphorus Serum SST | <input type="checkbox"/> 1005 Urinalysis Complete UC |
| <input type="checkbox"/> 1425 Chlamydia/Gonococcus, NAA UC | <input type="checkbox"/> 521 Hepatitis A Total Ab SST | <input type="checkbox"/> 701 Potassium, Plasma GREEN | <input type="checkbox"/> 1460 Valproic Acid SST |
| <input type="checkbox"/> 1463 CMV Ab, IgM & IgG SST | <input type="checkbox"/> 548 Hepatitis B Core IgM Ab SST | <input type="checkbox"/> 1464 Prealbumin SST | <input type="checkbox"/> 1414 Vitamin B1 SST |
| <input type="checkbox"/> 1319 Complement C3 SST | <input type="checkbox"/> 544 Hepatitis B Core Ab SST | <input type="checkbox"/> 525 Progesterone Total SST | <input type="checkbox"/> 1410 Vitamin A1 SST |
| <input type="checkbox"/> 484 Complement C4 SST | <input type="checkbox"/> 1384 Hepatitis Be Ag SST | <input type="checkbox"/> 526 Prolactin SST | <input type="checkbox"/> 1406 Vitamin B2 PL |
| <input type="checkbox"/> 1310 CA 15.3 SST | <input type="checkbox"/> 1385 Hepatitis Be Ab SST | <input type="checkbox"/> 1467 Protein Electrophoresis, Serum SST | <input type="checkbox"/> 1408 Vitamin B3 PL |
| <input type="checkbox"/> 1361 CA - 19.9 SST | <input type="checkbox"/> 545 Hepatitis Bs Ab SST | <input type="checkbox"/> 1468 Protein Electrophoresis, Urine UC | <input type="checkbox"/> 1409 Vitamin B5 PL |
| <input type="checkbox"/> 505 CA - 125 SST | <input type="checkbox"/> 546 Hepatitis Bs Ag SST | <input type="checkbox"/> 501 PSA Free SST | <input type="checkbox"/> 1404 Vitamin B6 PL |
| <input type="checkbox"/> 1314 Cardio C - Reactive Protein SST | <input type="checkbox"/> 547 Hepatitis C Total Ab SST | <input type="checkbox"/> 528 PSA Total SST | <input type="checkbox"/> 541 Vitamin B12 SST |
| <input type="checkbox"/> 405 CBC (w/ diff & platelet count) L | <input type="checkbox"/> 108 Hepatitis Profile SST | <input type="checkbox"/> 527 PSA Total & Free SST | <input type="checkbox"/> 1421 Vitamin C SST |
| <input type="checkbox"/> 507 CEA SST | <input type="checkbox"/> 1381 HIV 1/2 SST | <input type="checkbox"/> 403 PT/INR B | <input type="checkbox"/> 6 Vitamin D, 25 Hydroxy SST |
| <input type="checkbox"/> 565 Celiac Disease Panel SST | <input type="checkbox"/> 522 Homocysteine SST | <input type="checkbox"/> 404 PTT B | <input type="checkbox"/> 1076 1,25 Dihydroxy Vitamin D SST |
| <input type="checkbox"/> 13 Cholesterol SST | <input type="checkbox"/> 1044 HSV 1/2 Ab SST | <input type="checkbox"/> 1351 PTH SST | <input type="checkbox"/> 1405 Vitamin E SST |
| <input type="checkbox"/> 1401 Coenzyme Q10 PL | <input type="checkbox"/> 1472 Immunofixation (IFE), Urine UC | <input type="checkbox"/> 40 Renal Panel SST | |
| <input type="checkbox"/> 15 Comp Metabolic Panel SST | <input type="checkbox"/> 1470 Immunofixation (IFE), Serum SST | | |

*Note: The provided ICD-10 codes are listed as a convenience. Ordering practitioners should report the diagnosis code that best describes the reason for performing the test, regardless of whether the code is listed above or not.

Additional Tests: _____

PHYSICIAN SIGNATURE _____

DATE: ___/___/___

PANEL DESCRIPTION

Any of the tests **listed** in test combinations/panels may be ordered individually.

100 CARDIAC RISK PANEL		VB- Vitamin B Deficiency	**804 ALLERGY CARE PROFILE				
BNP Triglycerides Cholesterol HDL LDL Direct Apolipoprotein A-1 & B hsCRP Homocysteine Lp-PLA2 Activity Assay* Creatinine Kinase Lp (a) mass		Vitamin B12 Vitamin B2 Vitamin B3 Vitamin B5 Vitamin B6 Vitamin B1	D1 Dermaphagoides pteronyssinus D2 Dermaphagoides farinae D70 Acarus siro E1 Cat Dander-Epithelium E2 Dog Epithelium E5 Dog Dander G10 Johnson Grass G1 Sweet Vernal Grass G2 Bermuda Grass G3 Orchard Grass G6 Timothy Grass H1 House Dust—Greer I1 Honey Bee Venom I206 American Cockroach I6 Cockroach K82 Latex M1 Penicillium notatum M2 Cladosporium herbarum M3 Aspergillus fumigatus M4 Mucor racemosus M6 Alternaria tenuis	T1 Maple T22 Pecan T3 Birch T6 Mountain Cedar T7 Oak T8 Elm W10 Lamb's Quarters W14 Rough Pigweed W18 Sheep Sorrel W1 Common Ragweed W20 Nettle W6 Mugwort W9 English Plantain F1 Egg White F105 Chocolate F13 Peanut F14 Soybean F17 Hazelnut F2 Milk F20 Almond	F201 Pecan Nut F202 Cashew F203 Pistachio F214 Spinach F24 Shrimp F245 Egg F25 Tomato F33 Orange F4 Wheat F40 Tuna F41 Salmon F44 Strawberry F45 Baker's Yeast F47 Garlic F7 Oat F75 Egg Yolk F79 Gluten F83 Chicken Meat F9 Rice F92 Banana		
101 HEALTH SCREEN I							
MALE 101M		FEMALE 101F	**ADDITIONAL ALLERGENS AVAILABLE FOR MORE INFORMATION AND ORDER PLEASE CALL SMA LAB (877)697-6252				
CBC Basic Metabolic Panel Lipid Panel Homocysteine Hepatic Panel Transferrin TIBC Vitamin B12, Folate TSH, T4, T3 GGT Magnesium Ferritin Vitamin D - 25 OH Uric Acid Urinalysis Complete PSA Total Testosterone Total Lp-PLA2 Activity Assay*		CBC Basic Metabolic Panel Lipid Panel Homocysteine Hepatic Panel Transferrin TIBC Vitamin B12, Folate TSH, T4, T3 GGT Magnesium Ferritin Vitamin D - 25 OH Uric Acid Urinalysis Complete Lp-PLA2 Activity Assay*	Z2 CARDIO PROFILE (3SST; 3LT, 1 Blue; 1 urine cup)		110 ABDOMINAL PAIN PANEL		
102 MALE HORMONE SCREEN		103 FEMALE HORMONE SCREEN	Lipid Panel Apo A1; Apo B Lp-PLA2* Hs-CRP BNP Insulin Vitamin D-25 OH Homocysteine Ferritin Folate Magnesium, serum Creatinine Kinase Fibrinogen Lp(a) mass FFA/NEFA MPO Coenzyme Q10 F2-Isoprostane/Creatinine Aspirin Works NMR profile		CBC (w/diff & platelet count) Basic Metabolic Panel Hepatic Function Panel Amylase Serum Lipase Hepatitis Panel Occult Blood, Stool Card H.Pylori IgG ESR or Sedimentation Rate C-Reactive Protein (CRP) Urinalysis Complete (dipstick and microscopic) CA - 19.9 AFP (Tumor Marker) CEA		
Testosterone Total Testosterone Free Estradiol Progesterone DHEA S04 SHBG Prolactin PSA Total		FSH LH Prolactin Progesterone Estradiol Testosterone Total SHBG DHEA S04	1050 HEAVY METALS, URINE		112 THYROID DISORDERS		
399 FEMALE WEIGHT LOSS PANEL		400 MALE WEIGHT LOSS PANEL	Aluminum Arsenic Cadmium Chromium Cobalt Copper Lead Manganese Mercury Thallium Zinc		CBC with differential BMP Hepatic Function Panel Lipid Panel TSH T4 Free TT3 Creatinine Kinase Anti- TPO Ab Anti- TG Ab		
Estradiol Progesterone TSH Free T4 Free T3 Total Testosterone DHEA S04 Glucose Triglycerides Total Cholesterol LDL (low-density lipoprotein) LDL (high-density lipoprotein) HDL (high-density lipoprotein) C-reactive Protein Liver Function Kidney Function Complete Blood Cell Counts Homocysteine Hepatitis C Urinalysis Complete		Total Testosterone Estradiol DHEA S04 TSH Free T4 Free T3 Glucose Triglycerides Total Cholesterol LDL (low-density lipoprotein) HDL (high-density lipoprotein) C-reactive Protein Liver Function Kidney Function Complete Blood Cell Counts PSA (prostate-specific antigen) Homocysteine Hepatitis C Urinalysis Complete	77 EPSTEIN-BARR VIRUS SCREEN		1018 HEAVY METALS (RLB)		
118 Systemic Lupus Erythematosus Profile		1478 ANCA Profile		Aluminum Arsenic Berilium Cadmium Cobalt Copper Manganese Molibdenum Nickel Lead Antimony Selenium Tin Thalium Tungsten Zinc Mercury			
ANA PROFILE, MFIA Complement C3 Complement C4 Rheumatoid Factor		Anti-MPO ANTI-PR3 ANTI-GMB		1018 HEAVY METALS (RLB)			
SPECIMEN TYPE KEY							
SST = Serum Separator L = Lavender Top UC = Urine Cup R = Red Top (No Barrier) G = Grey Top WT = White Top (PPT Tube) RLB = Royal Blue SC= Stool Card PL= Plasma Lavender B=Blue Top GR=Green Top							

* Available for Medicare only