



PATIENT INFORMATION

Last Name: _____ First Name: _____

Street Address: _____ Apt#: _____

City: _____ State: _____ Zip: _____

Phone: _____ DOB: ____/____/____ SSN: _____ Gender: F M

INSURANCE INFORMATION

Insurance Name: _____

Group#: _____ I.D#: _____

Bill Medicare Bill Medicaid Bill Patient

SPECIMEN INFORMATION

Date Collected: ____/____/____ Time Collected : _____ STAT

Fax Results to: _____

ICD10 CODES

It is the ordering party's responsibility to order only those tests medically necessary for the diagnosis and treatment of the patient.

966 - Respiratory Panel, PCR **976 - FLU A, FLU B, RSV PANEL, PCR** **C19 - Coronavirus Covid-19, PCR**

RPP DIAGNOSIS (ICD-10 Code)*	RPP DIAGNOSIS (ICD-10 Code) cont'd*	RPP DIAGNOSIS (ICD-10 Code)*	RPP DIAGNOSIS (ICD-10 Code) cont'd*	RPP DIAGNOSIS (ICD-10 Code) cont'd*
<input type="checkbox"/> A49.9 Bacterial infection, unspecified site <input type="checkbox"/> B34.9 Viral infection, unspecified <input type="checkbox"/> B97.0 Adenovirus as the cause of diseases classified elsewhere <input type="checkbox"/> B97.89 Other viral agents as the cause of diseases classified elsewhere <input type="checkbox"/> B99.9 Unspecified infectious disease <input type="checkbox"/> J00 Acute nasopharyngitis <input type="checkbox"/> J01.90 Acute sinusitis, unspecified <input type="checkbox"/> J02.0 Streptococcal pharyngitis <input type="checkbox"/> J02.9 Acute pharyngitis, unspecified	<input type="checkbox"/> J06.9 Acute upper respiratory infection, unspecified <input type="checkbox"/> J11.00 Influenza due to unidentified influenza virus with unspecified type of pneumonia <input type="checkbox"/> J11.1 Influenza due to unidentified influenza virus with other respiratory manifestations <input type="checkbox"/> J12.9 Viral pneumonia, unspecified <input type="checkbox"/> J15.9 Unspecified bacterial pneumonia	<input type="checkbox"/> J16.0 Chlamydial pneumonia <input type="checkbox"/> J18.9 Pneumonia, unspecified organism <input type="checkbox"/> J20.0 Acute bronchitis due to Mycoplasma pneumoniae <input type="checkbox"/> J21.0 Acute bronchiolitis due to respiratory syncytial virus <input type="checkbox"/> J20.9 Acute bronchitis, unspecified <input type="checkbox"/> J32.9 Chronic sinusitis, unspecified <input type="checkbox"/> J40 Bronchitis, not specified as acute or chronic	<input type="checkbox"/> J98.9 Respiratory disorder unspecified <input type="checkbox"/> M60.9 Myositis, unspecified <input type="checkbox"/> M79.10 Myalgia <input type="checkbox"/> M79.7 Fibromyalgia <input type="checkbox"/> R05.1 Cough <input type="checkbox"/> R50.9 Fever, unspecified <input type="checkbox"/> R53.1 Weakness <input type="checkbox"/> R53.81 Other malaise <input type="checkbox"/> R53.83 Other fatigue <input type="checkbox"/> U07.1 Covid-19	<input type="checkbox"/> Z03.818 Encounter for observation for suspected exposure to other biological agents ruled out <input type="checkbox"/> Z20.828 Contact with and (suspected) exposure to other viral communicable diseases <input type="checkbox"/> Z11.59 Encounter for screening for other viral diseases

958 - GI Bacterial Panel, Stool, PCR **956 - Vaginal Panel, NAA** **1417 - STD Panel, NAA**

GPP DIAGNOSIS (ICD-10 Code)*	VAGINAL PANEL DIAGNOSIS (ICD-10 Code)*	STD DIAGNOSIS (ICD-10 Code) *	STD DIAGNOSIS (ICD-10 Code) cont'd*	STD DIAGNOSIS (ICD-10 Code) cont'd*
<input type="checkbox"/> R19.7 Diarrhea, unspecified <input type="checkbox"/> K29.60 Other gastritis without bleeding <input type="checkbox"/> K52.9 Noninfective gastroenteritis and colitis, unspecified <input type="checkbox"/> K92.1 Melena <input type="checkbox"/> R10.13 Epigastric pain <input type="checkbox"/> R10.9 Unspecified abdominal pain <input type="checkbox"/> A09 Infectious gastroenteritis and colitis, unspecified	<input type="checkbox"/> N76.0 Acute vaginitis <input type="checkbox"/> Z01.411 Encounter for gynecological examination (general) (routine) with abnormal findings <input type="checkbox"/> Z01.419 Encounter for gynecological examination (general) (routine) without abnormal findings <input type="checkbox"/> Z36.85 Encounter for antenatal screening for Streptococcus B	<input type="checkbox"/> A64 Unspecified sexually transmitted disease <input type="checkbox"/> B20 Human immunodeficiency virus (HIV) disease <input type="checkbox"/> N39.0 Urinary tract infection, site not specified <input type="checkbox"/> N76.0 Acute vaginitis <input type="checkbox"/> N76.1 Subacute and chronic vaginitis <input type="checkbox"/> N76.2 Acute vulvitis <input type="checkbox"/> N76.3 Subacute and chronic vulvitis	<input type="checkbox"/> N89.8 Other specified noninflammatory disorders of vagina <input type="checkbox"/> Z01.411 Encounter for gynecological examination (general) (routine) with abnormal findings <input type="checkbox"/> Z01.419 Encounter for gynecological examination (general) (routine) without abnormal findings <input type="checkbox"/> Z11.8 Encounter for screening for other infectious and parasitic diseases	<input type="checkbox"/> Z11.3 Encounter for screening for infections with a predominantly sexual mode of transmission <input type="checkbox"/> Z12.4 Encounter for screening for malignant neoplasm of cervix <input type="checkbox"/> Z20.2 Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission

6300 - UTI Panel, PCR w/ Sensitivity

UTI DIAGNOSIS (ICD-10 Code)*	UTI DIAGNOSIS (ICD-10 Code) cont'd*	UTI DIAGNOSIS (ICD-10 Code) cont'd*	UTI DIAGNOSIS (ICD-10 Code) cont'd*	UTI DIAGNOSIS (ICD-10 Code) cont'd*
<input type="checkbox"/> R30.0 Dysuria <input type="checkbox"/> R30.9 Painful micturition, unspecified <input type="checkbox"/> R36.0 Urethral discharge without blood <input type="checkbox"/> R36.9 Urethral discharge, unspecified <input type="checkbox"/> R82.71 Bacteriuria <input type="checkbox"/> R82.79 Other abnormal findings on microbiological examination of urine	<input type="checkbox"/> B37.41 Candidal cystitis & urethritis <input type="checkbox"/> B37.49 Other urogenital candidiasis <input type="checkbox"/> N30.80 Other cystitis without hematuria <input type="checkbox"/> N30.81 Other cystitis with hematuria <input type="checkbox"/> N34.1 Nonspecific urethritis <input type="checkbox"/> N34.3 Urethral syndrome, unspecified <input type="checkbox"/> N41.0 Acute prostatitis <input type="checkbox"/> N41.8 Other inflammatory diseases of prostate	<input type="checkbox"/> N41.9 Inflammatory disease of prostate, unspecified <input type="checkbox"/> N45.1 Epididymitis <input type="checkbox"/> N45.2 Orchitis <input type="checkbox"/> N45.3 Epididymo-orchitis <input type="checkbox"/> N76.89 Other specified inflammation of vagina and vulva	<input type="checkbox"/> N76.1 Subacute & chronic vaginitis <input type="checkbox"/> N76.2 Acute vulvitis <input type="checkbox"/> N76.3 Subacute & chronic vulvitis <input type="checkbox"/> N77.1 Vaginitis, vulvitis & vulvovaginitis in diseases classified elsewhere <input type="checkbox"/> N94.89 Other specified conditions associated with female genital organs & menstrual cycle	<input type="checkbox"/> A56.01 Chlamydial cystitis and urethritis <input type="checkbox"/> A56.11 Chlamydial female pelvic inflammatory disease <input type="checkbox"/> N73.9 Female pelvic inflammatory disease unspecified <input type="checkbox"/> N39.0 Urinary Tract Infection, site not specified

6301 - Wound Panel, PCR w/ Sensitivity

WOUND DIAGNOSIS (ICD-10 Code)*	WOUND DIAGNOSIS (ICD-10 Code) cont'd*	WOUND DIAGNOSIS (ICD-10 Code) cont'd*
<input type="checkbox"/> R21 Rash and other nonspecific skin eruption <input type="checkbox"/> R50.81 Fever presenting with conditions classified elsewhere <input type="checkbox"/> R59.0 Localized enlarged lymph nodes <input type="checkbox"/> R78.81 Bacteremia <input type="checkbox"/> D70.3 Neutropenia due to infection <input type="checkbox"/> I88.1 Chronic lymphadenitis, except mesenteric <input type="checkbox"/> L04.0 Acute lymphadenitis of face, head and neck <input type="checkbox"/> L04.1 Acute lymphadenitis of trunk <input type="checkbox"/> L04.2 Acute lymphadenitis of upper limb <input type="checkbox"/> L04.3 Acute lymphadenitis of lower limb <input type="checkbox"/> L04.8 Acute lymphadenitis of other sites <input type="checkbox"/> L04.9 Acute lymphadenitis, unspecified	<input type="checkbox"/> M02.30 Reiter's disease, unspecified site <input type="checkbox"/> M02.319 Reiter's disease, unspecified shoulder <input type="checkbox"/> M02.329 Reiter's disease, unspecified elbow <input type="checkbox"/> M02.349 Reiter's disease, unspecified hand <input type="checkbox"/> M02.359 Reiter's disease, unspecified hip <input type="checkbox"/> M02.369 Reiter's disease, unspecified knee <input type="checkbox"/> M02.371 Reiter's disease, right ankle and foot <input type="checkbox"/> M02.372 Reiter's disease, left ankle and foot <input type="checkbox"/> M02.379 Reiter's disease, unspecified ankle and foot	<input type="checkbox"/> M25.519 Pain in unspecified shoulder <input type="checkbox"/> M25.529 Pain in unspecified elbow <input type="checkbox"/> M25.539 Pain in unspecified wrist <input type="checkbox"/> M25.549 Pain in joints of unspecified hand <input type="checkbox"/> M25.559 Pain in unspecified hip <input type="checkbox"/> M25.561 Pain in right knee <input type="checkbox"/> M25.562 Pain in left knee <input type="checkbox"/> L03.031 Cellulitis of right toe <input type="checkbox"/> L03.032 Cellulitis of left toe <input type="checkbox"/> L03.116 Cellulitis of left lower limb <input type="checkbox"/> L03.115 Cellulitis of right lower limb

Wound Source: _____

977 - Nail Fungus, PCR

NAIL FUNGUS (ICD-10 Code)	
<input type="checkbox"/> B07.0 Plantar wart <input type="checkbox"/> B35.1 Tinea unguium	<input type="checkbox"/> B36.8 Other specified superficial mycoses <input type="checkbox"/> B36.9 Superficial mycosis, unspecified <input type="checkbox"/> B37.9 Candidiasis, unspecified
<input type="checkbox"/> 6600 - Body Fluid Culture (Aerobic, Anaerobic, Gram Stain (other than CSF))	
<input type="checkbox"/> 6504 - Genital Tract Culture	<input type="checkbox"/> 6503 - MRSA Culture
<input type="checkbox"/> 6500 - Sputum Culture	<input type="checkbox"/> 6502 - Throat Culture
<input type="checkbox"/> 6410 - Urine Culture, Comprehensive	<input type="checkbox"/> 6400 - Urine Culture, Routine
<input type="checkbox"/> 6401 - Wound Culture (Aerobic and Anaerobic)	

*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.

PHYSICIAN SIGNATURE _____ DATE COLLECTED: ____/____/____

PANEL DESCRIPTION			
966 Respiratory Panel, PCR (NS)	958 GI Bacterial Panel, Stool, PCR (PP or USS)	6300 UTI w/Sensitivity (UC & GCT)	6301 Wound Panel w/Sensitivity (Eswab)
<p>Viral Targets</p> <p>Respiratory Syncytial Virus A (RSV A) Respiratory Syncytial Virus B (RSV B) Influenza A Influenza A_H1N1_pdm09 Influenza A_H1 Influenza A_H3 Influenza B Parainfluenza virus 1 Parainfluenza virus 2 Parainfluenza virus 3 Parainfluenza virus 4 Human Enterovirus Adenovirus Metapneumovirus Coronavirus 229E Coronavirus NL63 Coronavirus OC43 Human Bocavirus Human Rhinovirus</p> <p>Bacterial Targets</p> <p>Streptococcus pneumoniae Legionella pneumophila Haemophilus influenzae Mycoplasma pneumoniae Chlamydia pneumoniae Bordetella pertussis Bordetella parapertussis</p>	<p>Bacterial Targets</p> <p>Salmonella spp. Campylobacter spp. Shigella spp. (includes enteroinvasive Escherichia coli [EIEC]) Shiga toxin 1 (stx1)/Shiga toxin 2 (stx2) genes</p> <p>976 FLU A, FLU B, RSV Panel, PCR (NS)</p> <p>Influenza A Influenza B RSV</p> <p>1417 STD Panel (UC)</p> <p>Neisseria gonorrhoeae, NAA Chlamydia trachomatis, NAA Trichomonas vaginalis, NAA</p> <p>956 Vaginal Panel PCR (UVE)</p> <p>Bacterial Vaginosis Candida Group (C. albicans, C. tropicalis, C. parapsilosis, and C. dubliniensis) Candida krusei Candida glabrata Trichomonas Vaginalis</p> <p>C19 Coronavirus PCR (NS)</p> <p>Viral Targets</p> <p>SARS-CoV-2</p> <p>6600 Body Fluid Culture (Eswab)</p> <p>6504 Genital Tract Culture (Eswab)</p> <p>6503 MRSA Culture (Eswab)</p> <p>6500 Sputum Culture (sterile container)</p> <p>6610 Urine Culture, Comprehensive (GCT)</p> <p>6400 Urine Culture, Routine (GCT)</p> <p>6401 Wound Culture (Eswab)</p>	<p>UTI Bacterial Targets</p> <p>Acinetobacter baumannii Aerococcus urinae Citrobacter braakii Citrobacter freundii Citrobacter koseri Corynebacterium urealyticum Enterococcus hirae Enterobacter cloacae Enterococcus faecalis Enterococcus faecium Escherichia coli Klebsiella aerogenes Klebsiella oxytoca Klebsiella pneumoniae Morganella morganii Proteus penneri Proteus mirabilis Proteus vulgaris Providencia stuartii Pseudomonas aeruginosa Serratia marcescens Staphylococcus aureus Staphylococcus epidermidis Staphylococcus haemolyticus Staphylococcus lugdenensis Staphylococcus saprophyticus Staphylococcus warneri Stenotrophomonas maltophilia Streptococcus agalactiae (Group B Strep) Streptococcus pyogenes (Group A Strep)</p> <p>Fungal UTI Infection Targets</p> <p>Candida albicans Candida auris Candida glabrata Candida parapsilosis Candida tropicalis</p> <p>UTI Antibiotic Resistance Targets</p> <p>Carbapenemase Resistance Methicillin Resistance Vancomycin Resistance ESBL Resistance</p> <p>UTI STI Targets</p> <p>Mycoplasma hominis Mycoplasma genitalium Ureaplasma urealyticum</p>	<p>Wound Bacterial Targets</p> <p>Acinetobacter baumannii Actinomyces turicensis Actinomyces israelii Actinomyces odontolyticus Bacteroides fragilis Bacteroides rodentium Bacteroides thetaiotaomicon Bacteroides uniformis Citrobacter braakii Citrobacter freundii Citrobacter koseri Clostridium botulinum Clostridium difficile Clostridium perfringens Clostridium septicum Corynebacterium jeikeium Enterococcus hirae Enterobacter cloacae Enterococcus faecalis Enterococcus faecium Escherichia coli Klebsiella aerogenes Klebsiella oxytoca Klebsiella pneumoniae Morganella morganii Nocardia species Prevotella bivia Prevotella disien Prevotella intermedia Prevotella melaninogenica Proteus mirabilis Proteus penneri Proteus vulgaris Providencia stuartii Pseudomonas aeruginosa Serratia marcescens Staphylococcus aureus Staphylococcus epidermidis Staphylococcus haemolyticus Staphylococcus lugdenensis Staphylococcus saprophyticus Staphylococcus warneri Stenotrophomonas maltophilia Streptococcus agalactiae (Group B Strep) Streptococcus pyogenes (Group A Strep)</p> <p>Fungal Wound Infection Targets</p> <p>Candida albicans Candida auris Candida glabrata Candida parapsilosis Candida tropicalis</p> <p>Viral Wound Infection Targets</p> <p>Herpes Simplex Virus (HSV 1) Herpes Simplex Virus (HSV 2)</p> <p>Wound Antibiotic Resistance Targets</p> <p>Carbapenemase Resistance Methicillin Resistance Vancomycin Resistance ESBL Resistance</p>
<p>977 Nail Fungus PCR (NAIL)</p> <p>Aspergillus flavus Aspergillus fumigatus Aspergillus niger Aspergillus terreus Candida albicans Candida auris Candida glabrata Candida krusei Candida parapsilosis Epidermophyton floccosum Fusarium oxysporum Malassezia furfur Malassezia globosa Malassezia restricta Malassezia sympodialis Microsporium audouinii Microsporium canis Microsporium gypseum Trichophyton mentagrophytes/interdigitale Trichophyton rubrum Trichophyton soudanense Trichophyton terrestre Trichophyton tonsurans Trichophyton verrucosum Trichophyton violaceum Trichosporon asahii Trichosporon mucoides</p>			
CONTAINER TYPE KEY			
NS - Nasopharyngeal Swab	VRS - Vaginal/Rectal Swab	PP - Para-Pak C&S Orange	UVE - BD UVE Sample Buffer Tube
			UC - Urine Cup
			GCT - Gray Culture Tube
USS - Unpreserved Soft Stool			