

PATIENT INFORMATION

Name: _____

DOB: _____ MRN: _____

Address: _____



OUT OF NETWORK ORDER FORM

Facility Name: _____ Critical Call #: _____

Order Date: _____ Diagnosis: _____

Address: _____

Print Provider Name: _____ NPI #: _____

Provider Signature: _____ Phone #: _____ Fax #: _____

CMP and Lytes are the only available panels.

BLOOD TESTS

A1C (A1C)	Potassium (K)	Frequency:
Alk Phosphatase (ALKP)	Phenytoin (PHENY)	
ALT (ALT)	Prothrombin Time (PTT)	
Amylase (AMY)	PSA (PSA1)	
AST (AST)	PT-INR (PT)	Lab orders remain active for
Bilirubin Total (BILIT)	Retic (RETI2)	one year from the date issued.
BUN (BUN)	Sed Rate (ESR)	
BNP (BNPNT)	Sirolimus (SIRBLD)	
Calcium (CA)	Sodium (NA)	
Carbon dioxide (CO2)	Tacrolimus (TACRO)	
CBC (CBC)	Testosterone (TESTO)	
Chloride (CL)	Total Protein (TP)	
Cholesterol (CHOL)	TSH (TSH)	
Comp. Metabolic Pan. (CMP)	Uric Acid (URIC)	
Creatine Kinase (CPK)	Vitamin C (VITAD)	For faxing or additional
C-reactive Protein (CRP)		Information, please contact the
Creatinine (CRP)		GHS location of the patient's
Digoxin (DIG)	URINE TESTS	choice at 608-782-7300 or
Electrolytes (LYTES)	Microalbumin (RUMA2)	800-362-5967.
Ferritin (FER)	Protein/Creat Ratio (PCUR)	
GGT (GGT)	Urine Culture (URC)	
Glucose (GLU)	UA W/O Culture Reflex (UA1)	
HCG, Quantitative (BHCG)	UA W/Culture Reflex (URINE)	
Hematocrit (HCT)		
Hemoglobin (HGB)	STOOL TESTS	OTHER:
Hemogram (HEMG)	Calprotectin (CALPR)	
Iron/Iron Binding (IRON)	Clost Difficile Toxin (CDIFB)	:
LDH (LDH)	H Pylori (HPSTO)	
Lipase (LIPAS)	Stool Culture (EBP)	
Lipid Panel (LPA)		
Magnesium (MG)	SWABS	
Methadone (METAD)	Covid, RSVP, FLU A,B (4Plex)	
Parathyroid Hormone (PTH)	Strep Screen (BSSCR)	
Phosphorus (PHOS)	Wounds Culture (WND)	
Platelet Count (PLT)		