



Ordering RN or MD (if other than below)			MEDICAL RECORD #
Responsible Staff Physician One must be checked	16-AEO <input type="checkbox"/> Bixel, K.	12-455 <input type="checkbox"/> Liu, Mingping	NAME
	12-AVG <input type="checkbox"/> Chan, C.W.	12-975 <input type="checkbox"/> McShine, R.	SEX
	16-342 <input type="checkbox"/> Chan, I.	12-BIV <input type="checkbox"/> Ruan, Y.	DATE OF BIRTH
	12-BWJ <input type="checkbox"/> Chen, X.	13-261 <input type="checkbox"/> Wong, E.	
	16-ACA <input type="checkbox"/> Chie, H-M.	86-BMJ <input type="checkbox"/> Yang, D.	SOUTH COVE MRN
	16-AAN <input type="checkbox"/> Chie, L.	88-104 <input type="checkbox"/> Yeung, A.	Date ordered
	16-ABM <input type="checkbox"/> Chollet, J.	82-AIT <input type="checkbox"/> Yin, P.	Date & time collected
	12-866 <input type="checkbox"/> Guan, R.	50-616 <input type="checkbox"/> Zhang, X. Shery	<input type="checkbox"/> OAM <input type="checkbox"/> OPM
	85-GEA <input type="checkbox"/> Hao, M.		Phlebotomist
	12-APZ <input type="checkbox"/> Hu, Q.		Grant #
	82-SCM <input type="checkbox"/> Kam, R.		List all relevant ICD9 codes for tests being ordered
	12-303 <input type="checkbox"/> Lee, G.		Responsible Attending Physician's Signature
	12-BBQ <input type="checkbox"/> Lee, L-Y Jenny		

✓ Test Name	Tube	✓ Test Name	Tube	✓ Test Name	Tube
HEMATOLOGY		CHEMISTRY		MICROBIOLOGY (OTHER)	
CBC (includes platelets) (CBC) L		Sodium (NA) S		Blood culture, routine (BLC) BC	
CBC & differential (includes platelets) (CAD) L		Potassium (K) S		Blood culture, AFB/fungal (BIS) MFL	
Hematocrit (HCT) L		Chloride (CL) S		C. difficile toxin (stool) (STO+CDT) NS	
Platelet count (PLT) L		CO ₂ (CO2) S		HIV viral load, ultrasensitive (HIQ) L-10ml	
Prothrombin time/INR (PT) ICD9 CODE B		BUN (BUN) S		Ova and parasites (STO+OAP) !	
Partial thromboplastin time(PTT) B		Creatinine (CREA) S		<input type="checkbox"/> Cryptosporidium/Giardia DFA (CGD)	
Reticulocyte count (RET) L		Glucose (GLU) ICD9 CODE S/GY		<input type="checkbox"/> Microsporidium (STO+MIC)	
Sedimentation rate (ESR) L		Albumin (ALB) S		<input type="checkbox"/> Cyclospora (STO+CYC)	
Sickle cell prep (SIC) L		Alkaline phosphatase (ALK) S		Sputum culture (SPR) SC	
DRUG MONITORING		ALT (SGPT) (ALT) S		Stool culture (STO+FEC+CCU) !	
Time of last dose:		Amylase (AMY) S		Throat beta strep screen (TS) ST	
Carbamazepine (Tegretol) (CARB) S		AST (SGOT) (AST) S		Throat culture for GC (TGC) ST	
Digoxin (DIG) ICD9 CODE S		B12 (B12) S		Wound culture (aerobic) (SWW) ST	
Lithium (LI) S		Bilirubin, total (TBIL) S		Specimen: Site:	
Phenobarbital (BARB) S		Bilirubin, direct (DBIL) S		Virology culture	
Phenytoin (Dilantin) (DIL) S		Calcium (CA) S		Virus: Specimen/site: ★	
Salicylate (ASA) S		Cholesterol (CHOL) ICD9 CODE S		Prenatal type & screen (panel) (PTS) L-10ml	
SEROLOGY		CK (CPK) (CK) S		Type and screen (TS) L-10ml	
ANA (ANA) S		Ferritin (FERR) ICD9 CODE S		Coombs test: direct (DAT) L-10ml	
CMV IgG/IgM antibody panel (CMVP) S		Folate (FOL) S		Antibody screen / ID (ABS) L-10ml	
Hepatitis A antibody (total) (HAV) S		Haptoglobin (HAP) S		OTHER TESTS / COMMENTS	
Hepatitis B core antibody (total) (CAB) S		Hemoglobin A1C (GLY) ICD9 CODE L		Alpha-feto protein (AFP) ICD9 CODE S	
Hepatitis B surface antibody (SAB) S		HCG (blood) (HCG) S		Anti-smooth muscle antibody (ASMA) S	
Hepatitis B surface antigen (SAG) S		HDL (HDL) ICD9 CODE S		G6PD, quantitative (G6PD) L	
Hepatitis C antibody (HEPC) S		Iron (FE) ICD9 CODE S		HBV DNA (HBVP) S	
H. pylori IgG antibody (HELI) S		LD (LDH) (LD) S		Hemoglobin electrophoresis (HGBE) L	
Lyme IgG/IgM antibody (LYME) S		Lipid panel (HDL, cholesterol, (LPD) ICD9 CODE S		Hepatitis Be antigen (HBEAG) S	
Monospot (MONO) S		triglycerides, calculated LDL) ICD9 CODE S		Hepatitis Be antibody (HBEAB) S	
RPR (STS) (RPR) S		Phosphate (P) S		Lead (LEAD) L	
Rubella IgG antibody (RSE) S		PSA (PSA) ICD9 CODE S		T3, total (T3) S	
Rubeola IgG antibody (MEAS) S		Protein electrophoresis (PEP) S		T3 uptake (T3U) S	
URINE - RANDOM		TIBC (transferrin) (TIBC) ICD9 CODE S		T4, total (T4) S	
Urinalysis, complete (dipstick; if abnormal, microscopic exam) (UAR) NS/R		Total protein (TP) S		Free T4 index (T7) S	
Urinalysis with microscopic exam (UAC) NS/R		TSH (TSH) ICD9 CODE S		Varicella-Zoster antibody IgG (VSE) S	
Urine dipstick only (no microscopic) (UAD) NS/R		Free T4 (measured) (FT4) ICD9 CODE S			
Urine hCG (UCG) NS/R		Triglycerides (TRIG) ICD9 CODE S			
Urine culture (URI) ICD9 CODE G		Uric acid (URIC) S			
<input type="checkbox"/> clean catch <input type="checkbox"/> catheter		MICROBIOLOGY (GENITAL)			
URINE - TIMED		GC & Chlamydia PCR (panel) (cervical, urethral) (GCP) M4			
Creatinine (CREA) NS/R		(urine - MALE ONLY) (GCPU) R			
Microalbumin (albumin/creat ratio) (ALB+CREA) NS/R		GC PCR (cervical, urethral) (SWG+GPR) M4			
Protein/creatinine ratio (TP+CREA) NS/R		(urine - MALE ONLY) (GPRU) R			
# of hours Volume:		Chlamydia PCR (cervical, urethral) (SWG+CPR) M4			
Total protein (TP) 24		(urine) (CPRU) R			
Creatinine (CREA) 24		Group B Streptococcus (anorectal/vaginal) (AVG) ST			
Creatinine clearance (CRCL) ■		Bacterial vaginosis (vaginal only) (SWG+GBV) ST			
MA (VMA) HCl		Yeast vaginitis (vaginal only) (SWG+GYV) ST			
Metanephrine (MET) HCl					
Catecholamines (CATE) HCl					
5-HIAA (5HIAA) HCl					

SEE BACK OF REQUISITION AND LAB MANUAL FOR INSTRUCTIONS AND ADDITIONAL INFORMATION

FOR LAB USE ONLY - DO NOT WRITE IN THIS SPACE

Beth Israel Deaconess Medical Center - Boston, MA 02215 - Requisition Instructions and Other Notes (side 2)

LABEL SPECIMEN fully, including name, medical record #, collection time and collector's signature. **FILL IN TOP PORTION OF REQUISITION (UNSHADED AREAS) COMPLETELY. CHECK TEST(S)** desired. Deliver specimen and requisition to Laboratory, FN-305.

Check lab manual for test name and specimen requirements.

Specimen Container Key	B: Blue top (citrate)	MFL: Myco-F-Lytic bottle	★: On ice
	BC: Blood culture set	M4: Chlamydia/GC PCR Transport	■: Requires serum creatine (serum separator tube)
	G: Gray top (urine transport tube)	NS: Non-sterile container	‡: Call lab for preservative, instructions and/or transport media
	GY: Gray top (oxalate / fluoride)	P: Pink top (6 ml)	24: 24-hour urine collection container
	H: Green top (heparin)	R: Red top without serum separator	/: Either tube acceptable
	HCl: Call lab for HCl in urine collection bottle	S: Serum separator tube	
	L: Lavender top (EDTA) 5 ml	SC: Sterile container	
	ST: Swab transport tube		

INFORMATION ABOUT PANELS:

The laboratories offer collections, or panels, of tests to facilitate specific evaluations. Such panels of tests are marked on laboratory requisitions by the panel name, followed by the descriptor "panel". All panels have been approved by the Medical Executive Committee of the medical center. The names of individual tests within the panel are available in the lab manual. Note that any individual test in a panel can also be ordered by itself.

ICD-9-CM CODES AND LABORATORY TEST ORDERS:

- ICD-9 codes **MUST BE** recorded on the front of the requisition for laboratory work to be performed, regardless of insurer. In addition, if the following tests are ordered, ICD-9 codes must be supplied to document the specific medical necessity of each test: glucose, lipid panel (and any of its components), any thyroid test, PSA, prothrombin time, partial thromboplastin time, reticulocyte count, iron studies, glycosylated proteins, urine cultures, digoxin, immunoassay for tumor antigen.
- When ordering tests for which Medicare reimbursement will be sought, order only tests that are medically necessary for the diagnosis or treatment of a patient, rather than for screening purposes.
- Select ICD-9 codes in accordance with HCFA and Medicare instructions and regulations (suggested reference: ICD-9-CM 9th revision, 2006, published by the AMA.) See also CareGroup portal (Beth Israel Deaconess location); Clinical Resources; Diagnosis and Procedure Codes.
- If the ICD-9 code you chose does not support the medical necessity, your patient must sign an Advanced Beneficiary Notice. The Advanced Beneficiary Notice for use with lab tests ordered at BIDMC is available on the CareGroup portal (Beth Israel Deaconess location); Clinical Manuals and Forms; Lab Manual; Medicare Advanced Beneficiary Notice. Send completed form to Patient Financial Services, ATTN: Medicare Supervisor; FAX (617) 754-9060 at the same time the test is ordered.

The following abbreviated list of commonly used ICD-9 codes which support medical necessity according to Medicare has been abstracted from the "Complete List of ICD-9 Codes Supporting Medical Necessity".

<p>Digoxin</p> <p>413.9 Angina pectoris 783.0 Anorexia 427.9 Cardiac dysrhythmia 425.4 Cardiomyopathy 428.0 Congestive heart failure 787.01 Nausea and vomiting 972.1 Poisoning by cardiotonic glycosides and drugs of similar action 368.9 Unspecified visual disturbance</p> <p>Glucose testing</p> <p>790.21 Elevated fasting glucose 790.22 Elevated glucose tolerance test 790.29 Abnormal glucose NOS 783.21 Abnormal loss of weight 783.1 Abnormal weight gain 577.0 Acute pancreatitis 305.00 Alcohol abuse 429.2 Cardiovascular disease, unspecified 577.1 Chronic pancreatitis 250.01 Diabetes mellitus, insulin-dependent 250.00 Diabetes mellitus, type II 275.0 Disorders of iron metabolism 276.9 Electrolyte and fluid disorders... 791.5 Glycosuria 790.6 Hyperglycemia 251.2 Hypoglycemia V58.69 Long time (current) use of other medications 780.79 Malaise and fatigue 157.9 Malignancy of pancreas... 278.00 Obesity 783.5 Polydipsia 788.42 Polyuria 251.3 Post-surgical hypoinsulinemia 573.9 Unspecified disorder of liver</p> <p>Iron studies (iron, total iron binding capacity [TIBC], transferrin, ferritin)</p> <p>285.9 Anemia 250.00 Diabetes mellitus type II 250.01 Diabetes mellitus, insulin-dependent 275.0 Disorders of iron metabolism 277.1 Disorders of porphyrin metabolism 283.2 Hemoglobinuria due to hemolysis from external causes 280.0 Iron deficiency anemia secondary to blood loss (chronic) 280.1 Iron deficiency anemia secondary to inadequate dietary intake 280.9 Iron deficiency anemia, unspecified 564.2 Postgastric surgery syndromes 282.49 Other thalassemia</p>	<p>Lipid panel, cholesterol, HDL</p> <p>447.6 Arteritis 585.6 End stage renal disease 585.9 Chronic kidney disease, unspecified 414.00 Coronary artery disease (CAD) 250.00 Diabetes mellitus type II 250.01 Diabetes mellitus, insulin-dependent 401.9 Hypertension 272.0 Increased cholesterol 577.1 Pancreatitis</p> <p>Partial thromboplastin time</p> <p>444.9 Arterial thrombosis (unspecified site) V58.61 Long term (current) use of anticoagulants 453.9 Other venous embolism and thrombosis, of unspecified site 782.7 Spontaneous ecchymoses 451.9 Thrombophlebitis NOS 286.4 Von Willebrand's disease</p> <p>Prostate specific antigen</p> <p>600.20 Benign localized hyperplasia of prostate NOS 600.90 Hyperplasia of the prostate NOS 790.93 Elevated PSA levels, above 4.1 ng/mL 222.2 Prostatic nodule, asymmetric hyperplasia...</p> <p>Prothrombin time</p> <p>790.92 Abnormal coagulation profile 285.1 Acute posthemorrhagic anemia 285.9 Anemia, unspecified 444.9 Arterial thrombosis (unspecified site) 453.8 Axillary venous thrombosis 427.9 Cardiac dysrhythmia 436 Cerebrovascular accident (CVA) 571.9 Chronic liver disease 428.0 Congestive heart failure 269.0 Deficiency of vitamin K 396.9 Diseases of mitral and aortic valves 784.7 Epistaxis V42.2 Heart valve replaced by transplant 599.7 Hematuria 786.3 Hemoptysis V58.61 Long term (current) use of anticoagulants 424.0 Mitral valve disorders 429.79 Mural thrombus following myocardial infarction V12.3 Personal history of disease of blood... V15.1 Personal history of surgery to heart... 964.2 Poisoning by anticoagulants due to wrong dosage given or taken in error 459.10 Postphlebotic syndrome NOS 395.0 Rheumatic aortic stenosis 453.9 Venous thrombosis, other</p>	<p>Reticulocyte counts</p> <p>285.9 Anemia 277.4 Disorders of bilirubin excretion 782.4 Jaundice, unspecified, not of newborn V58.69 Long-term (current) use of other medications</p> <p>Thyroid testing</p> <p>783.21 Abnormal loss of weight 783.1 Abnormal weight gain 255.2 Adrenogenital disorders 704.00 Alopecia, unspecified 626.0 Amenorrhea 783.0 Anorexia 427.31 Atrial fibrillation 226 Benign neoplasm of thyroid nodule 427.9 Cardiac dysrhythmia 243 Congenital hypothyroidism 428.0 Congestive heart failure 255.41 Glucocorticoid insufficiency 255.42 Mineralocorticoid insufficiency 250.00 Diabetes mellitus type II 250.01 Diabetes mellitus, insulin-dependent 780.8 Excessive sweating 376.22 Exophthalmic ophthalmoplegia 271.3 Glucose intolerance 242.00 Graves disease 252.1 Hypoparathyroidism 244.9 Hypothyroidism 374.41 Lid retraction or lag 780.79 Malaise and fatigue 193 Malignant neoplasm of thyroid gland 626.2 Menorrhagia 799.2 Nervousness 278.00 Obesity, unspecified 310.1 Organic personality syndrome 427.89 Other specified cardiac dysrhythmias 427.0 Paroxysmal supraventricular tachycardia 427.2 Paroxysmal tachycardia, unspecified 785.0 Tachycardia 794.5 Thyroid, abnormal scan or uptake 242.90 Thyrotoxicosis 709.01 Vitiligo</p> <p>Urine culture, bacterial</p> <p>790.7 Bacteremia 788.1 Dysuria 424.90 Endocarditis, valve unspecified, unspecified 791.7 Other cells and casts in urine 791.0 Proteinuria 780.6 Pyrexia of unknown origin</p>
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