New Discovery LABORATORIES

(410) 598-0783
info@newdiscoverylabs.com
www.newdiscoverylabs.com

PCR Test Requisition Form

FAX: 443-901-3982

New Discovery Laboratories | 701 East Pratt Street, Baltimore, MD 21202 | CLIA ID: 21D2196263

PATIENT INFORMATION

Patient Name (Last name, First name)

DOB (mm/dd/yyyy):

☐ Male ☐ Female ☐ Non-binary ☐ Unknown

Parent/Guardian (if applicable)

Relationship

Race: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White ☐ Other/Unknown

Ethnicity: ☐ Hispanic/Latino ☐ Non-hispanic/Latino

Address:

City: State: Zip: Phone:

Email:

Medical Record Number (MRN) (Optional)

Bill to: ☐ Self-Pay ☐ Facility ☐ Insurance

Insurance:

Subscriber ID:

Group #

"Specimens cannot be processed without billing information" *Provide front and back copies of insurance cards*

PROVIDER INFORMATION

Client Name / Account

Address:

Suite#

City: State: Zip:

Phone:

Fax #

Provider's NPI#

Ordering Provider:

Collection Date:

Collector's Name:

Collection Time:

TEST NAMES

☐ UTI w/ ABX resistance genes ☐ UTI PLUS w/ ABX resistance genes ☐ Wound/Derm w/ ABX resistance genes

☐ STI ☐ Vaginitis

MEDICAL NECESSITY

At the government's request, New Discovery 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.

Provider Signature:

PATIENT ACKNOWLEDGMENT

The information I have provided on this form is accurate. I authorize New Discovery Labs to release the results of this test to my treating physician or facility. I hereby authorize my insurance or other payment to New Discovery Labs for services I receive. I am aware that New Discovery Labs may be an out-of-network provider with my insurer. I am aware that I am responsible for all co-pays and deductibles not covered by insurance or other payers.

Patient Signature: *Date:*

Complete Page 2

Patient Name: DOB: Collection Date:

PANEL LIST

☐ UTI w/ ABX Resistance

- Acinetobacter baumannii
- Bacteroides fragilis
- Citrobacter freundii
- Citrobacter koseri
- Enterobacter cloacae
- Enterococcus spp.
- Escherichia coli
- Klebsiella aerogenes
- Klebsiella oxytoca
- Klebsiella pneumoniae
- Morganella morganii
- Proteus mirabilis
- Pseudomonas aeruginosa
- Serratia marcescens
- Staphylococcus aureus
- Staphylococcus epidermidis
- Staphylococcus saprophyticus
- Streptococcus pyogenes (Grp A)

Antibiotic-Resistance Genes

- β-lactamase (blaKPC)
- β-lactamase (CTX-M-Group 1)
- Metallo-β-lactamase (blaNDM)
- Fluoroquinolones (qnr)
- Methicillin/Oxacillin (mecA)
- Sulfonamides (sul)
- Trimethoprim (dfrA)
- Vancomycin (vanA, vanB)

ICD-10 CODES

- ☐ R35.0 Frequency of Micturition
- ☐ Z22.39 Carrier of other specified bacterial disease
- ☐ R30.0 Dysuria
- ☐ N30.00 Acute cystitis w/o hematuria
- ☐ N30.20 Other chronic cystitis w/o hematuria
- ☐ N41.0 Acute prostatis
- ☐ _____

SPECIMEN SOURCE

- ☐ Urine

☐ UTI PLUS w/ ABX Resistance

- Acinetobacter baumannii
- Bacteroides fragilis
- Citrobacter freundii
- Citrobacter koseri
- Enterobacter cloacae
- Enterococcus spp.
- Escherichia coli
- Klebsiella aerogenes
- Klebsiella oxytoca
- Klebsiella pneumoniae
- Morganella morganii
- Proteus mirabilis
- Pseudomonas aeruginosa
- Serratia marcescens
- Staphylococcus aureus
- Staphylococcus epidermidis
- Staphylococcus saprophyticus
- Streptococcus pyogenes (Grp A)
- Candida albicans
- Candida dubliniensis
- Candida glabrata
- Candida krusei
- Candida parapsilosis
- Candida tropicalis
- Mycoplasma genitalium
- Mycoplasma hominis
- Prevotella bivia
- Streptococcus agalactiae (Grp B)
- Ureaplasma urealyticum

Antibiotic-Resistance Genes

- β-lactamase (blaKPC)
- β-lactamase (CTX-M-Group 1)
- Metallo-β-lactamase (blaNDM)
- Fluoroquinolones (qnr)
- Methicillin/Oxacillin (mecA)
- Sulfonamides (sul)
- Trimethoprim (dfrA)
- Vancomycin (vanA, vanB))

ICD-10 CODES

- ☐ R35.0 Frequency of Micturition
- ☐ Z22.39 Carrier of other specified bacterial disease
- ☐ R30.0 Dysuria
- ☐ N30.00 Acute cystitis w/o hematuria
- ☐ N30.20 Other chronic cystitis w/o hematuria
- ☐ N41.0 Acute prostatis
- ☐ _____

SPECIMEN SOURCE

- ☐ Urine

☐ Wound/Derm w/ ABX Resistance

- Acinetobacter baumannii
- Bacteroides fragilis
- Citrobacter freundii
- Citrobacter koseri
- Enterobacter cloacae
- Enterococcus spp.
- Escherichia coli
- Klebsiella aerogenes
- Klebsiella oxytoca
- Klebsiella pneumoniae
- Morganella morganii
- Proteus mirabilis
- Pseudomonas aeruginosa
- Serratia marcescens
- Staphylococcus aureus
- Staphylococcus epidermidis
- Staphylococcus saprophyticus
- Streptococcus pyogenes (Grp A)

Antibiotic-Resistance Genes

- β-lactamase (blaKPC)
- β-lactamase (CTX-M-Group 1)
- Metallo-β-lactamase (blaNDM)
- Fluoroquinolones (qnr)
- Methicillin/Oxacillin (mecA)
- Sulfonamides (sul)
- Trimethoprim (dfrA)
- Vancomycin (vanA, vanB)

ICD-10 CODES

- ☐ L08.9 Local infection of the skin and subcutaneous tissue, unspecified
- ☐ Z22.39 Carrier of other specified bacterial diseases
- ☐ _____
- ☐ _____

SPECIMEN SOURCE

- ☐ Swab
- ☐ Aspiration

☐ Vaginitis

- Atopobium vaginae
- Bacteroides fragilis
- BVAB-2
- Candida albicans
- Candida dubliniensis
- Candida glabrata
- Candida krusei
- Candida lusitaniae
- Candida parapsilosis
- Candida tropicalis
- Chlamydia trachomatis
- Enterococcus spp.
- Escherichia coli
- Gardnerella vaginalis
- Haemophilus ducreyi
- HSV-1
- HSV-2
- Lactobacillus crispatus
- Lactobacillus gasseri
- Lactobacillus iners
- Lactobacillus jensenii
- Megasphaera Type 1
- Megasphaera Type 2
- Mobiluncus curtisii
- Mobiluncus mulieris
- Mycoplasma genitalium
- Mycoplasma hominis
- Neisseria gonorrhoeae
- Prevotella bivia
- Staphylococcus aureus
- Streptococcus agalactiae (Group B)
- Treponema pallidum
- Trichomonas vaginalis
- Ureaplasma urealyticum

ICD-10 CODES

- ☐ N76.0 Acute vaginitis
- ☐ N77.1 Vaginitis, vulvitis, & vulvovaginitis
- ☐ B37.3 Candidiasis of vulva & vagina
- ☐ Z30.9 Encounter for contraceptive management
- ☐ _____
- ☐ _____

SPECIMEN SOURCE

- ☐ Vaginal Swab

☐ STI

- Atopobium vaginae
- Chlamydia trachomatis
- Gardnerella vaginalis
- Haemophilus ducreyi
- HSV-1
- HSV-2
- Neisseria gonorrhoeae
- Treponema pallidum
- Trichomonas vaginalis

ICD-10 CODES

- ☐ N76.0 Acute vaginitis
- ☐ N89.8 Other specified noninflammatory disorders of vagina
- ☐ R36.9 Urethral discharge unspecified
- ☐ Z30.9 Encounter for contraceptive management
- ☐ _____

SPECIMEN SOURCE

- ☐ Urine
- ☐ Swab

ANTIBIOTICS INFORMATION

HAS YOUR PATIENT TAKEN ANTIBIOTICS IN THE PAST 72 HOURS? ☐ Yes ☐ No