

Laboratory Services 800 North Fant St., Anderson, South Carolina 29621 864.512.1816 / 1.800.868.5877

								Bill Patient/Insurance □	Bill Medica	re/Medicaid Bill Clie	ent Accoun
Patient	Name (Last)		(First)			(MI)		This section must be c	ompleted for	or Patient or Third Part	y Billing
							Insu	ired's Name		,	
Address			City	State	Zip Code		Stro	et Address or PO Box			
Address	5		City	State	Zip Code		Sue	et Address of PO Box			
Sex	Age	Date o	of Birth	Patient Phone	No		City			State Zip	Code
OCX	, ige	Date c	n Bilai	T dilett i floric	140.		Oity			Zip ·	Jouc
Office C	L Chart No.	Social	Security				Poli	cy Number			
000		000.0.					"	9, 114.11.201			
Orderin	g Physician				Order Dat	te	\vdash				
	5 ,										
Diagnosis (es):						Insu	red's Employer Name				
	,							1 7			
							I he	reby authorize the release of	f medical infor	mation related to the service	es described
						hereon, and I understand that I am responsible for payment in full for any balance not					
Madian	ro will only nov for	* ****	that most the	e medicare local an	d notional	001/08000	cove	ered by my health insurance			
				o treat or diagnose			Pati	ent Signature			
	nformation:		•			•		Specimen Information:		Specimen Type: Wh	aala Dlaad
Send Copy to:				Perform STAT				Date/Time of Collection		Plasma Serur	m
Standing Order - Frequency								By: Date/Time Last Dose:		Plasma Serui Urine, 12/24 hr. vol.	
Standing Order "End" Date Fax#								Date/Time Last Dose.		Other FROZEN SPECIMEN	.1
	nal tests to be orde			1 a/	MT					FROZEN SPECIIVIEN	1
Addition	nai tests to be orde	oreu.									
Pa	anels / Profile		ICD-10 Code	Chemistry-0	Cont.	ICD-10 Code	ī	Hematology	ICD-10 Code	Miscellaneous	ICD-10 Cod
	nprehensive Metabolic			Free T4				CBC without Differential		CD4	
Bas	sic Metabolic Pane			FT3			T	CBC with Automated Differential		Lymphoma Panel	
Ele	ctrolytes			GGTP				Manual Differential		Cytogenetics	
	patic Function Pan	el		Glucose				D-Dimer		JAK2	
1 ' '	id Panel			HCG, serum				Hemoglobin Electrophoresis		BCR/ABL	
1 1	al Hepatitis Panel			HGB A1C				Hemoglobin			
1 1	gressive Thyroid F natal Panel	ranei		Homocysteine			┢	Hematocrit Platelet Count		Infectious Disease	
	enatal Plus		 	Immuno Battery Iron			╀	PT INR		Chlamydia/GC DNA Prob EBV Screen	e
Rer			 	Iron Saturation			+	IPTT		Flu	+
	gressive ANA			Lead - Adult			+	Reticulocyte Count		Hepatitis B core Ab, IgM	_
	Chemist	trv		Lead - Pediatric	;		t	Sedimentation Rate		Hepatitis A antibody, IgM	
Albi	umin			LH				Sickle Screen		Hepatitis C antibody	
Alka	akline Phosphatas	е		Lipase				Urine Chemistry	ý	Hepatitis C RNA, Quantitat	tive
-	na Fetoprotein-Tumor l	Marker		Magnesium				Diagnostic Urinalysis		Hepatitis B surface antigen	
	T (SGPT)			Phosphorous			\perp	Urinalysis w/culture if indicated		Hepatitis B surface antibod	у
-	monia		 	Potassium			₽	HCG, urine		HIV	
-	ylase T (SGOT)		 	Prolactin Prealbumin			\vdash	Microalbumin, random Calcium, urine, random	+	Lyme Ab (reflex to Western B Monospot	(OT)
B12			 	Progesterone			\vdash	Creatinine Clearance, 24 hour		Rotavirus	+
-	rubin Total			Protein Electrop	horesis		\vdash	Creatinine, urine, random		RPR	
-	rubin Total + Direct	t		Protein, Total			T	Creatinine, urine 24 Hour		RSV	+
BNI				PSA Diagnostic			t	Protein Electrophoresis, Urine		Rubella Screen	
BUI	N			PSA Screening				Stone Analysis		Strep A (Rapid Strep)	
CA	125			PTH Intact				Total protein, urine, random		Zoster IGG	
-	cium			Rheumatoid Fac	ctor			Therapeutic Drug	gs		
-	A Serum		\vdash	Renin	-4-1	1	1	Carbamazepine		Microbiolog	У
-	oride		1	Testosterone, T			\vdash	Digoxin		Routine Culture	
-	olesterol		 	Testosterone, F Thyroid Antibod			\vdash	Dilantin		Source:	
COI	rtisol AM PM		+ +	TIBC	100		\vdash	Lithium Tacrolimus	+ +	AFB Culture Source: Fungus Culture Source:	+
-	eatinine, serum		+ +	Triglycerides			\vdash	Theophylline	+ +	Herpes Culture Source:	+
-	P-high sensitivity			TSH			\vdash	Valporic Acid		Throat Culture	
-	radiol			Uric Acid			T	Keppra		Urine Culture Void/Cath	
-	ritin			Vitamin D			I			Ova and Parasites	
Fola	ate			ANA Screen						C Difficile	