



Laboratory and Pulmonary Request Form

SEND RESULTS TO:

PATIENT _____ D.O.B. _____ SS# _____ DATE _____

ROUTINE STAT PRE-OP SURGERY DATE _____ PHONE TO _____ FAX TO _____

PHYSICIAN SIGNATURE _____

IF CHECKED, DO NOT EAT OR DRINK (except water) FOR 12-14 HOURS BEFORE GOING TO THE LABORATORY.

Diagnosis information is required for each test ordered. The physician should only order Medicare reimbursed tests that are medically necessary for the diagnosis or treatment of a patient rather than for screening purposes. Medicare generally does not cover routine screening test. Highlighted tests listed below have diagnosis and frequency related coverage limitations.

DIAGNOSIS#1 _____ DIAGNOSIS#2 _____
DIAGNOSIS#3 _____ DIAGNOSIS#4 _____

REFLEX TESTS: Clearly identify the condition under which a reflex test is to be done.

Laboratory Medical Directors:
Hanford/Selma/Reedley Labs: Stephen Avalos, M.D. | Tulare Lab: Gary A. Walter M.D.

Table with columns: CPT, X, INDIVIDUAL TESTS, CPT, X, INDIVIDUAL TESTS, CPT, X, MICROBIOLOGY CULTURE. Includes tests like 24 HR. CREATININE CLEARANCE, ALBUMIN, ALCOHOL (ETHYL), AMYLASE, ANA, ASO, AST, BILIRUBIN, TOTAL, BUN, CALCIIUM, CARBAMAZEPINE (TEGRETOL), CBC + AUTO DIFF, CEA, CHOLESTEROL, CK - TOTAL, COCCI SEROLOGY, COCCI SEROLOGY REFERENCE LAB, CORTISOL, CREATININE, CRP, Cardiac Risk, CRP, Inflammation, D-DIMER, DIGOXIN (LANOXIN), ESTRADIOL, FERRITIN, FLU, A & B, FOLIC ACID, FREE T4, FSH, GLUCOSE (FASTING / RANDOM), GGT gestational, GGT non-gestational, GLYCO/Hgb A1C, HEMOGRAM, HCG Qual, Serum, HCG Qual, Urine, HDL, HIV, H. PYLORI BREATH TEST, H. PYLORI Ag Stool, Hep A Ab, IgM, Hep B Surface Ab, Quant, Hep C Virus Ab, HSV 1 & 2, IRON, IRON / TIBC, KETONES (BHOB), LDH, LDL (DIRECT), LITHIUM, MAGNESIUM, MICROALBUMIN, URINE, MONO SCREEN, IFOB (IMMUNE CHEMICAL FECAL OCCULT BLOOD), PHENOBARBITAL, PHENYTOIN (DILANTIN), PHOSPHORUS, PLATELET FUNCTION, POTASSIUM, PROLACTIN, PSA (Prostatic Specific Antigen) Diagnostic, PSA SCREEN (Prostatic Specific Antigen), PROTHROMBIN TIME +INR, PTT, QUANTIFERON GOLD, RHEUMATOID FACTOR (RA), RUBELLA, SARS-CoV-2 IgG, SED. RATE, RPR+Reflex Titer, T-3 UPTAKE, TESTOSTERONE (TOTAL), THEOPHYLLINE (AMINOPHYLLINE), TOTAL T-3, TOTAL T-4, TOTAL PROTEIN, TRANSFERRIN, TRIGLYCERIDES, TROPONIN, TSH, UA COMPLETE (Dipstick & Microscopic), UA COMPLETE (Culture if Indicated), URIC ACID, URINE DRUG SCREEN PANEL, VALPROIC ACID (DEPAKENE), VITAMIN B-12, VITAMIN D 25 HYDROXY, AFB w/Smear, BLOOD CULTURE X, C DIFF by PCR w/ REFLEX TO TOXIN, CHLAMYDIA/GC BY PCR, CULTURE, AEROBIC, CULTURE, ANAEROBIC, CULTURE, SCREEN GRP A STREP, CULTURE, SCREEN GRP B STREP, CULTURE, SCREEN MRSA, CULTURE, SCREEN VRE, CULTURE, FUNGUS, CULTURE, STOOL, CULTURE, URINE, GI PANEL by BIOFIRE, GRAM STAIN, HERPES CULTURE, KOH (SOURCE), WET MOUNT (SOURCE), O & P Complete, O & P Screen (Crypto/Giardia), STREP A by PCR, RAPID STREP, GROUP B, RSV, VIRAL (SOURCE), BLOOD BANK, ABO & Rh, ANTIBODY SCREEN, DIRECT COOMBS (DAT), ANTIBODY TITER, TYPE & SCREEN (ABO, Rh, Antibody Screen uncrossmatched, ABO-specific units on hand), RHOGAM STUDIES (ABO & RH, Antibody Screen if indicated), TYPE & CROSS UNITS, PLATELET PHERESIS UNIT, FROZEN PLASMA # UNITS, SCREENING PANELS, BASIC METABOLIC PNL (NA, K, CL, CO, BUN, CA, CREATININE, GLUCOSE, GFR), CENTRAL VALLEY RAST14 ALLERGY PANEL, ELECTROLYTE PNL (NA, K, CL, CO2), COMPREHENSIVE METABOLIC PNL (NA, K, CL, GLUCOSE, BUN, CREATININE, CO2 and ALT CALCIUM, ALBUMIN, TBIL, ALP, AST, TP, GFR), RENAL PNL (NA, K, CL, CO, ALB, BUN, CREAT, GLUCOSE, CA, PHOS, GFR), HEPATITIS ACUTE PNL (A ANTIBODY IgM, B SURFACE ANTIGEN, B CORE ANTIBODY IgM, C ANTIBODY), LIPID PANEL (CHOL, TRIG, HDL, Calc: Risk Ratio), LIVER PANEL (ALP, ALT, AST, DBIL, TBIL, T.PROT, ALBUMIN), PRENATAL PANEL (CBC, Syphilis Screen, Rubella, HBsAg, Type & Screen), Thyroid PNL (T4, T3 Uptake, FTI, TSH), BLOOD GAS ART W/O2 SAT, ECG TRACING ONLY, ELECTROCARDIOGRAM, interpretation and report only.

OTHER TESTS:

Adventist Health LABORATORY AND PULMONARY REQUEST FORM

PATIENT LABEL



DRAW SITES

Hanford Medical Pavilion

125 Mall Dr., Hanford (Use 7th Street entrance)
Lab Phone: (559) 537-1377 Fax: (559) 537-1378
Mon. - Thurs. 6:00 a.m. - 6:00 p.m.
Fri. 6:00 a.m. - 5:00 p.m.

Selma

1141 Rose Ave., Selma (Use Evergreen Street Entrance)
Lab Phone: (559) 856-6770 Fax: (559) 856-6772
Mon. - Thurs. 6:30 a.m. - 6:00 p.m.
Fri. 6:30 a.m. - 5:00 p.m.
Sat. 7:00 a.m. - 12:00 p.m.

Dinuba Medical Plaza

444 W. El Monte Way, Dinuba
Lab Phone: (559) 591-1906 Fax: (559) 591-1922
Mon. - Fri. 8:00 a.m. - 4:30 p.m.

Reedley

372 W. Cypress Ave., Reedley
Lab Phone: (559) 391-3770 Fax: (559) 391-3772
Mon. - Fri. 7:00 a.m. - 6:00 p.m.
Sat. 7:00 a.m. - 12:00 p.m.

Kingsburg

Located In: Tri County Medical Clinic
2400 Sierra St., Kingsburg
Lab Phone: (559) 856-6770 ext 24172 Fax: (559) 897-6619
Mon. - Fri. 8:00 a.m. - 4:30 p.m.

Tulare

869 Cherry St., Tulare
Lab Phone: (559) 685-3855 Fax: (559) 685-3860
Mon. - Fri. 6:30 a.m. - 5:30 p.m.
Sat. 8:00 a.m. - 12:00 p.m.

Hanford Lacey Medical Plaza

1524 W. Lacey Blvd., Hanford
Lab Phone: (559) 537-1388 Fax: (559) 537-1389
Mon. - Fri. 7:00 a.m. - 4:00 p.m.
Sat. 8:00 a.m. - 12:00 p.m.

Fowler

300 S. Leon S. Peters Blvd.
Lab Phone: (559) 834-1614 Fax: (559) 834-5536
Mon. - Fri. 8:00 a.m. - 5:00 p.m.

The locations listed above and hours of operations have been temporarily affected by the COVID-19 pandemic.
Please refer to www.adventisthealth.org/CVNLab for the most up to date information.