

Update Form for the Online Laboratory Handbook

Name of Requester: _____

Date: _____

Department: _____

Test Name	
Test Number (Ordering Code)	
Collection	
Patient Preparation	
Collect	
Specimen Preparation	
Pediatric Collection	
Unacceptable Conditions	
Storage/Transport Temperature	
Stability (from collection to initiation)	
Performed (when)	
Remarks	
Ordering	
Ordering Recommendations	
Methodology	
Epidemiology	
Reported	
Department	
Synonyms	
Notes	
Results Interpretation	
Reference Interval (Critical range)	
Interpretive Data	
Utility/Use	
Limitations	
Additional Information	
Administrative	
CPT Codes	
Forms to be included (yes/no)	
Go Live Date	

****Please scan or send via Inter Departmental mail to Kristi Melton (Lab Outreach; Jefferson)****