

PATIENT INFORMATION

Patient Name (Last, First): _____ Date of Birth: ____/____/____

Address: _____ Phone: (____) _____ Gender: Male Female

Medical Record Number: _____ Collection Date: ____/____/____ Collection Time: _____ Priority: Stat Routine

Dx Description or ICD - Code (REQUIRED): _____ Bill To: Pt Self Pay Insurance Client (Client code: _____)

BILLING INFORMATION	ORDERING PROVIDER
Insurance: _____	Ordering Provider Name & Credentials (Printed): _____
Subscriber ID: _____ Group No.: _____	Phone: (____) _____ Fax: (____) _____
Address: _____	_____
City/State/ZIP: _____	_____
Phone: (____) _____ Subscriber DOB: _____	_____
Subscriber Name/Rel.: _____	_____

Ordering Provider Name & Credentials (Printed): _____
Phone: (____) _____ Fax: (____) _____

CLINICIAN SIGNATURE (REQUIRED) _____ Date _____ Time _____
MEDICAL NECESSITY REGULATIONS: At the government's request, the Clinical Laboratories would like to remind all physicians that when ordering tests expected to be paid under federal health care programs, such as Medicare and Medicaid, the tests must meet the following conditions: (1) included as covered services, (2) reasonable, (3) medically necessary for the treatment and diagnosis of the patient and (4) not for screening purposes.

GENERAL

- 17- OH Progesterone
- Alkaline Phosphatase (ALP)
- Amino Acids, Serum
- Amylase
- ANA Screen
- Anti-DNAse B
- APTT
- ASO
- Bilirubin, Direct
- Bilirubin, Total
- Basic Metabolic Panel (BMP)
(BUN, Calcium, Creatinine, Electrolytes, Glucose)
- Blood Urea Nitrogen (BUN)
- Calcium
- CBC
- CBC w/diff
- Cholesterol
- Creatine Kinase (CK)
- Comp Metabolic Panel (CMP)
(BMP + Albumin, ALP, ALT, AST, Total Bilirubin, Total Protein)
- CMV IgG
- CMV IgM
- COVID-19 Molecular
- Creatinine
- C-Reactive Protein (CRP)
- D-Dimer
- EBV IgG
- EBV IgM
- EBV Profile (EBV, IgG, EBV IgM, EBNA)
- Electrolytes
(Carbon Dioxide, Chloride, Potassium, Sodium)
- Fecal Calprotectin
- Ferritin
- Fibrinogen
- Folate
- FSH
- GGT
- Glucose
- H & H
- Hepatic Profile
(Albumin, ALT, AST, Total Protein, Total Bili, Direct Bili, ALP)
- Hepatitis A Antibody, Total
- Hepatitis A IgM
- Hepatitis B Core Antibody
- Hepatitis B Surface Antibody
- Hepatitis B Surface Antigen
- Hepatitis C Antibody
- Hgb A1C
- Hgb Electrophoresis
- HIV 1 RNA PCR
- HIV Ag/Ab
- IgA
- IgE
- IgG
- IgG Subclasses
- IgM
- Immature Platelet Fraction (IPF)
- Immunoglobulin Profile (IgA, IgG, IgM)
- Insulin
- Iron
- LDH
- Lead Blood
 - Capillary
 - Venous
- LH
- Lipase
- Lipid Profile
(Cholesterol, HDL, LDL, Triglycerides)
- Magnesium
- Mono Spot
- Mono Spot with Reflex to EBV Profile
- Newborn Screen
- Phosphorus
- Potassium
- Prealbumin
- Pregnancy, Serum
- Prolactin
- PT/INR

- Quantiferon TB
- Renal Profile
(Albumin, BUN, Calcium, Creatinine, Electrolytes, Glucose, Phosphorus)
- Reticulocyte Count
- Rheumatoid Factor
- Sed Rate (ESR)
- Sex Hormone Binding Globulin
- Sodium
- Syphilis Screen
- T3, Total
- T4, Total
- T4 Free, Rapid
- Testosterone, Total
- Testosterone, Free & Total w/ SHBG
- TIBC
- TPN Profile
(Renal Profile + Magnesium, Total Protein, Globulin, ALT, ALP, AST, GGT, Triglycerides, Total Bili, Direct Bili)
- Triglycerides
- TSH
- TSH with reflex to T4 Free, Rapid
- TTG IgA
- Uric Acid
- Valproic Acid
- Vitamin B12
- Vitamin D 25 OH

THERAPEUTIC DRUG MONITORING

- Dose Amount: _____
Dose Date/Time: _____
- Amikacin
 - Cyclosporin
 - Gentamicin
 - Phenobarbital
 - Sirolimus
 - Tacrolimus
 - Tobramycin
 - Vancomycin

MICROBIOLOGY

- Blood Culture
 - C Diff Toxin
 - Flu A/B Molecular (Rapid)
 - Fungal Culture
 - GC DNA/Chlamydia DNA
 - Giardia/Crypto DFA (Stool)
 - Occult Blood, Stool
 - Ova and Parasite
 - Rapid Strep A Molecular
 - Rotavirus
 - Routine Bacterial Stool
Pathogens-Molecular
 - Routine Viral Stool Pathogens-Molecular
 - RSV Molecular (Rapid)
 - Wound Culture
- Source: _____

PCR

- Adenovirus Qual PCR
- Adenovirus Quant PCR
- B Pertussis/Parapertussis PCR
- BK Virus Qual PCR
- BK Virus Quant PCR
- COVID/Flu combo
- Cytomegalovirus Qual PCR
- Cytomegalovirus Quant PCR
- Epstein-Barr Virus Qual PCR
- Epstein-Barr Virus Quant PCR
- Herpes Simplex Vir 1&2 Qual PCR
- Herpes Simplex Vir 1&2 Quant PCR

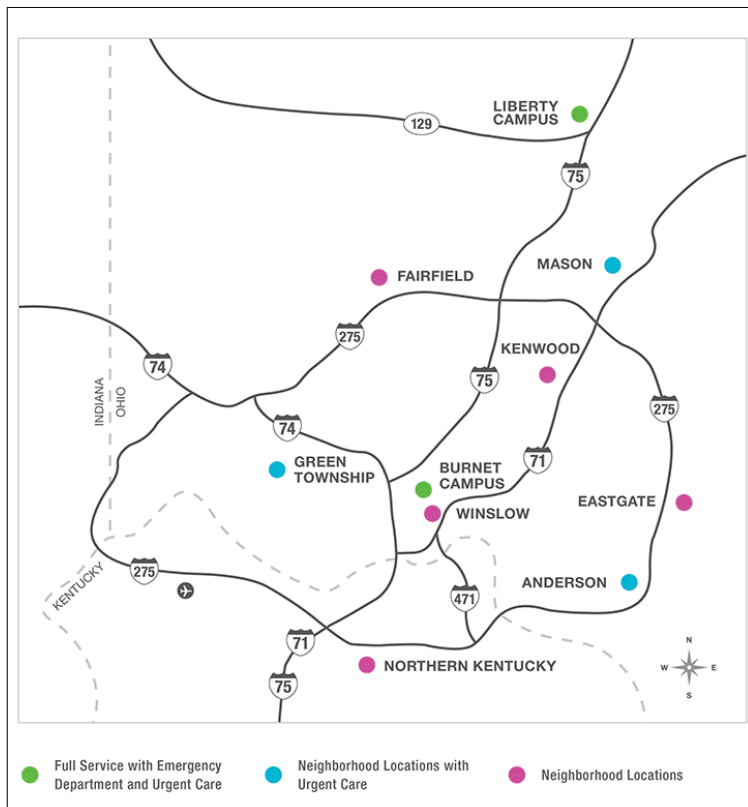
URINE

- Amino Acids, Urine
- Calcium, Urine Random
- Creatinine, Random Urine
- Drugs of Abuse, Urine Mass Spec
- Electrolytes, Urine
(Chloride, Potassium, Sodium)
- Organic Acids, Urine
- Pregnancy, Urine
- Urinalysis
- Urinalysis with Reflex to culture
- Urine Culture
 - Catheterization
 - Clean Catch

OTHER TESTS/SPECIAL INSTRUCTIONS:

To contact Cincinnati Children's main operator, please call:
513-636-4200 or 1-800-344-2462

Location	Sunday	Monday - Friday	Saturday
Main Campus – Outpatient Laboratory	10 a.m. – 2 p.m.	7 a.m. – 8 p.m.	8 a.m. – 3 p.m.
Anderson	12 p.m. – 7 p.m.	8 a.m. – 11 p.m.	8 a.m. – 7 p.m.
Northern Kentucky	closed	8 a.m. – 6 p.m.	8 a.m. – 12 p.m.
Fairfield	closed	9 a.m. – 5 p.m.	closed
Mason Campus	12 p.m. – 7 p.m.	8 a.m. – 11 p.m.	8 a.m. – 7 p.m.
Liberty Campus	10 a.m. – 2 p.m.	7 a.m. – 8 p.m.	8 a.m. – 3 p.m.
Eastgate	closed	8:30 a.m. – 5 p.m.	closed
Green Township	12 p.m. – 7 p.m.	8 a.m. – 11 p.m.	8 a.m. – 7 p.m.
Kenwood	closed	8:30 a.m. – 5 p.m.	closed



Location	Phone
Main Campus 3333 Burnet Avenue 45229	513-636-4461
Anderson (at Mercy Center for Health & Wellness) 7495 State Road, #355 45255	513-636-6100
Eastgate 796 Cincinnati-Batavia Pike 45245	513-636-6027
Fairfield (at Mercy Center for Health & Wellness) 3050 Mack Road 45014	513-636-6400
Green Township 5899 Harrison Avenue 45248	513-803-8211
Kenwood 7690 Montgomery Road 45236	513-803-4290
Liberty Campus 7777 Yankee Road 45044	513-803-9600
Mason Campus 9560 Children's Drive 45040	513-636-6800
Northern Kentucky 2765 Chapel Place Crestview Hills, KY 41017	859-344-5390