	ANMED HEALTH DIRECTORY of LABORATORY SERVICES: PROCEDURE REQUISITION	
Anderson, SC 29621	Document Number: TD.GEN.0003	
	Revision Level: B	
	Effective Date: 10/19/09	Page: 1 of 4

Patient Orders

AnMed Health Laboratory Services provides testing on human and animal specimens for the diagnosis, prevention, and/or treatment of disease for both inpatient and outpatient populations. The services are provided to authorized medical professionals as defined by the Medical Executive Committee (MEC) of AnMed Health in accordance with state regulations and are under the direction, authority, jurisdiction, and responsibility of the Medical Director of the Laboratory (an elected pathologist).

1. Laboratory orders accepted may be written, faxed, electronic, or verbal in nature.
 - A. **Written Orders** – Orders for inpatients are documented in the patient’s medical record on the nursing unit and may be transcribed to a written downtime requisition or transferred electronically to the laboratory using systems outlined below.
 - B. **Faxed Orders** – Faxed orders are considered written orders.
 - C. **Electronic Orders** – Orders may be placed electronically via electronic interfaces with the LIS (e.g. Patient Care Manager, EOS, and Atlas LabWorks).
 - D. **Verbal Orders** – Institutional policy is followed concerning inpatient verbal orders. Verbal orders for Outpatients may be accepted by laboratory staff to include clinical testing departments, phlebotomy and processing staff, client services and transcription and laboratory management staff. If a physician sends a patient in for labs on the weekend or after hours and calls the admitting office with the order, the physician will be referred to the lab staff. Clinical lab staff will take the order on a “Laboratory Verbal Order” (AIF.GEN.0071) form, documenting all required information for the order as well as verification of readback of all information given. The Laboratory Verbal Order form is then sent via the pneumatic tube system to the Admitting office. When Admitting receives the order, they will register the patient and notify the lab for collection of the specimen. If any Outpatient Registration area is open, the physician can FAX an order to that location and they can receive the patient. Add-on orders received during normal business hours will be handled by the Client Services staff. Client Services will receive the request from the client and will complete a Verbal Order Form, documenting all required information for the order as well as verification of readback of all information given. All verbal laboratory orders should be forwarded to Client Services for follow-up. Client Services will appropriately scan the verbal form and written order as needed. All written orders should be received in Client Services within seven days of origination.

2. The ordering location will be contacted to obtain a valid test order if a specimen is received without one or if the order received is ambiguous.

3. When overlapping panels or tests are ordered on a patient for the same date of service, the laboratory will order the more comprehensive test plus the individual components that are not included in the first test.

Anderson, SC 29621

Document Number: TD.GEN.0003

Revision Level: B

Effective Date: 10/19/09

Page: 2 of 4

4. The laboratory provides reflex testing on certain tests to expedite turnaround time, eliminate additional specimen requirements, reduce costs, and adhere to generally accepted medical practices. It is the policy of the laboratory to perform and bill reflex tests when the original test ordered is listed on the "Reflex and Confirmatory Testing List" (AIF.GEN.0123) and the initial test result meets the criteria for prompting additional testing. Confirmatory testing is based on current standards of practice and ordering options are not available for this testing. The laboratory bills the reflex test that it performs to all third party and client billed arrangements. The reflex testing is not covered in the initial test price and will result in additional charges if performed.
5. Pathologists may order or perform additional tests as medically necessary for reaching a complete diagnosis. These tests are billed if the test results are communicated to the treating physician and used in the treatment of the patient; and if the pathologist provides documentation in the written report explaining why the tests were done.
6. Standing orders for Outpatients are valid for the time frame indicated on the order or for no longer than one year from the date of origination. Standing orders are not accepted from nursing home and/or Home Health patients. A new order is required for each collection from these clients.

Completing the Outpatient Requisition Form


Please indicate the method of billing (upper right corner of form) when completing the requisition.

Non- Patient (Bill Medicare/Other Insurance)

This category applies to specimens submitted to the lab for testing (i.e. when the patient does not present to an AnMed Health Laboratory Services site).

Please submit the following required information:

1. Patient's Legal Full Name (**nicknames should not be used**)
2. Sex, Date of Birth or Age.
3. Social Security Number if available.
4. Test(s) Requested {Mark with an (X) beside the name of the test(s) ordered}. If the test needed is not preprinted on the form, space is available on the form to write in the test requested.
5. Diagnosis Information. It is preferred that an ICD-9 code supporting medical necessity be placed beside each test requested. However, narrative diagnosis information will be accepted. Please write this in the diagnosis area on the form. Sufficient diagnostic information to support medical necessity for each test ordered should be supplied.
6. Billing Information. The gray-shaded area of the form is to be completed for all third party billings. Note: If secondary insurance is to be filed, please attach information to the requisition form.
7. Patient signature for consent to release medical information and accept responsibility for payment.
8. Ordering physician's signature or other authorized medical provider.
9. Date of the order
10. Specimen/Order Information as needed (i.e. date and time of collection, type of specimen, priority of the specimen).
11. Advanced Beneficiary Notice (ABN) (if applicable) on last page of requisition form.

	ANMED HEALTH DIRECTORY of LABORATORY SERVICES: PROCEDURE REQUISITION	
Anderson, SC 29621	Document Number: TD.GEN.0003	
	Revision Level: B	
	Effective Date: 10/19/09	Page: 3 of 4

(Reminder: An ABN for Medicare patients need only to be obtained in the physician's office if the specimens are being collected in the office and the diagnosis (provided by the physician) does not support medical necessity or has a frequency limitation according to CMS reimbursement guidelines.

(Refer to the "Guide to Local Medical Review Policies"). For specimens collected by AnMed Health Laboratory Services, it is the responsibility of the registration personnel to obtain an ABN if necessary. Nursing Homes and Home Health Agencies are responsible for obtaining all ABN's for their patients regardless of who collects specimens. For orders placed through Atlas Lab Works, the ABN is electronic and requires patient's signature and date. See also **Medical Necessity**.

Walk-In Outpatient

For those patients presenting to any AnMed Health Laboratory Services collection site, the following items on the requisition form should be completed:


1. Patient's Legal Full Name (nicknames are not acceptable).
2. Test(s) Requested. Mark with an (X) beside the name of the test(s) ordered. If test needed is not preprinted on the form, space is available on the form to write in a procedure.
3. Diagnosis Information. It is preferred that an ICD-9 code supporting medical necessity be placed beside each test requested. However, narrative diagnosis information will be accepted. Please write this in the diagnosis area on the form.
4. Ordering physician's signature or other authorized medical provider.
5. Date of Order.
6. Order Information as needed (i.e. Priority – STAT, Routine, Call or FAX).
7. Physician or provider office phone number and address.

For clinical testing requests to be collected at an AnMed Health Laboratory Services collection site, it is not necessary to complete the ABN in the office. That will be handled at the registration site if applicable.

Client - Billed

For those "Client-Billed Requests" brought in by courier from a client's office, the following items on the requisition form should be completed:

1. Patient's Legal Full Name (nicknames are not acceptable).
2. Sex, Date of Birth or Age.
3. Social Security Number if available.
4. Test(s) Requested. Mark with an (X) beside the name of the test(s) ordered. If test needed is not preprinted on the form, space is available on the form to write in a procedure.
5. Date of Order
6. Specimen/Order Information as needed (i.e. date and time of collection, specimen type, testing priority)
7. Ordering Physician or other authorized provider name.

	ANMED HEALTH DIRECTORY of LABORATORY SERVICES: PROCEDURE REQUISITION	
Anderson, SC 29621	Document Number: TD.GEN.0003	
	Revision Level: B	Page: 4 of 4
	Effective Date: 10/19/09	

The "CHART NO." field is utilized by some physicians to expedite charting of results in their offices when results are received back from AnMed Health Laboratory Services. This item is strictly optional.

Cytopathology/Histopathology Requests

All information requested above applies to completing these requisitions also. In addition, please indicate the specimen type and the number of specimens submitted on surgical specimens. The previous pap number, previous interpretations, and date of last menstrual period need to be submitted on Cytopathology requests. Any other clinical data, diagnosis, sources, or history that may be helpful to the pathologists should also be submitted.