



MicroGen^{DX}
Next-Gen DNA Sequencing

Superior Diagnostics. Targeted Treatments. Better Outcomes.
IN ASSOCIATION WITH SOUTHWEST REGIONAL PCR LABORATORY, LLC

4321 MARSHA SHARP FWY, DOOR 2 | LUBBOCK, TX 79407 | PHONE: (855) 208-0019 | FAX: (407) 204-1401

STANDARD LAB REQUISITION FORM

ALL HIGHLIGHTED AREAS MUST BE COMPLETED PRIOR TO SENDING FORM TO LAB.

PATIENT INFORMATION			CLINIC INFORMATION		PHYSICIAN INFORMATION	
Name (First and Last): (Include Face Sheet)			Clinic Name:		<input type="checkbox"/> Physician Name: _____ NPI#: _____	
DOB:	Gender:	Last 4 of SSN:	Clinic Address:		<input type="checkbox"/> Physician Name: _____ NPI#: _____	
Address:			Clinic Phone:		<input type="checkbox"/> Physician Name: _____ NPI#: _____	
City:			Clinic Fax:		<input type="checkbox"/> Physician Name: _____ NPI#: _____	
State:	Zip:	Patient Phone:	Clinic Email:		<input type="checkbox"/> Physician Name: _____ NPI#: _____	

SPECIMEN INFO				INSURANCE & DIAGNOSTIC INFORMATION (SEND FRONT & BACK OF INSURANCE CARD)			
Date Collected: ____/____/____		Primary Insurance:		Subscriber ID:		Group Number:	
Specimen Source:		Primary Diagnosis/Clinical Diagnosis:		Secondary Diagnosis/Clinical Diagnosis:		Medicare Claim Number:	
Number of Samples:		ICD-10 Code: (common codes found on reverse):		ICD-10 Code: (common codes found on reverse):			

qPCR RAPID SCREENING AND NEXT-GEN DNA SEQUENCING TEST			ENHANCED PANELS	
PART 1 Choose Panel Type <input type="checkbox"/> ENT/Pulmonary/Resp <input type="checkbox"/> Unique Fluid <input type="checkbox"/> Nail Panel Orthopedic <input type="checkbox"/> Urine Panel <input type="checkbox"/> Panel Rectal Swab <input type="checkbox"/> Vaginal Panel <input type="checkbox"/> Panel <input type="checkbox"/> Wound Panel		PART 2 Confirm Test Order by checking box below <input type="checkbox"/> qPCR Rapid Screening and Next-Gen Comprehensive DNA Sequencing for Unknown Microbes including Bacteria and Fungi.		<input type="checkbox"/> MRSA Screening
		and /or	<input type="checkbox"/> Gastrointestinal Panel tests for the presence of 22 species of bacteria, viruses, and parasites (Stool in Cary Blair Media Only) <input type="checkbox"/> Viral-Resp Panel tests for the presence of 19 viral and bacterial targets (Nasopharyngeal Swabs Only)	

PHYSICIAN SIGNATURE

The test ordered is medically necessary for the diagnosis indicated. By signing the requisition, I certify that I have informed consent from the patient as required by any applicable state or federal laws with respect to each test ordered. If the patient signature is not located below, it is indicated that the physician has obtained informed written consent.

Physician Signature: _____

PATIENT SIGNATURE

Patient Consent Signature: Your doctor has requested testing by Southwest Regional PCR Lab LLC dba MicroGen DX, a national laboratory that provides molecular diagnostic testing. The DNA technology that MicroGen DX provides is the "gold standard" of microbial diagnostics. After providing test results to your physician, MicroGen DX will bill most insurance companies for the testing. The insurance company will review the claim and determine your responsibility for deductible amounts and uncovered portions of the bill for each sample sent to the laboratory. MicroGen DX will bill you at your address attached for any portion of the testing not covered by the insurance company, your deductible, or unacceptable insurance carriers unless payment information is provided with this sample requisition. Self-pay charges are \$199 per qPCR and sequencing test and \$279 per Respiratory or Gastrointestinal Panels. By signing below, you take financial responsibility for the payment for this testing.

Patient Signature: _____

PAYMENT INFORMATION:

Pay By Check (please attach check to this form)

Bill Me: Address _____ City _____ ST _____ Zip _____ Daytime Phone _____

Credit Card Visa MasterCard Other _____

Card #: _____ Expiration (MM/YY): _____ CW: _____



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ENT/ PULMONARY PANEL QPCR ORGANISMS	GASTROINTESTINAL PANEL ORGANISMS	NAIL PANEL QPCR ORGANISMS	RESPIRATORY PANEL ORGANISMS	URINE/SEMEN/ RECTAL PANEL QPCR ORGANISMS	WOUND/ ORTHO PANEL QPCR ORGANISMS
<p>Total 165 Bacterial Load and Resistance Genes Quinolone resistance Methicillin resistance Vancomycin resistance Beta-lactam resistance Carbapenem resistance Macrolide resistance Aminoglycoside resistance Tetracycline resistance</p> <p>Bacteria: Haemophilus influenzae Streptococcus agalactiae (group B) Streptococcus pyogenes (group A) Moraxella catarrhalis Pseudomonas aeruginosa Staphylococcus aureus Streptococcus pneumoniae</p> <p>Fungus: Candida albicans</p>	<p>Bacteria: Campylobacter sp (jejuni, coli, upsaliensis) Clostridium difficile (toxin A/B) Plesiomonas shigelloides Salmonella sp Yersinia enterocolitica Vibrio sp (parahaemolyticus, vulnificus, cholerae) Vibrio cholerae</p> <p>Enterococcus faecalis Streptococcus agalactiae (group B) Streptococcus pyogenes (group A) Enterococcus faecium Pseudomonas aeruginosa Staphylococcus aureus</p> <p>Fungus: Candida albicans Trichophyton rubrum</p>	<p>Total 165 Bacterial Load and Resistance Genes Quinolone resistance Methicillin resistance Vancomycin resistance Beta-lactam resistance Carbapenem resistance Macrolide resistance Aminoglycoside resistance Tetracycline resistance</p> <p>Bacteria: Enterococcus faecalis Streptococcus agalactiae (group B) Streptococcus pyogenes (group A) Enterococcus faecium Pseudomonas aeruginosa Staphylococcus aureus</p> <p>Fungus: Candida albicans Trichophyton rubrum</p>	<p>Viruses: Influenza A (H1, H1 2009, H3) Influenza B Adenovirus Coronavirus (229E, OC43, NL63, HKU1) Human Metapneumovirus Human Rhinovirus/Enterovirus Parainfluenza virus (1, 2, 3, 4) Respiratory Syncytial Virus (RSV)</p> <p>Bacteria: Bordetella pertussis Chlamydomphila pneumoniae Mycoplasma pneumoniae</p>	<p>Total 165 Bacterial Load and Resistance Genes Quinolone resistance Methicillin resistance Vancomycin resistance Beta-lactam resistance Carbapenem resistance Macrolide resistance Aminoglycoside resistance Tetracycline resistance</p> <p>Bacteria: Enterococcus faecalis Streptococcus agalactiae (group B) Klebsiella pneumoniae Escherichia coli Pseudomonas aeruginosa Staphylococcus aureus Proteus mirabilis</p> <p>Fungus: Candida albicans</p>	<p>Total 165 Bacterial Load and Resistance Genes Quinolone resistance Methicillin resistance Vancomycin resistance Beta-lactam resistance Carbapenem resistance Macrolide resistance Aminoglycoside resistance Tetracycline resistance</p> <p>Bacteria: Enterococcus faecalis Streptococcus agalactiae (group B) Streptococcus pyogenes (group A) Enterococcus faecium Pseudomonas aeruginosa Staphylococcus aureus Klebsiella pneumoniae</p> <p>Fungus: Candida albicans</p>
					<p>VAGINAL PANEL QPCR ORGANISMS</p> <p>Total 165 Bacterial Load and Resistance Genes Quinolone resistance Methicillin resistance Vancomycin resistance Beta-lactam resistance Carbapenem resistance Macrolide resistance Aminoglycoside resistance Tetracycline resistance</p> <p>Fungus: Candida albicans</p>
COMMONLY USED ENT ICD10 CODES:	COMMONLY USED GI ICD10 CODES:	COMMONLY USED NAIL ICD10 CODES:	COMMONLY USED RP ICD10 CODES:	COMMONLY USED UTI ICD10 CODES:	COMMONLY USED WOUND ICD10 CODES:
<p>J47.9: Bronchiectasis, uncomplicated J47.1: Bronchiectasis with exacerbation J44.9: COPD, unspecified J44.1: COPD with exacerbation J06.9: Upper Respiratory Infection, acute J32.8: Other chronic sinusitis J32.9: Chronic sinusitis unspecified R05: Cough J02.9: Acute Pharyngitis, unspecified J01.9: Acute sinusitis, unspecified</p>	<p>A04.9: Bacterial intestinal infection, unspecified A09: Infectious gastroenteritis and colitis, unspecified K52.29: Other allergic and dietetic gastroenteritis and colitis R19.7: Diarrhea, unspecified Z20.89: Suspected exposure to other communicable disease</p>	<p>B35.1: Tinea unguium B37.2: Candidiasis of skin and nail L60.8: other nail disorders L02.619: Cutaneous abscess of unspecified foot</p>	<p>J40: Bronchitis, not specified as acute or chronic R05: Cough J15.9: Unspecified bacterial pneumoniae J32.0: Chronic maxillary sinusitis J02.9: Acute pharyngitis, unspecified J01.9: Acute sinusitis, unspecified J47.9: Bronchiectasis, uncomplicated J47.1: Bronchiectasis with exacerbation J44.9: COPD, unspecified J44.1: COPD with exacerbation J06.9: Upper Respiratory Infection, acute B34.9: Viral Infection, unspecified Z13.83: Encounter for screening for respiratory disorder NEC J11.1: Influenza due to unidentified virus with other respiratory manifestations</p>	<p>N76.1: Subacute and chronic vaginitis B37.49: Other urogenital candidiasis B37.9: Candidiasis, unspecified N39.0: Urinary tract infection, site not specified A48.8: Other specified bacterial disease Z22.39: Carrier of other specified bacterial disease D70.3: Neutropenia due to infection R21: Rash and other nonspecific skin eruption R50.9: Fever Z20.89: Suspected exposure to other communicable disease N41.1: Chronic prostatitis</p>	<p>A48.8: Other specified bacterial disease Z22.39: Carrier of other specified bacterial disease M25.50: Joint pain unspecified R53.1: Weakness R53.81: Other malaise Z22.330: Carrier of Group B Streptococcus A49.9: Bacterial infection, unspecified B99.9: Unspecified infectious disease M79.1: Myalgia R40.1: Stupor R50.9: Fever R51: Headache R57.9: Shock R59.9: Enlarged lymph nodes, unspecified R63.0: Anorexia Z20.89: Suspected exposure to other communicable disease</p>
	<p>COMMONLY USED RECTAL SWAB ICD10 CODES:</p> <p>R97.20 Elevated PSA</p>	<p>COMMONLY USED MRSA SWAB ICD10 CODES:</p> <p>Z22.322 Carrier or suspected carrier of MRSA</p>			