Dear Valued Client:

Diagnostic Laboratory of Oklahoma (DLO) provides new clients with a DLO Go Kit to introduce our comprehensive, innovative diagnostic laboratory testing and services. This Go Kit serves as a transition tool which provides valuable information addressing industry policies and procedures for new customers.

- With your kit, your practice is ready to consistently deliver laboratory results of the highest quality to your patients
- By partnering with DLO, you are set with the resources and support you need to enhance the overall performance and efficiency of your practice
- With the support of DLO, your practice can go far beyond what you traditionally expect from a laboratory

We are fully dedicated to working with you and your staff to improve the health of your patients through unsurpassed diagnostic insights and innovation. We anticipate that you will find these resources useful as you get started and will continue to use them throughout your relationship with DLO. Updates are periodically sent to ensure that your Go Kit remains up-to-date as we continually work to improve testing procedures and diagnostic services. The most current version of DLO’s Go Kit can be found at DLOlab.com.

Thank you for choosing DLO to meet your laboratory needs. We believe you will find it easy working with us—and we look forward to providing you with the best possible resources in diagnostic care.

Sincerely,

William E. Mosteller, CEO, FACHE
Diagnostic Laboratory of Oklahoma
DLO Mission

Provide the highest quality and most efficient medical laboratory information services to health care providers and patients in Oklahoma.

This manual is designed to provide our clients with useful information to help them get started quickly and begin accessing the many resources and services DLO has available. It is intended to be an easy-to-use reference guide with information on standard procedures, key forms, and important contact information. The testing information included is limited to those tests which are most frequently used and is not a complete menu of DLO’s tests. Please visit DLOlab.com for more information on all of the tests available through DLO.

We are constantly increasing our test menu and improving available tests and procedures. The most important laboratory changes are communicated to all DLO customers through the monthly newsletter Laboratory Update, which can be found through IntelliTest Manager. We encourage providers and staff to review and take note of test additions, improvements and other important notifications in this newsletter.
Introduction

As a new client, we’d like to introduce you to DLO, who we are and what we do.

We are Oklahomans serving Oklahomans by providing better health with diagnostic insights. As a joint venture of Quest Diagnostics, DLO provides the most comprehensive diagnostic testing and services available in Oklahoma.

Clinical expertise which is unsurpassed in Oklahoma

- Full-service microbiology department includes virology, parasitology and mycobacteriology
- Largest employer in Oklahoma of medical technologists (224)
- 41 microbiology technicians and assistants
- 10 cytology technicians
- 13 rapid response labs and one core lab
- 10 hospital labs under DLO’s Laboratory Management
- Most comprehensive solid tissue HLA laboratory in the region, located at INTEGRIS Nazih Zuhdi Transplant Institute
- 15 board-certified AmeriPath pathologists who also provide medical directorships
- Electron microscopy for nephrology

Maintains the highest quality tests and specimen integrity

- Highly-trained, DLO-employed route service representatives
- 104 DLO transport vehicles cover 9,500 miles and make 1,250 stops daily
- High-tech, hand held tracking devices allow specimens to be tracked during transit according to type, temperature and department
- 37 DLO employees staff the 24-hour customer service and support call center located in the core lab

Patients come first

- 190 skilled, friendly phlebotomists keep patients at ease
- More than 50 in-office phlebotomists
- 40 conveniently-located patient service centers statewide
- Electronic test results available to patients via computer, tablet and smart phone.

DLO’s analytic capabilities allow providers to make decisions based on real-time data

User-friendly, mobile-friendly tools for test ordering and reporting are available through DLOlab.com, Test Center, and Care360®

Access to more than 650 PhDs and MDs available for clinical consultation

DLO Go Kit 09/2016
We support our communities

• Free and discounted testing for multiple charitable organizations
• Employees active in Leukemia and Lymphoma Society, Habitat for Humanity, American Heart Association, American Red Cross, Juvenile Diabetes Foundation and other charitable organizations

We’re respected in our communities

• Named Best Places to Work in Oklahoma for ten straight years, at time of print, 2005 through 2015
• Named Best Medical Laboratory in Oklahoma by Oklahoma City Awards Program

Who is Quest Diagnostics?

Quest Diagnostics empowers people to take action to improve health outcomes. Derived from the world’s largest database of clinical lab results, Quest’s diagnostic insights reveal new avenues to identify and treat disease, inspire healthy behaviors and improve health care management.

• Network of esoteric and specialized laboratories
• Broad menu of specialized testing including cancer, infectious disease and genetics
• Annually serves one in three adult Americans
• Nationwide laboratory which services 50% of the hospitals throughout the U.S.
• More than 20 billion test results delivered in the past decade

Quest’s 45,000 employees understand that, in the right hands and with the right context, their diagnostic insights can inspire actions that transform lives.

Who is AmeriPath?

AmeriPath Oklahoma City is dedicated to providing comprehensive diagnostic solutions, advanced technology and testing, and superior pathology services to local medical communities.

• Direct access to our pathology team for case consultation and specimen discussion
• Fast turnaround time: 24–48 hour TAT for most tissue and cytology evaluations
• Comprehensive IHC, special stains and molecular testing on complex cases
• AmeriPath offers the expertise of a pathology network of over 450 board certified pathologists

Through diagnostic excellence and personalized services, AmeriPath is committed to being Oklahoma’s local pathology partner and single source solution for diagnostics insights.
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Key Contacts

My Account # _______________________________________________________

Account Rep. ___________________________ Phone_________________________

E-mail ______________________________________________________________

Find the information you need and more at DLOlab.com.

Customer Service ................................................................................. 800.891.2917, Option 2

Logistics and STAT Pickup ..................................................................... 800.891.2917, Option 3

Supplies........................................................................................................ 800.891.2917, Option 4

866.865.1810 Fax

Sales Support.............................................................................................. 800.891.2917, Option 5

405.608.6215 Fax

Billing ........................................................................................................... 800.891.2917, Option 6

Client Billing............................................................................................... 888.321.0155

Cytology...................................................................................................... 800.891.2917, Option 8

Care360® Labs & Meds ............................................................................ 800.697.9302

IT Helpline.................................................................................................. 800.697.9302

EMR/EHR ____________________________________________________________________
Helpful Support Information

4myheart Program
https://www.4myheart.com/4mh/welcome.jsp

AmeriPath
http://www.ameripath.com/

Intellitest Manager™
https://intellitestmanager.questdiagnostics.com/

Laboratory and Database Updates

PDM Resources
http://www.questdiagnostics.com/pain

Physician Billing Services
http://www.questdiagnostics.com/home/contact.html#billing

888.321.0155 Fax 866.361.3043

Prescription Drug Monitoring (PDM) Consultation

877.40.RX.Tox (877.407.9869)

Quest Diagnostics’ Employer Solutions
http://www.questdiagnostics.com/home/companies/employer/drug-screening/online-solutions/esp

800.877.7484

Quest Diagnostics’ Genetic Center
http://www.questdiagnostics.com/home/physicians/testing-services/condition/genetics/benefit

866.GENE.INFO (866.436.3463)

Quest Diagnostics’ Test Center
http://www.questdiagnostics.com/testcenter/TestCenterHome.action

Virtual Test Guide
http://www.DLOlab.com/virtual-test-guide/

DLO is committed to protecting the confidentiality of an individual's health information in compliance with all applicable federal, state and local laws and regulations. For more information about our privacy practices, please visit DLOlab.com which contains the most up-to-date information.
Test Ordering

**With DLO, you’re good to GO**

When you order tests through DLO, you can count on high-quality results from a reliable, accurate and innovative diagnostic testing service provider.

**About this section**

This section will acquaint you with the most commonly used test requisition form and how to complete it.

- Sample Test Requisition (General Health)
- Test Requisition Instructions for Completing Patient Information, Test Ordering, and Billing
- GO Further: Test Ordering and Care360®, page 56

For additional assistance with test ordering, please contact DLO’s Customer Support Center at 800.891.2917, option 2.
The DLO General Health Requisition Form is easy to complete. Simply fill out the sections on patient information, test ordering, specimen coding, and billing. It is important to fill out the form accurately and completely to minimize follow-up and ensure you receive timely reports. The pages that follow explain how to complete each section in more detail.
Here is an example of practice information you will need to complete your requisition form.

**Inherited Cancer Risk Testing**

- **BILL TO:**
  - My Account
  - Insurance Provided
  - Lab Card/Select
  - Patient

- **DATE OF BIRTH:**

- **ICD Diagnosis Codes are Mandatory. Fill in the applicable fields below.**

- **Panel Components Are Listed On The Back.**

- **Each Sample Should Be Labeled With At Least Two Patient Identifiers At Time Of Collection.**

**Primary Insurance**

- **ACCOUNT #:** 000-00000
- **NAME:** Family Practice Associates
- **ADDRESS:** One Malcolm Ave
- **STATE:** NJ
- **ZIP:** 07608
- **TELEPHONE #:** 201-555-1234

- **DATE COLLECTED:**
  - **TIME:** AM
  - **TOTAL VOL/HRS.**:
    - **Fasting**
    - **Non Fasting**

- **NPI/UPIN ORDERING/SUPERVISING PHYSICIAN AND/OR PAYORS (MUST BE INDICATED):**

- **( ) 1234567890 Last Name, First Name**
General Health Requisition Form

Test Ordering

Pay particular attention to ICD codes and order codes for additional tests. It is important to list all medically relevant codes when ordering tests to facilitate payor approval.

MEDICARE LIMITED COVERAGE TESTS

I CD Codes (enter all that apply)

ICD Diagnosis Code(s) Indicate all applicable codes in the boxes provided. Do not include descriptive diagnoses. ICD codes are for billing purposes only and will not be considered as clinical history in the evaluation of Pap Smears.

Specimen Key

Available on back side of printed form. Not included on all paper requisitions. Example shown on pg. 11.

Additional Tests

Indicate all DLO Order Codes for additional tests required that are not preprinted on the Test Requisition.

See DLOab.com/virtual-test-guide or Quest’s Test Center for more specimen information.
General Health Requisition Form

Patient and Billing Information

At time of print, DLO is using two different ways of listing patient and billing information on requisitions. Regardless of the style or requisition, the patient information and ICD codes must be completed. Additional instructions by payor are listed on the following pages.
**General Health Requisition Form**

**Client and Patient Billing**

Your requisition allows you to bill different accounts, including your practice’s account, your patient’s account, Medicare and Railroad Medicare, Medicaid, and other insurance information.

**To Bill Your Account**

When billing your account, follow the steps outlined below.

*Do Not List Any Insurance Information*

**To Bill Patient or Insurance**

When billing patients, follow the steps outlined below.

1. Check My Account in the Bill To box
2. Patient Name
3. Patient Date of Birth
4. Patient Social Security Number
5. Responsible Party (RP) Name if other than the patient
7. RP Insurance Information

---

**Panel Components Are Listed On The Back.**

Each Sample Should Be Labeled With At Least Two Patient Identifiers At Time Of Collection.

- **Fasting**
- **Non Fasting**

**INSURANCE**

- **MEMBER / INSURED ID NO. #**
- **GROUP #**
- **BILLOW TO**
  - My Account
  - Insurance Provided
  - Lab Card/Select
  - Patient

**BILL TO**

- **PRINT PATIENT NAME (LAST, FIRST, MIDDLE)**
- **DATE OF BIRTH**
- **SEX**
- **PATIENT SOCIAL SECURITY #**
- **OFFICE / PATIENT ID #**
- **PATIENT PHONE #**
- **LAB REFERENCE #**
- **RELATIONSHIP TO INSURED:**
  - **SELF**
  - **SPOUSE**
  - **DEPENDENT**
- **PRIMARY INSURANCE CO. NAME**
- **MEMBER / INSURED ID NO. #**
- **GROUP #**

**ACCOUNT #:**

- **NAME:**
  - **ADDRESS CITY, STATE, ZIP**
- **TELEPHONE #:**

**DATE COLLECTED**

- **TIME:**
  - **AM**
  - **PM**
  - **HR**
  - **ML**
  - **NON Fasting**

**Microbiology**

- **CULTURE, GROUP A STREP***
- **CULTURE, GROUP B STREP***
- **STool PATHOGENS***

**Hematology**

- **WBC, DIFF**
- **RBC**
- **HGB, HCT, PLT**
- **HGB, HCT](Hgb, Hct, Rbc, Wbc, Plt, Diff)**

**Renal**

- **UA, COMPLETE (DIPSTICK & MICROSCOPIC)**
- **UA, DIPSTICK W/REFLEX MICROSCOPIC**
- **UA, COMPLETE W/REFLEX CULTURE**

**Biochemistry**

- **MICROBIOLOGY**
  - **CULTURE, STOOL (INC. INDWELLING CATH.)**
  - **CULTURE, GROUP A STREP***
  - **CULTURE, GROUP B STREP***
  - **STool PATHOGENS***

**Immunology**

- **PSA, TOTAL**
- **RHEUMATOID FACTOR S**
- **RPR (DX) W/REFLEX CONFIRM**
- **HIV-1/HIV-2 SCR W/REFLEXES S**

**Endocrine**

- **T3, TOTAL S**
- **T4, FREE S**
- **TSH S**
- **TESTOSTERONE, TOTAL, MALE SR**
- **TESTOSTERONE, TOTAL, LC/MS/MS SR**

**Cardiovascular**

- **CHOLESTEROL, TOTAL S**
- **TRIGLYCERIDES S**
- **LDL CHOLESTEROL S**
- **HDL CHOLESTEROL S**

**Cancer**

- **CEA S**
- **CA 27.29 S**
- **AFP TUMOR MARKER S**
- **MENINGEAL CA 125 S**

**Microbiology**

- **CULTURE, STOOL (INC. INDWELLING CATH.)**
- **CULTURE, GROUP A STREP***
- **CULTURE, GROUP B STREP***
- **STool PATHOGENS***
General Health Requisition Form

Medicare and Medicaid Billing

To Bill Medicare and Railroad Medicare

Be sure to complete the Advance Beneficiary Notice (ABN) when appropriate. Refer to page 36 for more detail. When billing Medicare, follow the steps outlined below.

1. Check Medicare, Railroad Medicare or Insurance Provided in the BILL TO box
2. Patient Name as it appears exactly on the ID Card
3. Patient Social Security Number
4. Patient Mailing Address and Zip Code
5. Patient Medicare or Railroad Medicare ID Number including the Alpha Prefix or Suffix
6. Medicare or Railroad Medicare needs to be listed as Primary Insurance

DID YOU REMEMBER...
To Include Diagnostic Code(s)?
To Request Or Mark Test(s)?
To Provide Order Code(s) For Handwritten Test(s)?
To Check “Bill To” Box Above?
When billing Medicaid, follow the steps outlined below.

<table>
<thead>
<tr>
<th>Medicare and Medicaid Billing</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>To Bill Medicaid</strong></td>
<td></td>
</tr>
<tr>
<td>When billing Medicaid, follow the steps outlined below.</td>
<td></td>
</tr>
</tbody>
</table>

**ADDITIONAL TESTS:** (MUST INCLUDE COMPLETE TEST NAME AND ORDER CODE. REFER TO DIRECTORY OF SERVICES.)

- Non-Physician
- Specimen Key on Back
- NPI/UPIN Ordering/Supervising Physician and/or Payors (MUST be indicated)
- Fax Results to: (   )
- Address:
- City, State, Zip
- Report to:
- Send

**Coverage:**

- The ID Card
- Check Insurance Provider or Medicaid in the Bill To box
- Patient Name as it appears exactly on the ID Card
- Patient Social Security Number
- Patient or Responsible Party’s Name, Mailing Address, and Zip Code
- Patient Medicaid ID Number
- Include Carrier Name, when appropriate

**DID YOU REMEMBER...**

- To include diagnostic code(s)?
- To request or mark test(s)?
- To provide order code(s) for handwritten test(s)?
- To check “Bill To” box above?
Reference Information

Be sure to use correct specimen abbreviations. All tests ordered on one requisition form should require the same transport temperature. This information is not included on every requisition. Please visit DLOlab.com/virtual-test-guide/ or Quest’s Test Center for all specimen collection and transport information.

For your reference, this section lists a specimen key to assist you in the proper collection of specimens.

This table lists the various tests conducted in each organ and disease testing panel.

This area shows the individual testing components that are included in three of the more commonly requested food and allergy profiles.
Custom Requisition Forms

Your DLO representative can work with you to create customized requisition forms or to tailor requisition templates to address your practice’s specific needs. This saves you time and reduces potential errors by including information that is relevant to your practice.

- Frequently ordered tests
- Practice information
- Staff physicians

Care360® Labs & Meds

Care360® Labs & Meds* was designed to help clinicians increase the efficiency of their practice and to help enhance quality of care.* Portal users can order or review lab tests, prescribe medications, and access patient histories 24/7 from any location, including the clinic, hospital, home, or mobile device.

- Complete a requisition in as little as 10-15 seconds — Insurance eligibility verification helps minimize payor issues
- Revise lab orders electronically
- View standing orders, orders on hold, and test status
- Access results quickly and easily
- Create and view longitudinal graphs to track patients’ health

*Care360® Labs and Meds meets all proposed Health Insurance Portability and Accountability Act (HIPAA) standards and protects patient information with 128-bit encryption and the services of Verisign®, an industry leader in system security verification.
Specimen Handling and Transport

With DLO, you’re good to GO

At DLO, we understand how critical each specimen and test result can be in managing your patients’ health. We take all possible care to maintain specimen integrity from the moment it is picked up through test completion. Specimens are picked up, packaged, tracked and delivered directly to the laboratory by our reliable, efficient Route Service Representatives (RSRs), thereby minimizing the need for follow-up, thus freeing time for your staff.

About this section
This section will acquaint you with DLO’s specimen-handling process.

- Virtual Test Guide on DLOlab.com
- Specimen Handling and Transport Overview
- Cytology Specimen Collection
- Blood Specimen Collection
- Microbiology Specimen Collection
- GO Further: Care360® Labs and Meds and Virtual Test Guide
Virtual Test Guide

Navigating the Guide

DLO’s Virtual Test Guide (VTG) on DLOlab.com features complete test and specimen requirements for individually selected frequently-used tests and tests with a history of collection and/or submission difficulties. The Virtual Test Guide is an ongoing project which is continually being reviewed and updated.

The Virtual Test Guide homepage can be accessed several different ways.

DLOlab.com/virtual-test-guide
Virtual Test Guide

Navigating the Guide

The homepage of the VTG lists all tests featured in the guide according to alphabetical order by test name. There are several additional ways to access specific tests and test groups. Tests can be sorted according to associated medical specialties and specific ranges of alphabetical listings, such as A-C, D-F, etc. If there is a test which you are not able to find in the VTG, there is a link to Quest’s Test Center which contains test information on all tests available through Quest. If you would like to request that a test and/or type of test be added to the VTG or would like to share your experience with DLO’s Virtual Test Guide, please submit this information using the Virtual Test Guide Comment Form link found on the left navigation of any page within the VTG.
Virtual Test Guide

Search Engine

The VTG search engine in the blue box is dedicated to find information within the VTG only. Tests are searchable by name, test code, associated medical specialty, collection device name, device supply number, disease state and associated key words.

The search results will list all tests which contain the search subject. The tests are listed according to finding the exact word combination searched or listings that contain the highest number of words included in the search. For instance, when searching for “throat culture”, the results show that “Culture, Throat”, is the closest match.

To search the entire DLO website, please use the search feature located in the top right corner of every page included in DLOlab.com.
Virtual Test Guide

VTG Test Page Features

Test Page

All pertinent information for a test is featured on the test page. This information includes DLO/Quest test name, test code(s), suggested CPT code(s), information on methodology and clinical significance of a test, complete listing of the preferred specimen(s) and collection device(s), specimen collection guide including specimen collection and transport instructions with illustrations when available, photos of the preferred collection device(s) with the supply order number, and links to additional tests included in the associated medical specialties. When available, links to additional test reference material, articles, FAQ’s and algorithms are listed.
Virtual Test Guide

Collection Guide Features

The collection guide has collection instructions and illustrations, specimen information, additional acceptable collection devices, links to other tests which use this device, and much more.

1. Collection device and DLO supply number
2. Preferred specimen. If more than one preferred specimen is available, links to the additional collection device will be listed here.
3. Step-by-step collection directions with illustrations
4. Transport and storage guidelines as well as rejection criteria, if available
5. Rejection Criteria

To return to the VTG homepage from a test page, please click the “Virtual Test Guide” link on the top navigation menu. The “HOME” link at the top of the test page lead to DLOlab.com's homepage.

Additional testing information can be found at the Quest Diagnostics' Test Center. A link to the Test Center can be found in the left navigation on the VTG homepage, on the Testing page of the Providers section on DLOlab.com or at http://www.questdiagnostics.com/testcenter.
Directory of Services

DLOlab.com

Quest Diagnostics’ Directory of Services is available through DLO’s website. This is an electronic version of the printed document, released April 2016. It is searchable and printable. For the most updated information, please visit DLO’s Virtual Test Guide and/or Quest Diagnostics’ Test Center.
Specimen Handling and Transport

Carefully consider the information on this page when preparing and handling specimens. Specimens must be collected and transported properly to ensure the highest quality results.

Introduction

The quality of any laboratory test result is dependent on many variables, the first of which begins with you. Your care, skill, and knowledge when preparing the patient and specimen are essential to providing the highest quality standards for testing and services. The patient must first be properly prepared so that the best possible specimen can be collected. Next, the actual collection of the specimen must be completed. Then, the specimen should be properly processed, packaged and transported to the laboratory in a timely manner and under environmental conditions that will not compromise the integrity of the specimen. After all of these activities take place, a quality analysis can be performed. The specimen collection and handling process can be completed by you and your staff, or by referring your patient to the DLO Patient Service Center. Please contact the laboratory for clarifications, if needed, prior to specimen collection. The Virtual Test Guide, located on DLOlab.com, lists specific specimen requirements for frequently ordered tests. Please visit Quest’s Test Center for specimen requirements on tests not listed. Specimen requirements include information such as specimen volume collection and transport containers as well as transport temperature. If additional information is needed for interpreting test results or if there are specific instructions for patient preparation, they are listed along with specimen requirements.

It is critical that an adequate specimen volume is submitted for analysis. The volume requested in this directory is enough for initial analysis as well as for any confirmatory tests that must be performed. If an inadequate specimen is submitted, we may not be able to perform the initial test or required confirmatory procedures. If repeat or confirmatory tests cannot be performed, the report will indicate that the specimen quantity submitted was QNS (Quantity Not Sufficient) for additional testing.

When serum or plasma is to be submitted for analysis, it is good practice to collect a volume of blood that is 2 to 2.5 times the volume of serum or plasma needed for the test. As an example, if 4 mL of serum or plasma is needed, collect 8 to 10 mL of blood.

When an inappropriate specimen or unclear test request has been submitted, you will receive notification with instructions for resolving the problem.

Health and Safety Precautions

Specimens should be handled in a safe manner and according to applicable legal requirements or guidance. Information on safe specimen handling may be obtained from the US Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention (CDC). In handling human specimens, the goal is to protect health care workers from exposures to blood and to other potentially infectious body fluids.

Besides following other specimen preparation procedures included in the Virtual Test Guide or the Test Center, customers should, before sending a specimen to DLO, ensure that no leakage or contamination is visible outside the specimen container, and that there are no needles or other sharps in the package that could cause injury or pathogenic exposure to anyone handling or opening the package and inner containers. DLO reserves the right to refuse to accept any transports that pose a safety hazard to its employees.

Supplies

Certain supplies necessary to draw and submit specimens for analysis by DLO are provided to customers as part of our testing services. Type and quantity of items must correlate to the number of specimens submitted to DLO for testing.

Specimen collection devices supplied by DLO are to be used ONLY for the collection of specimens for processing by DLO. Such supplies are not to be used to store or dispose of biological materials, including sharp instruments, or for any activity not connected with the collection of specimens for processing by DLO. Please refer to Supply Ordering Information on page 71.

Patient Preparation

Many tests require that the patient be prepared in some specific way to ensure useful results. The best analytical techniques provide results that are only as meaningful as the quality of the specimen that has been submitted for analysis. Our goal is to provide you with the most useful diagnostic information possible. If you have questions about patient preparation for any test, please consult the Virtual Test Guide, the Quest Test Center or call Customer Services for further assistance.

Fasting Requirements

For the majority of tests performed on serum, plasma, or whole blood, a fasting specimen is preferred. Non-fasting specimens often contain fat particles that can interfere with many analytical procedures.

Blood, Serum, and Plasma Specimens

Most blood specimens can be obtained using routine phlebotomy techniques; however, there are some exceptions. The use of a tourniquet can cause stress and is not recommended in some cases. Patients should be instructed not to clench their fist(s) just prior to or during the phlebotomy procedure as this may slightly alter some of the patient’s laboratory results. The patient’s posture, either sitting, standing, or lying down as well as the time of day relative to the patient’s sleep cycle can be important factors in some tests. Whenever specific issues of this nature are important, they will be listed as part of the specimen requirements or patient preparation for the individual tests in the Virtual Test Guide or Quest’s Test Center.
Specimen Handling and Transport

Coagulation Testing

Preparing Platelet-Poor Plasma for Coagulation Testing*

Immediately after collection, mix specimen by gentle inversions. Complete processing within 60 minutes.

Centrifuge at 1500 x g for 15 minutes

Using plastic Pasteur Pipettes, transfer supernatant plasma to a plastic tube.

Cap and centrifuge supernatant plasma at 15 x g for 15 minutes

Remove supernatant plasma from second spin, being careful to not disturb the sediment at the bottom of the tube.

Transfer plasma to plastic storage tubes.

*Courtesy of Quest Diagnostic’s Directory of Services 2016-2017
## Specimen Handling and Transport

### Blood Tests and Collection Tubes

This chart lists the test code, test name and collection container of the commonly-ordered tests found on the standard DLO lab requisition form. Please note that some tests have special instructions. If you are collecting for a test not mentioned on this chart, please refer to the Virtual Test Guide and/or the Directory of Services, both of which are located on DLOlab.com.

<table>
<thead>
<tr>
<th>TEST CODE</th>
<th>TEST NAME</th>
<th>CONTAINER</th>
</tr>
</thead>
<tbody>
<tr>
<td>34392</td>
<td>Electrolyte Panel (Na, K, Cl, CO2)</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>10256</td>
<td>Hepatic Function Panel</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>10165</td>
<td>Basic Metabolic Panel w/ eGFR</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>10231</td>
<td>Comp Metabolic Panel w/ eGFR</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>7600</td>
<td>Lipid Panel (Fasting Specimen)</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>14852</td>
<td>Lipid Panel w/ reflex LDL</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>20210</td>
<td>Obstetric Panel w/ reflex</td>
<td>Red / Gray &amp; 2 Lavender</td>
</tr>
<tr>
<td>10306</td>
<td>Hepatitis Panel, Acute W/Reflex</td>
<td>Red / Gray</td>
</tr>
<tr>
<td></td>
<td>(HBsAg w/ reflex confirm, HBcAb IgM, HBsAb IgM)</td>
<td>Red / Gray</td>
</tr>
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</table>

### Organ / Disease Panels

<table>
<thead>
<tr>
<th>TEST CODE</th>
<th>TEST NAME</th>
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</tr>
</thead>
<tbody>
<tr>
<td>470</td>
<td>FSH</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>482</td>
<td>GGT</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>8477</td>
<td>Glucose, GEST, Scr</td>
<td>Gray</td>
</tr>
<tr>
<td>484</td>
<td>Glucose Plasma</td>
<td>Gray</td>
</tr>
<tr>
<td>483</td>
<td>Glucose, Serum (Gluc)</td>
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</tr>
<tr>
<td>8435</td>
<td>HCG, Serum, Qual</td>
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</tr>
<tr>
<td>8396</td>
<td>HCG, Serum, Quant</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>608</td>
<td>HDL</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>496</td>
<td>Hemoglobin A1c</td>
<td>Lavender</td>
</tr>
<tr>
<td>512</td>
<td>Hep A Ab, IgM</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>4848</td>
<td>Hep B Core Ab, IgM</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>499</td>
<td>Hep B Surface Ab Qual</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>498</td>
<td>Hep B Surface Ag W/Reflex Confirm</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>8472</td>
<td>Hep C Virus Antibody w/ Reflex RNA, PCR</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>9143</td>
<td>HIV 1/2 Ag/Ab 4th Gen</td>
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<tr>
<td>7573</td>
<td>Iron (Tot), IBC % Sat</td>
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<tr>
<td>571</td>
<td>Iron, Total</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>593</td>
<td>LDH</td>
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<tr>
<td>599</td>
<td>Lead (B)</td>
<td>Green or Tan</td>
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<tr>
<td>615</td>
<td>LH</td>
<td>Red / Gray</td>
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<tr>
<td>613</td>
<td>Lithium</td>
<td>Red / Gray</td>
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<tr>
<td>622</td>
<td>Magnesium</td>
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<tr>
<td>713</td>
<td>Phenytion</td>
<td>Red / Gray</td>
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<tr>
<td>718</td>
<td>Phosphorus</td>
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<tr>
<td>733</td>
<td>Potassium (K+)</td>
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<tr>
<td>745</td>
<td>Progesterone</td>
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<tr>
<td>746</td>
<td>Prolactin</td>
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<tr>
<td>754</td>
<td>Protein, Total (TP)</td>
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<tr>
<td>5363</td>
<td>PSA, Total</td>
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<tr>
<td>4418</td>
<td>Rheumatoid Factor</td>
<td>Red / Gray</td>
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<tr>
<td>799</td>
<td>RPR (Monitoring) w/ reflex Titer</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>36126</td>
<td>RPR (Drx) w/ reflex Confirm FTA</td>
<td>Red / Gray</td>
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<tr>
<td>802</td>
<td>Rubella IGG AB</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>809</td>
<td>Sed Rate By Mod West</td>
<td>Red / Gray</td>
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<tr>
<td>836</td>
<td>Sodium (Na)</td>
<td>Red / Gray</td>
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<tr>
<td>873</td>
<td>Testosterone Total Male (Adult) Immunooassay</td>
<td>Red / Gray</td>
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<tr>
<td>15983</td>
<td>Testosterone Total Women / Pediatrics</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>896</td>
<td>Triglycerides (Trig)</td>
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<tr>
<td>899</td>
<td>TSH</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>36127</td>
<td>TSH w/ reflex T-4, Free</td>
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<tr>
<td>859</td>
<td>T-3, Total</td>
<td>Red / Gray</td>
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<tr>
<td>861</td>
<td>T-3 Uptake</td>
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<tr>
<td>867</td>
<td>T-4 (Thyroxine), Total</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>866</td>
<td>T-4 (Thyroxine), Free</td>
<td>Red / Gray</td>
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<tr>
<td>294</td>
<td>Urea Nitrogen (Bun)</td>
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</tr>
<tr>
<td>905</td>
<td>Uric Acid</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>916</td>
<td>Valproic Acid</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>7065*</td>
<td>Vitamin B12 / Folic Acid</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>927*</td>
<td>Vitamin B12</td>
<td>Red / Gray</td>
</tr>
<tr>
<td>17306</td>
<td>Vitamin D, 25-OH, Total, Immunooassay</td>
<td>Red or Gray</td>
</tr>
</tbody>
</table>

*Refrigerated Specimen

---

Information is subject to change without notice.
Specimen Handling and Transport

Proper Phlebotomy Techniques

<table>
<thead>
<tr>
<th>Stopper</th>
<th>Additive</th>
<th>Inversions</th>
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<tbody>
<tr>
<td>Blood Cultures</td>
<td>Citrate</td>
<td>3-4</td>
</tr>
<tr>
<td>Light Blue</td>
<td>Gel, serum</td>
<td>5</td>
</tr>
<tr>
<td>Red / Gray</td>
<td>No gel, Serum</td>
<td>5</td>
</tr>
<tr>
<td>Red</td>
<td>Heparin</td>
<td>8</td>
</tr>
<tr>
<td>Green or Tan</td>
<td>EDTA</td>
<td>8</td>
</tr>
<tr>
<td>Lavender or Tan</td>
<td>EDTA</td>
<td>8</td>
</tr>
<tr>
<td>Royal Blue</td>
<td>Sodium Fluoride (Glucose)</td>
<td>8</td>
</tr>
<tr>
<td>Gray</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yellow</td>
<td></td>
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</tr>
</tbody>
</table>

**Tube must be filled completely.** Note: When using a winged blood collection set for venipuncture and a coagulation (citrate) tube is the first specimen to be drawn, a discard tube should be drawn first. The discard tube must be used to fill the blood collection set tubing’s “dead space” with blood, but the discard tube does not need to be completely filled. This important step will ensure maintenance of the proper blood-to-additive ratio of the blood specimen.

Please visit the VTG for instructions on proper collection and specimen processing procedure for Microtainers™.


Sufficient volume achieved if blood drawn falls above minimum fill indicator. For blood transfer, do not fill above illustrated dashed maximum line.

Note: The quantity of blood drawn into evacuated tubes varies with altitude, ambient temperature, barometric pressure, tube age, venous pressure and filling technique.


**Please properly fill and separate all specimens.**

For more information, please visit DLOlab.com/virtual-test-guide or call 800.891.2917, option 2.

*Information is subject to change without notice.*
### Specimen Handling and Transport

#### Microbiology Test and Collection Specification

<table>
<thead>
<tr>
<th>Test Code</th>
<th>Test Name</th>
<th>Collection Device</th>
<th>Temp</th>
</tr>
</thead>
<tbody>
<tr>
<td>4550</td>
<td>Aerobic (Swab, Tissue)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4550</td>
<td>Aerobic (Body Fluid)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4469</td>
<td>Anaerobic (Swab, Tissue)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4469</td>
<td>Anaerobic (Body Fluid)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4446</td>
<td>Anaerobic And Aerobic (Swab, Tissue)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4446</td>
<td>Anaerobic And Aerobic (Body Fluid)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>389</td>
<td>Blood (Adult)</td>
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<td>Room Temp</td>
</tr>
<tr>
<td>389</td>
<td>Blood (Pediatric)</td>
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<td>Room Temp</td>
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<tr>
<td>4475</td>
<td>Campylobacter</td>
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<td>Room Temp</td>
</tr>
<tr>
<td>388</td>
<td>CSF</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>4477</td>
<td>Ear, External (Swab)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>8631</td>
<td>E. Coli 0157</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4480</td>
<td>Eye (Swab)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4606</td>
<td>Fungus (Blood)</td>
<td>N/A Refer to Test Center</td>
<td>Room Temp</td>
</tr>
<tr>
<td>4553</td>
<td>Fungus; Not Skin, Hair Or Nail (Swab)</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>4553</td>
<td>Fungus; Not Skin, Hair Or Nail (Tissue, Biopsy, Body Fluid)</td>
<td>11 or 14.</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>4605</td>
<td>Fungus; Skin, Hair, Or Nail Only</td>
<td>11 or 14.</td>
<td>Room Temp</td>
</tr>
<tr>
<td>4558</td>
<td>Genital</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>90417</td>
<td>MRSA Culture Screen (No Sensitivities)</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>17656</td>
<td>MRSA PCR</td>
<td>4</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>4554</td>
<td>Mycobacteria (a.k.a Afb) (Swab)</td>
<td>1</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>4554</td>
<td>Mycobacteria (a.k.a Afb) (Tissue, Biopsy, Body Fluid, Sputum)</td>
<td>11 or 17.</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>4482</td>
<td>NP/Nasal/Inner Ear</td>
<td>2</td>
<td>Room Temp</td>
</tr>
<tr>
<td>4556</td>
<td>Sputum/Lower Resp (Trac. Asp, Sputum, Bronch.)</td>
<td>11</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>8801</td>
<td>Staphylococcus Screen With Sensitivity</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>10019</td>
<td>Stool (Salmonella/Shigella Only)</td>
<td>15</td>
<td>Room Temp</td>
</tr>
<tr>
<td>10018</td>
<td>Stool (Salmonella/Shigella/Campylobacter/Shiga Toxin w/ reflex To 8631)</td>
<td>15</td>
<td>Room Temp</td>
</tr>
<tr>
<td>4485</td>
<td>Strep Group A Culture</td>
<td></td>
<td>Room Temp</td>
</tr>
<tr>
<td>10553</td>
<td>Strep Group A, Antigen (Rapid Strep)</td>
<td>3</td>
<td>Room Temp</td>
</tr>
<tr>
<td>5617</td>
<td>Strep Group B</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>15090</td>
<td>Strep Group B With Sensitivity</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>4479</td>
<td>Surveillance (Environmental)/Swab (Water)</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>17853</td>
<td>Sterilizer Check Culture</td>
<td>N/A Refer to Test Center</td>
<td>Room Temp</td>
</tr>
<tr>
<td>394</td>
<td>Throat</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>395</td>
<td>Urine</td>
<td>9</td>
<td>Room Temp</td>
</tr>
<tr>
<td>3021</td>
<td>Urine, Special</td>
<td>9</td>
<td>Room Temp</td>
</tr>
<tr>
<td>59320</td>
<td>Quantitative, Broch, Burn Or Stool</td>
<td>11</td>
<td>Refrigerate</td>
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</table>

#### Stains

<table>
<thead>
<tr>
<th>Test Code</th>
<th>Test Name</th>
<th>Collection Device</th>
<th>Temp</th>
</tr>
</thead>
<tbody>
<tr>
<td>4503</td>
<td>Acid Fast Stain Only (Tissue, Fluid)</td>
<td>1, 11 or 17</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>497</td>
<td>Gram Stain (Swab, Tissue, Fluid, All Other Specimens)</td>
<td>1, 2, 3, 4, 9, 11, &amp; 17</td>
<td>Room Temp</td>
</tr>
<tr>
<td>497</td>
<td>Gram Stain (Sputum)</td>
<td>11</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>8627</td>
<td>Fungus/KOH, Stain Only (Swab)</td>
<td>1</td>
<td>Room Temp</td>
</tr>
<tr>
<td>8627</td>
<td>Fungus/KOH, Stain Only (Tissue, Fluid)</td>
<td>11 or 14.</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>3990</td>
<td>Fecal Leukocyte Stain</td>
<td>13</td>
<td>Room Temp</td>
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</table>

#### Isolated ID & Miscellaneous

<table>
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<th>Temp</th>
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<tbody>
<tr>
<td>392</td>
<td>Aerobic Bacterium Id</td>
<td>N/A</td>
<td>Room Temp</td>
</tr>
<tr>
<td>14577</td>
<td>BV/Vaginitis Panel (Afirm)</td>
<td>8</td>
<td>Room Temp</td>
</tr>
<tr>
<td>91664</td>
<td>C. Difficile Toxin (Gdb) Screen With Reflex To PCR</td>
<td>14</td>
<td>Refrigerate</td>
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<tr>
<td>95640</td>
<td>C. Difficile Toxin B, PCR</td>
<td>14</td>
<td>Refrigerate</td>
</tr>
<tr>
<td>11363</td>
<td>Chlamydia/N. Gonorrhoea MRNA,TMA (Swab)</td>
<td>5, 6 &amp; 7</td>
<td>Room Temp</td>
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<tr>
<td>11295</td>
<td>Fecal Globin, Stool (Medicare)</td>
<td>16</td>
<td>Room Temp</td>
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<tr>
<td>11290</td>
<td>Fecal Globin, Stool</td>
<td>16</td>
<td>Room Temp</td>
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<tr>
<td>8625</td>
<td>Giardia Antigen ELA</td>
<td>15</td>
<td>Room Temp</td>
</tr>
<tr>
<td>3950</td>
<td>Parasite ID (Intestine)</td>
<td>11 Refer to Test Center</td>
<td>Room Temp</td>
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<tr>
<td>3946</td>
<td>Parasite ID (External)</td>
<td>11 Refer to Test Center</td>
<td>Room Temp</td>
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<tr>
<td>4496</td>
<td>Pinworm ID</td>
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<tr>
<td>706</td>
<td>Rotavirus</td>
<td>11 or 14.</td>
<td>Room Temp</td>
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<tr>
<td>8628</td>
<td>Sarcoptes Scabei (Scabies)</td>
<td>11 Refer to Test Center</td>
<td>Room Temp</td>
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<tr>
<td>5463</td>
<td>Urinalysis (Complete)</td>
<td>10</td>
<td>Room Temp</td>
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<tr>
<td>3020</td>
<td>Urinalysis w/ reflex to Culture</td>
<td>9 &amp; 10.</td>
<td>Room Temp</td>
</tr>
<tr>
<td>681</td>
<td>Ova And Parasites</td>
<td>13</td>
<td>Room Temp</td>
</tr>
<tr>
<td>6653</td>
<td>Ova And Parasites (2 Specimen Collection Vials)</td>
<td>13</td>
<td>Room Temp</td>
</tr>
<tr>
<td>6652</td>
<td>Ova And Parasites (3 Specimen Collection Vials)</td>
<td>13</td>
<td>Room Temp</td>
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<tr>
<td>16492</td>
<td>Sureswab (CT Ng, T Vaginalis)</td>
<td>5</td>
<td>Room Temp</td>
</tr>
<tr>
<td>16899</td>
<td>Sureswab (Bacterial Vaginosis DNA)</td>
<td>5</td>
<td>Room Temp</td>
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<tr>
<td>19550</td>
<td>Sureswab (Trichomonas)</td>
<td>5, 6 &amp; 7</td>
<td>Room Temp</td>
</tr>
<tr>
<td>11363</td>
<td>Sureswab (CT Ng)</td>
<td>5, 6 &amp; 7</td>
<td>Room Temp</td>
</tr>
<tr>
<td>16491</td>
<td>Sureswab (Vaginosis)</td>
<td>5</td>
<td>Room Temp</td>
</tr>
<tr>
<td>15509</td>
<td>Sureswab (Bacterial Vaginosis)</td>
<td>5</td>
<td>Room Temp</td>
</tr>
<tr>
<td>16495</td>
<td>Sureswab (Candida Albicans DNA)</td>
<td>5</td>
<td>Room Temp</td>
</tr>
<tr>
<td>17333</td>
<td>Sureswab (Vaginosis/Vaginitis Plus Panel)</td>
<td>5</td>
<td>Room Temp</td>
</tr>
<tr>
<td>16494</td>
<td>Sureswab (Candidiasis PCR)</td>
<td>5</td>
<td>Room Temp</td>
</tr>
</tbody>
</table>

* Collect two (2) amies gel swabs
** CSF collection (included with the lumbar puncture kit) is not provided by DLO

Information is subject to change without notice.
Specimen Handling and Transport

Microbiology Collection Devices

1. BBL™ CultureSwab™ Plus w/ Amies Gel
2. BBL™ CultureSwab™ Plus w/ Amies Gel (w/Wire Shaft)
3. Liquid Amies Double Plastic Swabs
4. Culture Swab Liquid Stuart
5. APTIMA® Vaginal Swab Transport Media (STM)
6. APTIMA® Combi 2
7. APTIMA® Urine
8. BD Affirm™ VPIII
9. BD Vacutainer® Urine C&S Preservative Plastic Tube
10. Urinalysis Tube
11. Sterile Urine Cup
12. Pinworm Paddle
13. Total Fix™
14. Para-Pak® CLEAN VIAL
15. Para-Pak® C&S
16. InSure™ Card
17. BD Vacutainer® Serum Red Top Tube
18. BacTec® Plus
19. BacT/ALERT® PF (Pediatric)
## Specimen Handling and Transport

### Cytology Tests, Collection Specifications and Devices

<table>
<thead>
<tr>
<th>TEST CODE</th>
<th>TEST NAME</th>
<th>COLLECTION DEVICE</th>
<th>TEMP</th>
</tr>
</thead>
<tbody>
<tr>
<td>58315</td>
<td>Pap</td>
<td>ThinPrep® w/ Imaging and Aptima HPV® mRNA</td>
<td>20</td>
</tr>
<tr>
<td>90934</td>
<td>Pap, reflex HPV, if ASCUS (ages 21 and over)</td>
<td>ThinPrep® w/ Imaging and Aptima HPV® mRNA</td>
<td>20</td>
</tr>
<tr>
<td>90933</td>
<td>Pap and HPV (cotesting for ages 30-65)</td>
<td>ThinPrep® w/ Imaging and Aptima HPV® mRNA</td>
<td>20</td>
</tr>
<tr>
<td>91339</td>
<td>Pap and HPV, CT/NG (cotesting with STI risks)</td>
<td>ThinPrep® w/ Imaging and Aptima HPV® mRNA</td>
<td>20</td>
</tr>
<tr>
<td>91414</td>
<td>Pap and HPV, reflex genotyping 16,18/45 (genotyping when Pap-, HPV+)</td>
<td>ThinPrep® w/ Imaging and Aptima HPV® mRNA</td>
<td>20</td>
</tr>
<tr>
<td>18810</td>
<td>Pap</td>
<td>SurePath® w/ Imaging and Aptima HPV® mRNA</td>
<td>21</td>
</tr>
<tr>
<td>18811</td>
<td>Pap, reflex HPV if ASCUS (ages 21 and over)</td>
<td>SurePath® w/ Imaging and Aptima HPV® mRNA</td>
<td>21</td>
</tr>
<tr>
<td>18813</td>
<td>Pap and HPV (cotesting for ages 30-65)</td>
<td>SurePath® w/ Imaging and Aptima HPV® mRNA</td>
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<tr>
<td>18828</td>
<td>Pap and HPV, CT/NG (cotesting with STI risks)</td>
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<tr>
<td>18829</td>
<td>Pap and HPV, reflex genotyping 16,18 (genotyping when Pap-, HPV+)</td>
<td>SurePath® w/ Imaging and Aptima HPV® mRNA</td>
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<td>11361</td>
<td>Chlamydia Trichomonas (CT)</td>
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<td>Neisseria gonorrhoea (NG)</td>
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<td>11363</td>
<td>CT/NG</td>
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<td>19863</td>
<td>HPV DNA, reflex genotyping 16,18</td>
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<td>20 or 21</td>
</tr>
<tr>
<td>31532</td>
<td>HPV DNA</td>
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<td>20 or 21</td>
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<td>90521</td>
<td>Trichomonas vaginalis</td>
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<tr>
<td>90569</td>
<td>HSV 1 &amp; 2 DNA, real-time PCR</td>
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<td>20 or 21</td>
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<td>Aptima HPV mRNA (ThinPrep)</td>
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<tr>
<td>90942</td>
<td>Aptima HPV mRNA, reflex genotyping 16,18/45 (ThinPrep)</td>
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<td>92203</td>
<td>Aptima HPV mRNA (SurePath)</td>
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<tr>
<td>92211</td>
<td>Aptima HPV mRNA, reflex genotyping 16,18/45 (SurePath)</td>
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</tr>
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</table>

### Out of the Vial Testing

Complete test information and collection guides are available through [DLOlab.com/virtual-test-guide/](http://DLOlab.com/virtual-test-guide/)
Proper Specimen Identification

Specimen labels

All specimens should be labeled at the time of collection with at least two patient identifiers that must also appear on the requisition. Examples of patient identifiers are as follows:

1. The patient's name (full last name, then full first name or initial) or a unique ID code is always required.
2. The second patient identifier may be one of the following:
   - Date of birth (month/date/year)
   - Other unique patient identifier that is also on the test requisition, e.g., hospital or office ID code or file number
   - DLO requisition number or specimen barcode label
   - Other barcode labels can be used if the barcode matches the unique identifiers on the printed requisition (the barcode does not need to be human readable)

**NOTE:** Location-based identifiers are NOT acceptable, e.g., hospital room number or street address

Each specimen container must have a securely affixed label with the following information:

- the patient's name written exactly as it appears on the test requisition (e.g. Doe, Jane)
- a second patient identifier as noted above
- your account number
- date of collection

If the label is hand-written, use a ballpoint pen — do not use a felt tip pen. If glass slides are submitted, use a pencil for labeling the frosted end — two identifiers are preferred although patient’s name alone is acceptable.

When using an electronically-generated DLO test requisition, place the label lengthwise on the tube. When submitting a specimen in a container other than the tube used to draw the sample (e.g., transfer vials), also indicate specimen type on the label (e.g., serum, plasma, urine, etc.). When submitting specimens for microbiological testing (e.g., cultures, bacterial antigen, microscopic examination) the nature and anatomic source of the sample and the specific organism(s) to be detected, if any, should be specified.

**Improperly labeled specimens may be rejected.**
Lock Box Usage Instructions

Proper Specimen Temperature for Transport

Ambient, refrigerated, and frozen specimens MUST be segregated. If you need additional lock box capacity to allow for complete segregation, please contact DLO at 1.800.891.2917, option 3.

**Ambient**

Place ambient specimens farthest away from any cold packs.

If there are specimen tubes requiring different temperature states within a single patient sample collection, place each specimen tube in a separate specimen bag with a copy of the ordering requisition. This will facilitate those tubes being placed in the correct areas of the lock box.

**Refrigerated**

When placing a refrigerated specimen inside the lock box, use a cold pack and place refrigerated specimen directly on the cold pack either by:

1) rubber banding specimen to the cold pack, or
2) placing specimen in a separate bag with the cold pack

**Frozen**

Frozen specimens should be placed inside a frozen tote container to allow them to remain frozen while in the lock box. **Make sure the specimen is completely frozen before placing it inside the frozen container.**

Remember to take the frozen tote out of the lock box in the morning to refreeze the gel-packs before reusing. Freeze only the gel packs, not the entire tote.

**DO NOT put ambient specimens on top of refrigerated specimens.**

**DO NOT put refrigerated specimens in the frozen tote bag.**

Call 1.800.891.2917, option 3, to notify DLO if you need additional lock box capacity to properly store specimens.
GO FURTHER with DLO

Care360 ® Labs & Meds

Proper handling and transport of specimens is the first step in the process. Easy access and review of results is the second. At DLO, these steps work hand in hand through the integration of Care360®.

- Instant access to collection techniques and transport instructions for every DLO test, so staff can refer to information quickly, as needed
- Electronic follow-up to determine if patient has completed the test*
- Online supply ordering
- Schedule pickups and track specimens from the convenience of your computer

For more on the unique and exclusive Care360® features designed to help clinicians increase the efficiency of their practices and to help enhance quality of care, ask your DLO representative.

Virtual Test Guide

Lab results are only as accurate as the specimens submitted for testing. DLO’s Virtual Test Guide (VTG) provides all of the information needed to ensure accurate, timely laboratory test results. Every test included in the VTG contains the following information.

- DLO test name, as well as alternative test names
- DLO test code
- An associated CPT code
- Preferred collection device with supply order number and collection instructions with illustrations, when applicable
- Specimen transport container, temperature and allowable storage time
- Rejection criteria

*Care360® Lab Orders and Results meets all proposed Health Insurance Portability and Accountability Act (HIPAA) standards and protects patient information with 128-bit encryption and the services of Verisign™, an industry leader in system security verification.
With DLO, you’re good to GO

DLO offers on-time results that are easy to read and interpret.

- Out-of-range results are noted for staff, decreasing time spent on tracking abnormal results and freeing up time for more productive duties
- Enhanced reports can serve as an educational tool for patients, helping to improve compliance with testing and treatment regimens, ultimately improving clinical outcomes

About this section

This section will acquaint you with the DLO method of reporting patient lab results.

- Sample Clinical Report
- Clinical Report Delivery Policy
- GO Further: Enhanced Interpretive Services and Care360®
Sample Clinical Report

Your DLO clinical report provides the clear, comprehensive results you expect for the laboratory tests you ordered.
Clinical Report Delivery

Test Reporting Notification

Routine test result reporting times vary, depending upon the nature of the test, the analytical time required for the procedure and the method of reporting. Reports are delivered electronically, by facsimile, or U.S. mail.

The provider who requests a test is responsible for providing 24-hour reliable contact information for STAT and priority reporting. The person notified should be the ordering provider or his/her authorized representative as permitted or required by state and federal law, and has the responsibility of interpreting the result in the context of the patient’s clinical condition and can take immediate action, if needed. If the person notified is not qualified to make these decisions, he/she has the responsibility to communicate the information to a qualified person immediately.

STAT test results will be reported for tests that have been ordered as STAT by the client and are offered as a STAT test by DLO. We will use reasonable efforts to promptly communicate STAT test results at any hour of the day, seven days/week.

All communications that involve patient information, including test results, will only be initiated on a need-to-know basis and will follow local and federal regulations that protect patient confidentiality.

Priority Result Reporting

This section details how DLO laboratories notify a physician or other clinical personnel responsible for patient care, prior to the regularly scheduled delivery of results when results of tests on the Priority Result Report list are outside of defined ranges. The verbal result reporting described in this section is in addition to the regular reporting procedure for all DLO test results (such as printed reports delivered by mail).

Priority-1

Test results include, but are not limited to, results considered “critical” according to the Clinical Laboratory Amendment of 1988 (CLIA; CFR 493.1109f) and the College of American Pathologists (CAP) Laboratory Inspection Program and so designated by the Chief Laboratory Officer or designee. Since test results cannot be fully interpreted without knowledge of the patient’s current clinical condition and treatment, we will use reasonable efforts to promptly communicate Priority-1 results at any hour of the day, seven days/week so that the healthcare provider can determine the clinical implications and possible need for immediate intervention.

Priority-2

Test results are those that may require attention prior to the receipt of routine laboratory reports. We will use reasonable efforts to promptly communicate these results the same day (up to 7pm) or the next morning (after 9am), seven days/week. For facilities which are known to us as a nursing home or hospital, we will use reasonable efforts to promptly communicate these results at any hour of the day, seven days/week.
DLO offers more than just patient laboratory reports. When you partner with us, you have access to a wide range of resources and support.

**Physician-level consultation**

DLO connects you with both quick answers to your questions and with specialist/academic level support for more challenging cases.

- When you need an answer to a routine question, our expert staff and regional medical directors are available via phone
- When working on more challenging cases, the genetics counselors and physician experts are available to assist you

**Care360® Labs & Meds**

Care360® Labs & Meds is a web-based solution that enhances patient care through advanced reporting options.

- Monitor chronic conditions with test-specific or condition-specific views of testing and medication histories
- Customize reports with the information that is relevant to what you’re looking for

For more on the unique and exclusive Care360® features designed to help clinics increase the efficiency of their practices and to enhance quality of care, ask your DLO representative.
Insurance & Payor Information

**With DLO, you’re good to GO**

DLO has comprehensive insurance partnerships that provide broad coverage for patients. This means dealing with fewer laboratories, gaining access to local clinical lab experts, and achieving consistency of reporting — all of which increase practice efficiency.

**About this section**

This section will acquaint you with insurance coverage for DLO services in your area.

- Insurance Payor List
- Advance Beneficiary Notice (ABN) Form
- Advanced Written Notice (AWN) Form
- Oklahoma Health Care Authority Prior Authorization
- GO Further: Streamlined Payor Interaction with Care360®
DLO will file all insurance claims to the contracted payors shown below. Other insurance plans not listed may be considered as out-of-network resulting in a patient bill. Please be aware that this list is subject to change. If you have any questions regarding DLO’s participation with a specific product or health plan, please contact us at (405) 608-6100 or (800) 891-2917, Option 5.

Aetna—If you are a primary care physician and wish to have DLO serve your Aetna HMO patients, please contact your Aetna Provider Relations representative and request an HMO Laboratory Designation Form. You must first submit your lab change form to Aetna before using DLO. Specialist physicians may use DLO without first contacting Aetna. If you have any questions, please contact your Aetna representative. LabCard/LabOne—DLO has an exclusive contract with LabOne/LabCard in Oklahoma.

**Preferred or Exclusive Provider for Select Private Health Plans**

<table>
<thead>
<tr>
<th>Preferred or Exclusive Provider (Private Health Plans Accepted)</th>
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<tbody>
<tr>
<td>Aetna</td>
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<tr>
<td>Blue Cross Blue Shield of Oklahoma (BCBSOK)</td>
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<td>CIGNA</td>
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**Key Employer Relationships**

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<th>Key Employer Relationships</th>
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<tbody>
<tr>
<td>Whirlpool</td>
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<td>Home Depot</td>
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**Private Health Plans Accepted**

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<th>Private Health Plans Accepted</th>
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<tr>
<td>AMSUHC</td>
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<tr>
<td>Beech Street A Multiplan Network</td>
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<tr>
<td>(All plans and products)</td>
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<tr>
<td>Blue Card® - Blue Cross Blue Shield</td>
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<tr>
<td>BlueLincs HMO</td>
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<td>C. L. Frates and Company</td>
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<td>ChoiceCare (Humana)</td>
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<td>(excluded: St. Francis Network, ValuMed (St. John) Network and OMNI Network)</td>
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<td>First Health Network</td>
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<td>Horizon BCBS**</td>
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<td>MultiPlan (All Groups)*</td>
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<td>Oklahoma State &amp; Education Employees Group</td>
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<td>Indian Health Insurance Board (HealthChoice)</td>
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<td>Interlock / BRMS</td>
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<tr>
<td>• Mutual Assurance Administrators</td>
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<td>• The Mega Life &amp; Health Insurance Co.</td>
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<td>• Pacific Life &amp; Annuity</td>
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<td>• Benefit Planners</td>
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<td>SAMBA Health Plans 100% Coverage</td>
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<td>SoonerCare Choice</td>
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<td>Sterling Life Insurance Company</td>
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<td>(Medicare Supplement)</td>
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<td>Three Rivers Provider Network (TRPN)</td>
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<td>United Healthcare**</td>
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<td>Universal American</td>
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<td>Any, Any, Any® Plan (PFFS)</td>
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<td>WellCare Medicare Advantage PFFS</td>
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**State & Federal Government Programs Provider**

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<td>Medicare Traditional (Oklahoma)</td>
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<tr>
<td>Medicare Supplement Insurance (Medigap) e.g. AARP</td>
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<td>Railroad Medicare</td>
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<tr>
<td>TRICARE</td>
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<tr>
<td>• Health Net Federal Services</td>
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<tr>
<td>• Humana Military</td>
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<tr>
<td>• TriEast</td>
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</table>

_Bold_ indicates exclusive relationship

* Indicates that we need specific payor information – payor name and address

** We accept as an out-of-network provider and discounts may apply through complementary networks

DLO will file all claims with the above listed payors. Please be aware that this is not an exhaustive list of all of the health plans with which we participate and is subject to change over time. There may be exceptions in certain areas or for certain members or plans. Other insurance plans not listed may generate a patient bill that the insured individual may be able to use to submit for reimbursement. If you have any questions regarding DLO’s participation with a specific product or health plan, please contact us.
Advance Beneficiary Notice (ABN) Form

Instructions for Completing the Form

The DLO ABN form is straightforward and easy to complete. Be sure that patients understand their non-coverage options prior to providing services and that the patient selects an option, signs and dates the form. Care360® will auto generate an ABN form when used for test ordering. If it does not, the manual form must be completed prior to testing.

1. Print patient’s name
2. Check box or handwrite test name and number
3. Provide the estimated cost of the test(s) that the patient may be responsible to pay
4. Patient MUST choose an option
5. Patient MUST sign
6. Patient MUST write the date
Advance Beneficiary Notice (ABN) Form

Medicare Laboratory Ordering Procedure

The back page of your ABN form outlines laboratory procedures for Medicare patients. Submit the completed form with your requisitions and specimens.

LABORATORY ORDERING PROCEDURE FOR MEDICARE PATIENTS

Step 1. Determine the tests to be ordered and indicate on the requisitions all medically appropriate ICD codes that accurately reflect the patient’s condition or symptoms, and therefore, the diagnostic purpose for ordering the test(s).

Step 2. Determine if the tests or any test in a panel/profile ordered appear on the list of Medicare Limited Coverage Tests.
   If no........ Go to Step 3.
   If yes....... Go to Step 3.

Step 3. Determine if the ICD codes you have specified are included on the Medicare carrier’s list of covered ICD codes for that test.
   If yes, and there is no frequency symbol (F) next to the test on the requisition, proceed with lab specimen submission procedures.
   If no, go to Step 4.

Step 4. Review with your patient the Advanced Beneficiary Notice (ABN) Form
   1. Insert your patient’s name
   2. Write in or check off the test(s) that Medicare may not cover in the appropriate column.
   3. Refer to the current Diagnostic Laboratory of Oklahoma Patient Price List for the estimated costs of the test(s) that the patient may be responsible to pay.
   4. INSERT THE PRICE IN THE SPACE MARKED “ESTIMATED COST” ON THE ABN.
   5. Present the entire ABN form to your patient and explain that Medicare may deny the services listed on the ABN and the patient may be responsible for payment of the tests(s) listed on the ABN. Make sure that the patient reads the ABN in its entirety and understands it.
   6. Explain why you think the test(s) is medically appropriate.
   7. Have your patient personally select Option 1, Option 2 or Option 3 on the ABN. (Choose only one option box)
   8. After the option is selected, the “patient must sign and date the form”.
   9. Provide your patient with a copy of the signed ABN

Note: All spaces must be filled out completely.

Step 5. Submit the completed Advanced Beneficiary Notice form with the completed requisition for those test(s) that the patient has agreed to receive.
Your cooperation in complying with the Medicare Regulations and related test ordering procedures will eliminate the need for time-of-the-ordering provider. Please direct any questions regarding coding to the payor being billed.

They must complete an Advance Beneficiary Notice (ABN), confirming their understanding that they will be responsible for payment. If the diagnosis provided does not meet the reimbursement rules, or if the frequency limit on test procedures has been exceeded, payment may be denied. In that case, DLO can seek reimbursement from the patient only when the patient has been notified in advance of the testing that Medicare is likely to deny payment for these services. If the patient chooses to have the test performed, they must complete an Advance Beneficiary Notice (ABN), confirming their understanding that they will be responsible for payment.

The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the ordering provider. Please direct any questions regarding coding to the payor being billed.

Your cooperation in complying with the Medicare Regulations and related test ordering procedures will eliminate the need for time-consuming follow-up calls to your office.

Visit DLOlab.com/professionals/tool-resources/mlcp/ for additional MLCP tools and reference material.

DMLCP Reference Guide Instructions
Policies in this MLCP Reference Guide apply to testing performed at a DLO facility and apply to Medicare National Coverage Determination Policy and Medicare Local Coverage Determination Policy.

The lists of covered diagnosis codes for National and Local Medicare Limited Coverage Policies are provided as a guide for determining if the test is reimbursable by Medicare based on the patient’s symptoms or medical condition as indicated by the appropriate ICD code. Please note diagnosis codes are required for all Medicare orders to document medical necessity of the testing.

This diagnosis code reference guide is provided as an aid to physicians and office staff in determining when an ABN (Advance Beneficiary Notice) is necessary. Diagnosis codes must be applicable to the patient’s symptoms or conditions and must be consistent with documentation in the patient’s medical record. DLO does not recommend any diagnosis codes and will only submit diagnosis information provided to us by the ordering physician or his/her designated staff.

If the diagnosis provided does not meet the reimbursement rules, or if the frequency limit on test procedures has been exceeded, payment may be denied. In that case, DLO can seek reimbursement from the patient only when the patient has been notified in advance of the testing that Medicare is likely to deny payment for these services. If the patient chooses to have the test performed, they must complete an Advance Beneficiary Notice (ABN), confirming their understanding that they will be responsible for payment.

The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the ordering provider. Please direct any questions regarding coding to the payor being billed.

Your cooperation in complying with the Medicare Regulations and related test ordering procedures will eliminate the need for time-consuming follow-up calls to your office.

Visit DLOlab.com/professionals/tool-resources/mlcp/ for additional MLCP tools and reference material.
Advanced Written Notice (AWN)

An AWN is a written notification used to inform a patient that their insurance may not pay for the laboratory testing ordered. It is similar to the ABNs used for Medicare. These forms are generated based on published coverage policies of an insurance carrier. AWN’s will increase patient awareness regarding potential charges for lab tests. Obtaining signed AWNs will potentially reduce billing trailers from DLO and billing questions from patients. This process covers select private third party insurance carriers.

Care360® users will need to acknowledge the Insurance Coverage Rules (IRC).

Care360® will determine if an AWN is necessary.

If there are additional diagnosis codes in the patient’s chart for the date of service, the ordering physician may add them to the order. If the ordering physician has already provided all applicable diagnosis information for the patient on the date of service, two copies of the AWN will print with the requisition. The Care360® user will provide the AWN to the patient. After reading the AWN, if the patient has questions regarding their coverage they should be referred to their insurance company.

The AWN will be presented to the patient for their signature. This indicates the patient has been informed that their insurance carrier may not pay for the testing, and if it does not, the patient has agreed to be personally responsible to pay for the testing. Once the AWN is completed, the signed copy should be packaged with the requisition to be sent to the lab. The patient will retain the other copy of the AWN.

Sample AWN Letter
SoonerCare Prior Authorization

Required for payment of specific types of testing

Information is provided by the Oklahoma Health Care Authority website, pertaining to medical prior authorization. https://okhca.org/providers.aspx?id=14665

This information is designed to assist the providers with submitting a prior authorization request (PAR) correctly the first time. The Oklahoma Health Care Authority’s goal is to make the prior authorization process as easy as possible for our providers, keeping with the allowed OHCA, state and federal parameters. Prior Authorization Requests are reviewed and processed by the Medical Authorization Unit.

• Some OHCA covered services require a prior authorization (PA)
• Failure to obtain a PA for an item requiring a PA will result in denial of a claim
• The provider assumes full financial risk in providing services without an approved PA
• Providers are not allowed to bill a member for a covered service if a PA is not obtained/approved.

Laboratory Testing Requiring Prior Authorization

Allergy Testing/Immunotherapy Effective July 30, 2014
Genetic Testing Please visit Genetic Testing for the most up-to-date guidelines
High Risk OB (HROB) Updated guidelines effective March 24, 2016
Urine Drug Screens Updated guidelines effective January 6, 2016

Prior Authorization Process

Please complete the following steps for patients with Medicaid/SoonerCare before ordering tests which require a prior authorization.

• Fill out Sections I, II, III, V, and the Procedure Code and Description of the test (including the DLO test code) in Section VI on the Prior Authorization Request, form HCA-12A, which you can find at http://okhca.org/providers-forms.
• For Section V, the Date Span of Service must be thirty (30) days. If the patient has already been drawn for the allergy testing, start with the date the patient was drawn and end thirty (30) days after that date. For example, if the patient was drawn September 1, 2016, the “From” date is September 1, 2016 and the “To” date would be September 30, 2016.
• Fax the completed form to DLO Clarifications at 610.271.9804 for DLO to complete Section IV and the Modifier, Total Units for Date Span, and Total Billed Charges columns in Section VI.
• DLO will then complete our part of the form and fax it back to you. Please make sure you provide a fax number for us to send you the completed form.
• You will then send the completed prior authorization form to Medicaid using the enclosed cover letter to accompany the prior authorization form (HCA-13A). Please understand it could take up to eight days for Medicaid to provide the prior authorization approval.
• Once you receive the approved prior authorization from Medicaid, you may order the test. All requisitions and test specimens must be accompanied by the prior authorization approval.
• Please note that DLO may not be able to perform the test without the approved prior authorization.

If allergy testing covered by the OHCA correspondence is processed and reported, and an approved prior authorization is not available or cannot be obtained, DLO may need to consider billing the test to your client account at the price current for Date of Service.
SoonerCare Prior Authorization

Access to Resources and Forms

The most up-to-date information and forms for SoonerCare Prior Authorizations can be found in the Provider section of the Oklahoma Health Care Authority’s website, okhca.org/providers.
SoonerCare Prior Authorization

Documentation of Medical Necessity
Information is provided by the Oklahoma Health Care Authority website pertaining to medical prior authorization. https://okhca.org/providers.aspx?id=14665

Prior authorization requests (PARs) must include sufficient legible objective, factual, clinical based, information regarding the member’s condition to show medical necessity. Forms and documentation can be uploaded through the Secure Provider Portal with on-line PAR submission or may be faxed to 405.702.9080, or toll free 866.574.4991 or mailed to HP Attn: Prior Authorization, 2401 NW 23rd, Ste. 11, Oklahoma City, OK 73107. If documentation is not received the request will be canceled and a new PAR will be required. Effective 4/1/2013, OHCA will no longer pend back to the provider for additional information. Each PA request stands alone. PARs without documentation cannot be processed and will be System Canceled if supporting documentation is not received within 10 calendar days.

It can take up to three (3) business days for your PAR or faxed documentation to be scanned into OHCA system. If you check the Secure Site and your PAR or fax documentation for on-line web submission is not in the system and it has been three business days; you will need to contact our vendor HP. We are not able to see your documentation unless it has been scanned into our system by HP. Please see the section under General Information regarding Fax Issues.

Prior Authorization Forms

HCA-13A - Fax Cover Sheet
Information is provided by the Oklahoma Health Care Authority website pertaining to medical prior authorization. https://okhca.org/providers.aspx?id=14665

The HCA-13A must be submitted with each Prior Authorization Request IF you are submitting the forms and documentation via fax or mail. If submitting multiple requests for multiple members, you must complete and submit an HCA-13A form separately for each request.

When submitting documentation for a web PAR, an amendment, or additional documentation; enter the corresponding prior authorization number to assure your documentation will be linked with the existing PAR.

The HCA-13A must be the first document when the PAR is submitted.

Failure to have the HCA-13A first will cause the request to be rejected with no further action taken.

Note: Some fax systems automatically generate a cover sheet; this is a function setting that must be turned off so a provider cover sheet is not generated as the top document.

1. Requesting provider’s SoonerCare number or National Provider Identifier (NPI).
2. Member’s ID number.
3. For a new request, write “NEW”
4. Print the contact person’s name and specific phone number with area code (and extension if applicable).
5. Check appropriate reason box for submission at top right of the form.
Note: Do not place another Fax Cover Sheet on top.

Three fields below are required and must match the prior authorization request.

1. Provider Number or NPI/ZIP/ZIP+4:

2. Member ID Number:

3. Prior Authorization Number:

Purpose:
This form is to be used when a prior authorization request (PAR) requiring a paper attachment is being submitted. Submission of the completed forms along with the required attachments will allow the appropriate review process to be conducted by the OHCA.

Instructions:
1. Box 1; fill in the Servicing Provider Number.
2. Box 2; fill in the nine-digit member identification number.
3. Box 3; write “new” to initiate a new prior-authorization request. A “new” PAR is also required for continuation of previously authorized services. PAR dates must not overlap previously approved dates of service.
   a. For SoonerCare or Insure Oklahoma online PAR submissions, enter the corresponding PAR number in box 3.
   b. To submit additional documentation or to amend a PAR, enter the existing PAR number in box 3 to assure your documentation will be linked with the correct existing PAR.
4. The Initial Request box is to be checked when requesting “new” services.
5. The Amended box is to be checked when minor changes are required to an existing approved authorization. Also, enter the prior authorization number in box 3 above so your amendment request will be linked with the correct existing PAR.
6. The Additional Documentation box is to be checked when submitting additional documentation to be added to an existing PAR. Enter the PAR number in box 3 above so your documentation will be linked with the correct existing PAR.
7. The Photos/Videos Included box is to be checked when submitting photos or videos for review. Mail to: HP Attn: Prior Authorizations, 2401 NW 23rd, Suite 11, Oklahoma City, OK. 73107
8. Fax all forms and documentation to: 405-702-9080 Toll Free 1-866-574-4991

Note: Do not place another Fax Cover Sheet on top.

This form is for use with Prior Authorization requests requiring attachments.

Sender’s Name: ___________________________ Phone Number: ___________________________

This fax contains confidential information and is intended only for the individual named. If you are not the named addressee you should not disseminate, distribute or copy this fax. Please notify the sender immediately by phone if you have received this e-fax by mistake and destroy the fax you received. Fax transmission cannot be guaranteed to be secure or error-free as information could be intercepted, corrupted, lost, destroyed, arrive late or incomplete. The sender therefore does not accept liability for any errors or omissions in the contents of this message, which arise as a result of fax transmission.

OHCA Revised 05/8/2014

HCA-13A
HCA-12A - Prior Authorization Request Form

Information is provided as a courtesy of the Oklahoma Health Care Authority website pertaining specifically to medical prior authorization. https://okhca.org/providers.aspx?id=14665

A new HCA-12A must be completed and submitted to DLO with each patient each occurrence.

Section I - Client Complete
- Prescribing physician’s SoonerCare number or NPI and Zip+4 (Required for Assignment Code Hospital OP, Hospital IP, Physician)
- Prescribing physician’s name and phone number
- Prescribing physician signature and date OR signed and dated complete order within the documentation

Section II - Client Complete
- Recipient ID Number (RID)
- Member name (First and last-must match OHCA system records)
- Birth-date (Must match OHCA system records)
- Address (phone number if available)

Section III - Client Complete
- Estimated length of treatment (Example; 99, 10 days, 1 month, 6 months, 1 year)
- Diagnosis codes and description of services

Section IV - DLO Complete
- Rendering Provider ID or NPI and Zip+4
- Provider phone number and fax number
- Rendering provider name
- Address and phone number
- Rendering provider signature and date

Section V - Client Complete
- Complete date span of services to be rendered (Example; From: 10/2/13 To: 12/1/13). For procedures enter a 3-6 month date span
- Assignment code to represent the type of service

Section VI - see pg. 45
Do Not Skip Any Lines Or PA Will Be Canceled
- Appropriate HCPCS, CPT or ICD codes (ICD codes used for Inpatient Facility Spinal Fusion PAs ONLY)
- Any appropriate modifiers such as; LL for monthly rental (RR modifier should be utilized with Oxygen requests); 50 and 51 for bilateral procedures
- Description of service to be rendered Must be on one line.
- Enter TOTAL units for the date span listed in Section V
- Enter TOTAL charges for each manually priced item (Provide an MSRP invoice for each item until 10/1/2014 when manual pricing will be performed on your claim, not during the PA process)
- See MAU web page for other specific PAR information such as Enteral Nutrition and coding for unilateral, bilateral and multiple procedures

**Please Note: The use of white out is not allowed**

1. Provider information Client completes
2. Patient information Client completes
3. Diagnosis and treatment information Client completes
4. Laboratory information DLO completes
5. Date span of services and assignment code Client completes
6. COT, ICD, or HCPCS Code Client completes
7. Modifier DLO completes
8. Test code and name Client completes
9. Total units for date span DLO completes
10. Total billed charges DLO completes
11. Check appropriate reason box for submission at top right of the form.
**STATE OF OKLAHOMA**  
Oklahoma Health Care Authority  
Prior Authorization Request

**SECTION I**  
**Prescribing Physician:**  
NPI / ZIP+4:  
Physician Name:  
Phone:  
Signature:  
Date:  

**SECTION II**  
**Member RID:**  
**Member Name:**  
**Date of Birth:**  
**Parent/Guardian:**  
**Address:**  
**City/State/Zip:**  
**Phone:**  

**SECTION III**  
**Estimated Length of Treatment:**  
**Diagnosis Code(s):**  
**Physician's Prescription:**

**SECTION IV**  
**Servicing Prov. No. & Loc.:**  
NPI / ZIP+4:  
Phone:  
Fax:  
Provider Name:  
Address:  
City/State/Zip:  
Signature of Servicing Prov.:  
Date:  

**SECTION V**  
**Date Span of Service**  
From:  
To:  
**Assignment Code (Select from below):**  
(01) Home Health  
(02) Hospital IP Facility or Hospital IP Physician  
(03) Hospital OP  
(04) Physician  
(06) Transplant  
(08) Audiology  
(12) DME  
(17) Vision Care  
(21) PD Nursing  
(25) Lab and X-Ray  
(26) Clinic  
(37) Hospice  
(40) High Risk OB  
(46) Sleep Studies

**SECTION VI** - Do Not Skip Lines or PA will be Cancelled

<table>
<thead>
<tr>
<th>LINE/ITEM</th>
<th>CPT, ICD or HCPCS Code</th>
<th>MODIFIER</th>
<th>DESCRIPTION (Must Be On One Line)</th>
<th>TOTAL UNITS FOR DATE SPAN</th>
<th>TOTAL BILLED CHARGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>DLO</td>
<td></td>
<td></td>
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<tr>
<td>B</td>
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<tr>
<td>C</td>
<td>Client Completes</td>
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<td>D</td>
<td>Client Completes</td>
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</tr>
</tbody>
</table>

FORWARD TO: Attn: Prior Authorization, 4345 N Lincoln, Oklahoma City, OK 73105  
OR FAX: (405) 702-9090  
Toll Free: 1-866-574-4991  
OHCA Revised: 08/28/2014  
HCA-12A

*SUBMISSION OF ITEMS LISTED DOES NOT GUARANTEE APPROVAL. ADDITIONAL DOCUMENTATION MAY BE REQUIRED. Supplier generated forms and Physician letters of medical necessity are not a substitute for the comprehensive medical record. Information is provided as a courtesy of the Oklahoma Health Care Authority website pertaining to medical prior authorization. [https://okhca.org/providers.aspx?id=14665](https://okhca.org/providers.aspx?id=14665)
**GO FURTHER with DLO**

**Insurance and Payor Information**

DLO works with major insurance providers and Medicare to help clinicians and practice staff keep up-to-date on all the latest information regarding billing, codes and state-by-state coverage.

- Broad patient coverage
- Resources to meet all clinical requirements
- Enhanced communications with government and payors

**Care360® Labs & Meds**

With Care360®, essential insurer and coverage data is there when you need it — easily retrieved from any Internet connection, easily utilized, and securely shared with payors.*

- Simplified management of health plan complexities with tiered formulary alternatives, patient eligibility, coverage, and co-pay information
- Insurance eligibility verification ensures accuracy and completeness
- Advanced tracking and reporting tools to help you identify patient and practice trends, and report to government and payors
- Care360® meets the requirements for a qualified E-Prescribing system for the CMS incentive program

For more on the unique and exclusive Care360® features designed to help clinicians increase the efficiency of their practices and to enhance quality of care, ask your DLO representative or go to Care360.com.

---

*Care360® Labs & Meds meets all proposed Health Insurance Portability and Accountability Act (HIPAA) standards and protects patient information with 128-bit encryption and the services of Verisign™, an industry leader in system security verification.*
With DLO, you’re good to GO:

DLO offers exceptional care at our Patient Service Centers (PSCs), collecting patient specimens in an easy, convenient process that ensures high levels of patient satisfaction. It’s all part of our effort to deliver personalized, high-quality service — the kind you deliver in your own practice.

About this section

This section will acquaint you with services DLO offers to patients. Pages include:

• Sample Patient Invoice and Payment Coupon
• MyQuest Patient Portal
• GO Further: Extensive Patient Education and Convenient Services

Please see Addendum for a listing of DLO’s Patient Service Centers throughout the state.
Sample Patient Invoice and Payment Coupon

Reduce the number of patient billing inquiries you receive with easy-to-comprehend patient invoices and convenient on-line payment options. Billing specialists are available to answer any questions for you or your patients.

Laboratory Invoice

For services not included in your physician’s bill

<table>
<thead>
<tr>
<th>Date</th>
<th>CPT Code</th>
<th>Test Description</th>
<th>Charge</th>
<th>Insurance Discount</th>
<th>Insurance Paid</th>
<th>Medicare/Medicaid Paid</th>
<th>Patient Paid</th>
<th>Patient Owes</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/24/13</td>
<td>86141</td>
<td>CRP; HIGH SENSITIVITY</td>
<td>$50.00</td>
<td>($28.64)</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Tax ID: 73-1569760  ICN Codes: V70.0

Services Performed by QUEST DIAGNOSTICS DALLAS IRVING, TX

* The CPT codes provided are based on AMA guidelines and without regard to specific payor requirements.

Date of Service: December 24, 2013

Responsible Party: KIMBERLY BAUGH

Physician Address: 405 S OKLAHOMA AVE

CHEROKEE, OK 73728

Please have your invoice available for reference.

This invoice is for laboratory tests performed at the request of the referring physician. These charges are separate from the physician’s fees. OK ST ED EMPL indicated the balance is your co-payment, co-insurance, or deductible and is your financial responsibility. Prompt payment is appreciated. Thank you for using DLO.

Patient Information

Patient Name: SCOTT BAUGH

Invoice Number: 2244348946

Referring Physician: FERGUSON, D. O.

Physician Address: 405 S OKLAHOMA AVE

CHEROKEE, OK 73728

Insurance Name: OK ST ED EMPL

Insurance ID: 04071012

Group Number:

Please have your invoice available for reference.

Lab Results and Diagnosis Questions Must Be Answered By Your Physician.

Customer Service

LOG ON NOW at www.DLOLab.com to conveniently pay your invoice, provide updated insurance information, or take a patient survey.

Phone 1-888-241-7742

Fax 1-800-568-2312

WEEKDAYS 09:00 AM - 07:00 PM EST
Se Habla Español 09:00AM - 07:00PM Hora Estándar del Este

Lab Code: DLO

Due Date: Mar. 14, 2014  Invoice Number: 12345678

Patient Name: First Name Last Name

Amount Due: $21.36

Amount Enclosed: $

If you received an explanation of benefits showing your responsibility is less than the amount shown on this bill, please pay the lesser amount. To fully resolve your invoice, please provide a copy of your explanation of benefits.

MAIL PAYMENTS ONLY TO:

DIAGNOSTIC LABORATORY OF OK
PO BOX 740732
CINCINNATI, OH 45274-0732

Please provide your new address information on the back.

DLO Go Kit 09/2016
Utilize our Diagnostic Laboratory of OK website to update your insurance information or make a payment at www.DLOLab.com.

Please update your PRIMARY insurance information at www.DLOLab.com or complete the form below with all requested information and return in the envelope provided. We will submit benefit claims to your insurance company if all required information is provided. Please make sure that the Diagnostic Laboratory of OK address appears in the envelope window.

We participate with many insurance companies. If you have a specific question about your coverage, please contact your insurance company representative. You are responsible for all deductibles, co-insurance, copays, and any items not paid by your Insurance.

Mail Correspondence / Insurance Information to:

DIAGNOSTIC LABORATORY OF OK
PO BOX 740732
CINCINNATI, OH 45274-0732

Fold here to return this portion to DIAGNOSTIC LABORATORY OF OK in the envelope provided. Be sure that address above is visible through the envelope window.

Pay your bill online securely at www.DLOLab.com

Entity: DLO
Invoice #: 12345678
MyQuest Patient Portal

Accessing health information has never been easier. MyQuest delivers critical information directly to a computer, tablet and smartphone giving patients the tools needed to view, access and securely share health information everywhere.

Receive and understand lab results - MyQuest provides easy to understand results directly from the lab.

MyQuest Advanced Access - DLO offers expanded, electronic access back to January 1, 2010 to your health data via the new service MyQuest Advanced Access.

Track medical information - Update MyQuest with details about medical conditions and food and medication allergies.

Medication tracking and reminders - Store medication information with reminders with smart phones and tablets only.

Track healthcare provider information - Manage physician names, specialties and contact information, hospital and pharmacy numbers, even insurance plan, group and policy numbers in MyQuest.

ICE: In Case of Emergency - Save all your emergency information for instant access when needed. For the patient’s protection, MyQuest requires a password to access health information on a mobile device.

Share health information - Email or fax (via mobile app only) to medical providers, family or emergency contacts directly from the MyQuest mobile app.

For more information, please visit DLOlab.com/lab-authorization/
GO FURTHER with DLO

Education and Services

DLO offers comprehensive patient services to simplify patient management and communication. But only DLO goes above and beyond by providing a range of education and wellness services for patients:

- Complete on-line patient health library, as well as printed brochures in English and Spanish
- Online, secure access to test results, medical information and bill pay
- Secure, fast, patient-friendly access to individual results to empower better choices

Patients can access these tools and services by going to DLOlab.com/patient.

Improving patient care with Care360® Labs & Meds

The Care360® Physician Portal provides on-line tools for tracking all of your patient records, appointments, and data (profiles including demographics, medication history, lab results over time, and other longitudinal information).* And there is also an easy-to-use patient communication section that can be accessed securely through one or more of our Health Management Service providers (GoogleHealth™, Keas™, and Microsoft® HealthVault™).

- Instant patient information management with electronic tracking
- More effective connection with patients through customized communications and wellness programs
- Patient/user-friendly technology keeps the sophistication of the system secure — simple to use and access

Take advantage of a new age of patient care and efficient management with Care360®. Ask your DLO representative or go to Care360®.com.

*Care360® Labs & Meds meets all proposed Health Insurance Portability and Accountability Act (HIPAA) standards and protects patient information with 128-bit encryption and the services of Verisign™, an industry leader in system security verification.
Certifications

With DLO, you’re good to GO:

DLO helps provide your practice with the confidence to meet the challenging demands of today’s diagnostic landscape. DLO provides:

- Access to local and national experts in all specialties of diagnostic laboratory medicine
- A large test menu ranging from routine tests to specialty tests in the expanding field of genomic and esoteric testing

About this section

This section will acquaint you with the DLO licenses and accreditation.

- CLIA Laboratory Certificate of Accreditation
- CAP Laboratory Certificate of Accreditation

For the most up-to-date accreditation information, please visit DLOlab.com/about-dlo/accreditations/.
# CERTIFICATE OF ACCREDITATION

**LABORATORY NAME AND ADDRESS**

DIAGNOSTIC LABORATORY OF OKLAHOMA  
225 NE 97TH STREET  
OKLAHOMA CITY, OK 73114

**LABORATORY DIRECTOR**

JENNIFER A MULHOLLAN M.D.

**CLIA ID NUMBER**

37D0960030

**EFFECTIVE DATE**

10/30/2014

**EXPIRATION DATE**

10/29/2016

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 265a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown herein (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

---

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective dates:

<table>
<thead>
<tr>
<th>LAB CERTIFICATION (CODE)</th>
<th>EFFECTIVE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BACTERIOLOGY (110)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>MYCOBACTERIOLOGY (115)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>MYCOLOGY (120)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>PARASITOLOGY (130)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>VIROLOGY (140)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>SYPHILIS SEROLOGY (210)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>GENERAL IMMUNOLOGY (220)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>ROUTINE CHEMISTRY (310)</td>
<td>10/30/2000</td>
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<tr>
<td>URINALYSIS (320)</td>
<td>10/30/2000</td>
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<tr>
<td>ENDOCRINOLOGY (330)</td>
<td>10/30/2000</td>
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<tr>
<td>TOXICOLOGY (340)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>HEMATOLOGY (400)</td>
<td>10/30/2000</td>
</tr>
<tr>
<td>ABO &amp; RH GROUP (510)</td>
<td>10/30/2000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LAB CERTIFICATION (CODE)</th>
<th>EFFECTIVE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANTIBODY NON-TRANSFUSION (530)</td>
<td>07/16/2008</td>
</tr>
</tbody>
</table>

**FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY’S ADDRESS AND PHONE NUMBER. PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.**
Accredited Laboratory

The College of American Pathologists certifies that the laboratory named below has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to February 28, 2017 to maintain accreditation.

Main Laboratory
Oklahoma City, Oklahoma
Jennifer A. Mulholland, MD

Chair, Commission on Laboratory Accreditation
President, College of American Pathologists

CAP Number: 134367
CLIA Number: 7089301
ALD-134367

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.
Information Technology

With DLO, you’re good to GO

DLO offers connectivity options to allow physicians and clinics to manage patient care through easy-to-use on-line tools, EHR interface options and Care360®.

About this section

This section will acquaint you with DLO’s Information Technology capabilities, software and procedures.

Pages include:

- EHR/IT
- Care360® Labs and Meds
- DLOlab.com
- Optional Care360® offerings
EHR/IT Compatibility

DLO is able to implement reference laboratory interfaces with most EHR applications and laboratory information systems (LIS). DLO has standard reference laboratory interfaces developed, allowing interfaces to be implemented faster.

Implementation Process

- Simplifies electronic test orders and send outs
- Provides a quicker test turnaround time
- Increases accuracy by eliminating manual entries

Superior Support

DLO will assign an Implementation Analyst who will develop and manage a project plan that includes project initiation, interface validation and interface implementation. The Implementation Analyst supports the new interface for 30 days post go-live prior to transitioning support to our Interface Help desk, where you will continue to receive 24x7 interface support. Our unique, proprietary process assures that your interface to DLO’s LIS interface is state-of-the-art, functions accordingly and meets your needs.

DLO provides a 24x7 Help Desk as well as access to Quest Regional Help Desk services and Integration Services support.
EHR/IT Compatibility

Reporting
Reporting of results can be delivered by several different methods. DLO provides 24x7 support for all options.

Test Update
DLO offers IntelliTest Manager™, which is a flexible on-line tool to access new test information, test updates and changes based on specific account utilization over the last 12 months. IntelliTest Manager™ allows you to filter your searches based on your specific test utilization. This information can then be added to your EHR, either manually or through auto-updates, to ensure that your system has the most current testing information. Your account representative can answer additional questions regarding coordinating your system with IntelliTest Manager™ and EHR update procedures.

IntelliTest Manager™ can be accessed through DLOlab.com or directly at https://intellitestmanager.questdiagnostics.com/

Log in at IntelliTestManager.com by entering your client number and 5-digit zip code.

1. View any of the communication documents
2. Filter information by your test utilization
3. Display detailed test information
4. View updates by test category
Care360® Labs & Meds

Training and Account Registration

Through Quest, DLO is able to offer a variety of digital information organization options for healthcare organizations and practitioners. Care360® Labs & Meds is provided to DLO clients at no cost. This allows clients to order specimen collection and testing supplies, order tests, receive reports and access test updates from any computer or mobile device.

DLO can provide clients with in-depth, on-site training or Web-based tutorials for Care360® applications. Whether it’s lab or supply ordering, finding test results, building custom informatics reports, or access from a mobile device, DLO will assess your Care360® needs and tailor a training program to get you operational quickly. DLO’s training staff is local to provide fast, reliable service. Follow up support and additional on-site training can be requested any time.

To begin working in Care360®, you simply need to open your Web browser, access the Care360® web address, and enter the User ID and Password provided to you.

1. Enter the User ID & Password and click the Log In button.
2. Enter a new password and click the Save button.
3. Enter answers to security questions and click the Save button.

After successfully entering your new password and challenge questions, you will be presented with the Care360® Quick View page.
Accessing and Logging In

Function Tabs
- **Message Center**: Options for accessing patient and user data available within Care360®
- **Patient**: Options for accessing all patient related services
- **Lab Orders**: Options for creating and viewing lab orders
- **Reports**: Options for generating reports relating to patients within your practice
Navigating Care360®

1. Clinical Catalyst - Displays the organizations that the user is associated with. If you are a member of more than one organization and perform work at multiple care site locations, you use this menu to quickly switch to a specific organization.

2. Admin - Allows administrative users to set preferences that affect all users that are members of their organization. Preferences affecting several features within Care360® can be configured through the Admin menu.

3. Preferences - Allows general preferences to be set that only affect the current user. Functions include ePre Pharmacy State search, password change, and challenge question management.

4. What’s New - Details the latest features and enhancements that have been released in the current version of the Care360® application.

5. Help - Click to view the Support Center, a new portal containing documentation, on-line training materials, feedback, and more.

6. Logout - The logout function is used to end the current user session, exit the Care360® application, and return the user to the Login page. By default, logout will automatically occur after a 30-minute period of inactivity.
The Quick View page provides you with a comprehensive starting point for quickly accessing information and performing the most commonly used tasks available in Care360®, including many of the to-do items or activities that you can perform relating to your patients.

The features displayed on the Quick View page are based on your organization’s level of service. The information provided is specific to each service level:

**Care360® Base Service** provides physicians with access to clinical data for patients, a convenient and efficient method for ordering labs and receiving results, and the ability to share relevant health information across a secure network.

**Care360® ePrescribing Premium Service** allows physicians access to formulary information, act upon FDA alerts, manage new scripts and refills, and electronically send or print prescriptions (includes Base service).

**Care360® EHR Premium Service** provides support for the practice workflow including features to effectively document a full medical encounter, upload scanned documents to a patient chart, and integrate with a Practice Management System (includes Base & ePrescribing services).

**Care360® EHR and Clinical Decision Support Premium Service** allows patient data to be gathered and analyzed in order to identify gaps in care and other quality care issues (includes Base, ePrescribing & EHR services).

**Alerts will be displayed in the yellow bar only if unresolved items are detected**

**Counts display items which might need to be addressed such as lab results, failed fax messages and results pending release.**

**Messages lists new clinical messages and faxes in-box.**

**Tasks lists items which require your attention.**

**Population Alerts provide an at-a-glance information about the entire patient population for the conditions or diseases that your practice is monitoring.**
Care360®

Online Lab Ordering

The electronic lab ordering functionality of the Care360® Labs & Meds allows you to enter all of the information required to complete a DLO lab order — specimen type, test selection, diagnosis code and billing information, providing a simple lab ordering process that takes as little as 10-15 seconds.

Benefits to electronic lab ordering are numerous:

- Complete and accurate requisitions
- Specimen handling requirements are available for reference
- Advanced Beneficiary Notices are automatically populated
- Specimen labels print automatically
- Standing Order capability
- Orders may be started by any staff member, put on hold, and completed at any time
- Changes to lab orders may be made electronically
- Electronic Requisition Log allows stronger control and audit capabilities for all your order
- Supplies can be ordered on-line as well

Order Details allows you to select the appropriate account number, ordering physician and bill type.

Patient Information is where you will search for an existing patient or add a new patient.

Billing Information will be displayed if the Bill Type is Patient or Insurance. You will be allowed to add or edit insurance carriers and guarantor information if necessary.

Comments will allow you to provide additional information to the laboratory or to be printed on the lab report.
Order Summary Information pane will accumulate all of the information for the order. Patient’s Demographic information is populated from the previous screen. Once you select the diagnosis code(s) and order code(s), it will populate a summary to the right of the patient information. This section will allow you to delete any incorrect codes and specify the number of labels to print.

Diagnosis codes can be added from a grid of commonly-used codes or you can search for a diagnosis by entering the code number or name.

From the Order Codes Search box you can search by entering the test code number or the test name. You can also select one or multiple Order Codes from your grid of commonly used-codes.

Standing Orders are never deleted from the system. They will expire on the end date, up to a maximum of 186 days. You may enter a start date up to one year in advance.

To access the Standing Order option, select the Standing Order check box from the Order Details pane. The frequency option window will then display and you are able to choose the order detail. With the help of the frequency options, you are able to choose how frequently the order needs to be placed. You can specify frequency, a start date and end date.

After a standing order is saved, it can be viewed, edited, and renewed at a later date.
AutoReceive Results

AutoReceive, part of the Care360® suite of products, provides a secure method for the following:

- Receiving, routing, and storing DLO lab results. The results are available in HL7 or printable (PDF) formats. The results are also delivered to Care360® Labs & Meds and Care360® EHR.
- Uploading clinically-relevant scanned documents from your computer or network drive to Care360® EHR.
- Uploading point-of-care testing (POCT) results to AutoReceive using an external POCT device (such as a HemoCue device) for delivery to Care360® Lab Orders and Results.

AutoReceive Subscription is a defined delivery method that identifies the lab or radiology result document types (HL7 or PDF) that you want to receive, or the files that you can upload (scanned clinical documents). All users have access to the AutoReceive user interface for creating and modifying subscriptions. There are a variety of subscription parameters, but two in particular require Windows security considerations:

- The location to which AutoReceive writes the HL7 or PDF files.
- The location from which AutoReceive uploads scanned clinical document files.

AutoReceive Implementation

The first step to implementing AutoReceive is to schedule an installation with a DLO Installation Coordinator.

You can begin receiving results (and uploading clinical documents or POCT results if your account is configured for these services) on the same day that AutoReceive is installed.
New Results Notification

The Quick View page, displayed immediately upon login, provides a display of the number of new lab results. If your location is set up to receive both partial and final results, those will be identified also.

To view the list of New Lab Results:

1. Click on the New Lab Results Header from the content pane
2. Click on the New Lab Results link from the Labs menu.

New Results Display

Unless changed in your preferences, lab results will remain on this list for 14 calendar days. When lab results post to the New Lab Results page, they immediately post to the appropriate Patient Summary. By default, the lab results are sorted by Collected Date.
Interactive Insights™

Interactive Insights by Care360® was created with one goal in mind: To bring diagnostic insights closer to the point of care. It is about having the right information at the right time in the right format. It is an additional practice management option available with Care360® enrollment. There is no cost for Interactive Insights™ in Care360® Labs & Meds.

Interactive Insights shows the providers current results and trends in context of a patient’s continuum of care. When ordering a test, providers can now see up to two years of patient specific history for that test, no matter where previous DLO tests were ordered or who ordered them.

Coming soon to DLO

1. Shows that a client or an organization has enabled Interactive Insights in their System Preferences.
2. A new general preference allows users to select Interactive Insights™ as their default result view:
3. Select Interactive Insights™ view from Preferences > General Preferences.
4. Select check box from anywhere you see results. Once checked, all reports will be viewed in Interactive Insights format unless unchecked.
Care360® Interactive Insights™

Physician Report

Interactive Insights can be viewed as a standalone application, or integrated with EMR/EHR systems and its full functionality is automatically available on Care360®. Quickly find out-of-range results, share results with patients and easily order new tests to ensure the best possible patient outcomes.

Interactive Insights is fully mobile so providers can securely access powerful functionality everywhere.

### HCV RNA, QN PCR

**Laboratory Testing in the Management of Chronic Hepatitis C Virus (HCV) Infection**

FAQs

- Why are HCV results being reported in IU/mL?
- What is log IU/mL?
- What do these test results mean: <15 Detected? or <15 Mpt Detected? 

### Hemoglobin A1C

**HEMOGLOBIN A1c**

- < 5.7 (% of total Hgb)

### QuestAssured Vit D

**VITAMIN D, 25-OH, TOTAL**

- 30-100 (ng/mL)

- Find abnormal results quickly. Flag results you'd like to spend more time with
- See analyte trends over a two-year span, for all results stored with DLO
- Algorithm
- Share results with patients electronically or in print
- Order new tests quickly in the context of existing test results
Patient Report

Through Interactive Insight, providers can empower patients with information that matters to them. Patients can now experience deeper insight into their health with a simplified format that contains relevant and easily digestible highlights. All test results are supported by relevant content (FAQs, informative videos, webinars) that guide patients in reviewing their results. This is an additional path to enhance communication and understanding between the provider and patients.

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Care360®

For mobile devices

Write lab orders, get results, make prescription requests (ePrescribing), view clinical notes and more, with Care360® Mobile for smart phones and tablets. Ideal for when you’re on-call or on the go, this free HIPAA-compliant application allows you to easily access your office anywhere, anytime. With Care360® Mobile, you have the flexibility and convenience to manage your caseload beyond the walls of your practice.

Lab ordering and results

• Send lab orders
• Receive and view new lab results
• Review result summaries and the actual Report of Record
• Mark reports as reviewed
• Add annotations to the report
• Review historical lab results

Prescribe Medications

• Review medication history*
• Add notes for follow-up and mark as reviewed*
• Write prescriptions (ePrescribe) and respond to renewal requests*
• Be alerted to interactions and contraindications*
• Find pharmacies*
• View tiered formulary*
• Access claims and pharmacy history*

Manage patient caseload

• View encounter notes, patient problems, comments and allergies*
• View all patient charts*
• Access, add and edit patient demographics

*Functionality will be available based on your Care360® subscription.
DLOlab.com provides a wealth of information for medical professionals, administrative personnel as well as patients. We encourage providers and support staff to take some time to familiarize themselves with the site. Training on all of DLO’s digital resources is provided during the on-boarding process.

1. Patient pages
2. Provider pages
3. DLO Direct
4. Virtual Test Guide
5. DLO Patient Service Center listings
6. Patient bill pay services
7. Care360® log-in
8. DLO Services offered to Providers
9. Quest’s Test Center
10. eInvoices
11. Directory of Services 2016-2017
12. Quest Diagnostics’ Test Center
13. Heath Resources
14. Patient FAQs
Navigation for Provider’s section
Testing Information
DLO Client Satisfaction Survey
Provider Tools and Resources
Testing page
Virtual Test Guide
Quest Diagnostics’ Test Center
Care360® Solutions

Connecting You to the Healthcare Landscape

Care360® connects healthcare organizations, community physicians and patients to improve access to information and insights that drive care delivery coordination. These connections result in better, more cost-efficient clinical outcomes.

With DLO, you can combine a cost-effective ambulatory EHR with structured data exchange and patient-engagement tools for physician loyalty, provider collaboration, and positive patient outcomes.

Access to additional Care360® Solutions is available to all DLO clients. The cost varies according to the services provided. Please ask your Account Executive for more information on all Care360® services.

MyQuest™ Patient Portal

Getting patients more engaged in their healthcare is a priority for many providers. The Centers for Medicare and Medicaid Services (CMS) lists patient engagement as part of the Meaningful Use requirements in the EHR Incentive program, and many of the industry initiatives such as Accountable Care Organizations (ACOs) and Patient Center Medical Homes (PCMH) encourage the use of Patient Portals to improve the health of their patients. Quest Diagnostics has made it easy for all practices, no matter what size, to engage with patients using Care360® EHR and the MyQuest™ Patient Portal.

The MyQuest Patient Portal enables providers and patients to stay connected using a secure, HIPAA compliant website.

Patients...Using the MyQuest Patient Portal

The MyQuest portal was designed to make it easy for patients to connect with all their Care360® EHR connected healthcare providers through one location.

- Receive a copy of the office visit notes, current medication list and lab results using a secure Direct message account.
- View, download or print their medical information
- Send secure messages to their doctor
- Share medical information with other doctors and family members who have a secure Direct mail address

Plus, MyQuest offers patients a companion mobile application for iPhones or Androids which allows them to set medication reminders, store “In Case of Emergency” information and much more.
GO FURTHER with DLO

Information Technology and Resources

DLO offers IT services and digital resources backed by the largest diagnostic medical laboratory in the United States.

- DLO, through Quest, has standard reference laboratory interfaces with the majority of laboratory information system (LIS) allowing faster implementation of a bi-directional interface.
  - Simplifies electronic test orders and results, improving test turnaround time
  - Increases accuracy by eliminating manual entries
- Care360® Labs & Meds supports physicians with a practical electronic lab ordering and results platform.
  - Cloud-based, so there’s no expensive equipment or on-site IT support needed.
  - Access records anytime, anywhere via the Internet, Care360® Mobile for smartphones or Care360® HD for the iPad.
- DLOlab.com provides health care providers and patients access testing information, billing and insurance portals and much more
  - Providers can access clinical testing requirements and information resources, log-in for Care360® and billing, on-line supply ordering and a variety of tools to allow ease of use. Providers and support staff can access these tools and services by going to DLOlab.com/provider.
  - Patients can find Patient Service Center locations, access lab results through MyQuest, gain information on insurance coverage and billing as well as research disease states and preventative measures.

Improving patient care with Care360® Labs & Meds

The Care360® Physician Portal provides on-line tools for tracking all of your patient records, appointments, and data (profiles including demographics, medication history, lab results over time, and other longitudinal information).* And there is also an easy-to-use patient communication section that can be accessed securely through one or more of our Health Management Service providers (GoogleHealth™, Keas™, and Microsoft® HealthVault™).

- Instant patient information management with electronic tracking
- More effective connection with patients through customized communications and wellness programs
- Patient/user-friendly technology keeps the sophistication of the system secure — simple to use and access

Take advantage of a new age of patient care and efficient management with Care360®. Ask your DLO representative or go to Care360®.com for more information.

*Care360® Labs & Meds meets all proposed Health Insurance Portability and Accountability Act (HIPAA) standards and protects patient information with 128-bit encryption and the services of Verisign™, an industry leader in system security verification.
Ordering Supplies

**With DLO, you’re good to GO**

Easily maintain practice inventory by submitting this user-friendly order form, with ample space for special instructions. Your DLO representative can provide you with easy-to-complete supply order forms.

**About this section**

This section will acquaint you with the specimen collection supply form.

- Care360® Labs and Meds
- On-line Supply Catalog
- DLO Supply Order Form

**Important Compliance Reminder**

Specimen collection devices supplied by DLO are to be used ONLY for the collection of specimens sent to DLO. Supplies provided by DLO may not be used for any testing or screening performed by you (including urine cups used for pre-screening) or for testing you send to any laboratory other than DLO.

**GO FURTHER with DLO**

Place and review your laboratory supply orders on-line with Care360® Labs & Meds. To learn more about how Care360® can increase practice efficiency and enhance quality of care, ask your DLO representative or go to Care360®.com.
DLO has several ways for clients to research the materials needed for testing, then submit an order. Every test included in the Virtual Test Guide lists a photo of preferred collection devices and the DLO Supply Order Number. The DLO website contains a complete catalog of testing supplies with the name, supply number and photo of the item.
Ordering with Care360®

Ordering Client Supplies

Order Supplies

1. Navigate to the page for ordering client supplies.

2. To change the client for which the supplies are being ordered, click the appropriate one in the Client list.

3. Do one or more of the following:
   a. To show a category of supplies, at Category, click the type of supplies to order. The page displays only items in that category.
   b. To search for a supply, at Search, type a few characters of the supply name, and then click Search. The page displays all items that contain that text.
   c. To browse through the supply list, click the arrows to go to the next, last, previous, or first page of the supply list.

4. To include any comments with your order, type them in the Comments box. You can optionally send comments without ordering any supplies (for example, to inquire about a supply that does not appear on the list).

5. In the Qty column, type the quantity of each item to order. Be sure to note the units in the Units column. For example, alcohol preps are packaged 200 per box. If you want 200 alcohol preps, you should type 1 in the Qty column rather than 200; otherwise, you would receive 200 boxes of 200 each.

6. Click Submit.

7. Do one or more of the following:
   - To add or remove items or comments, click Back and repeat steps 3–6.
   - To submit the order, click Order Now.

For help, contact the Help Desk at 1-800-699-9302.

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### Additional Ordering Options

In addition to ordering through Care360®, supplies can be ordered by submitting DLO’s user-friendly order form via fax or e-mail. Easily maintain practice inventory by submitting this user-friendly order form.

For the most up-to-date Supply Request Form, please visit the Supply Catalog on DLOlab.com or DLOlab.com/providers/tools-and-resources/provider-forms.

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**CLIENT SUPPLY REQUEST**

Client Name: ___________________________  Account #:_________________________

Date: ____________________  Ordered by: ________________________  Phone #: __________________

**Supply orders are processed daily. Expect delivery within 2-3 business days from the date the order was placed.**

**Orders received after 12:00:00 PM will be processed the next business day.**

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<td></td>
<td>Needle Holder Hubs (250/pk)</td>
</tr>
<tr>
<td>151538</td>
<td></td>
<td>Needle Holder Hubs (50/pk)</td>
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<td>Needle Holder Hubs (50/pk)</td>
<td>151538</td>
<td></td>
<td>Needle Holder Hubs (50/pk)</td>
</tr>
</tbody>
</table>

Fax: (405) 608-6135  Email: DLOClientSupply@questdiagnostics.com

Due to federal regulations, we are able to provide only those supplies needed for collection and transportation of specimens being referred to DLO for testing. Backordered items will automatically be delivered when they become available.
Addendum

With DLO, you’re good to GO

DLO’s primary focus is to make sure that our clients have the most up-to-date information and tools needed to provide the best care for the patients.

About this section

This section will provide additional information which is more likely to be updated or changed. Pages include:

- Glossary of acronyms and common laboratory terms
- Sample DLO Requisitions
- Listing of commonly used CPT Codes
- DLO Patient Service Center listing
- DLO Supply Request Form
# Glossary of Terms

## Acronyms

<table>
<thead>
<tr>
<th>Commonly used by DLO</th>
<th>Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABN  Advanced Beneficiary Notice</td>
<td>BAL  Bronchial Alveolar Lavage</td>
</tr>
<tr>
<td>AWN  Advanced Written Notice</td>
<td>C&amp;S  Culture and Sensitivity</td>
</tr>
<tr>
<td>CAP  College of American Pathologists</td>
<td>CSF   Cerebrospinal Fluid</td>
</tr>
<tr>
<td>CLIA Clinical Laboratory Improvement Amendments</td>
<td>DFA Direct Fluorescent Antibody</td>
</tr>
<tr>
<td>CPT  Current Procedural Terminology</td>
<td>EDTA Ethylenediaminetetraacetic acid</td>
</tr>
<tr>
<td>DX  Diagnosis</td>
<td>EIA  Enzyme Immunoassay</td>
</tr>
<tr>
<td>EHR  Electronic Health Records</td>
<td>HIV Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>EMR  Electronic Medical Records</td>
<td>HPV Human Papilloma Virus</td>
</tr>
<tr>
<td>ICD  International Classification of Disease</td>
<td>HSV Herpes Simplex Virus</td>
</tr>
<tr>
<td>LIS  Laboratory Information System</td>
<td>MIF Merthiolate Iodine Formalin</td>
</tr>
<tr>
<td>MLCP Medicare Limited Coverage Policies</td>
<td>NP Nasopharyngeal</td>
</tr>
<tr>
<td>PSC  Patient Service Center</td>
<td>PCR  Polymerase Chain Reaction</td>
</tr>
<tr>
<td>RSR  Route Service Representative</td>
<td>PDM  Prescription Drug Monitoring</td>
</tr>
<tr>
<td>TIQ  Test In Question</td>
<td>SAF  Sodium Acetate Formalin</td>
</tr>
<tr>
<td>TNP  Test Not Performed</td>
<td>TMA  Transcription Medicated Amplification</td>
</tr>
<tr>
<td>VTG  Virtual Test Guide</td>
<td>WHP  Women’s Health Panel</td>
</tr>
<tr>
<td></td>
<td>V-C-M  Virus, Chlamydia, Mycoplasma</td>
</tr>
<tr>
<td></td>
<td>Zn-PVA Zinc-Polyvinyl alcohol</td>
</tr>
</tbody>
</table>
DLO Requisition Samples

Panel Components Are Listed On The Back. Each Sample Should Be Listed With At Least Two Patient Identifiers At Time Of Collection.

Panel Components On Back: Panel Components are listed on the back. Reference tests are performed at an additional charge.

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ICD Codes (enter all that apply)

BILL TO: [My Account, Insurance Provided, Lab Card/Select, Patient]

PRINT PATIENT NAME (LAST, FIRST, MIDDLE)

TOTAL VOLS.

TOTAL TESTS

ADDIT'L PHYS.: Dr. [Name]

NON-PHYSICIAN PROVIDER: [Name] I.D.#

SAMPLE

LABORATORY

NOTE: When ordering ‘Panel Components,’ refer to the back of the form for detailed information.

DIAGNOSTIC TESTS

BLOOD

Hematology

- Hemoglobin, Hct, RBC, WBC, Platelets
- Thrombocytopenia
- Iron, Ferritin
- Thyroid Stimulating Hormone, Total, Labile

Hepatic Tests

- AST, ALT
- Alkaline Phosphatase, Total

Liver Function

- ALT, AST
- GGT, Bilirubin, Direct

Renal Function Tests

- Creatinine, Calcium, Uric Acid
- Electrolytes, BUN
- Glucose, Lipid Panel

Blood Typing

- Hb, Hct
- WBC, platelets

Platelet Function

- PFA-100

Thrombocytopenia

- WBC, platelets

Coagulation Studies

- PT, aPTT
- Factor 1, 2, 4, 5, 8, 10

Vitamin D Testing

- 25-Hydroxyvitamin D, LC/MS/MS (<3 yrs)

Urinalysis

- Microalbumin, Random Urine with Creatinine
- UA, Complete (dipstick & microscopic)

Metabolic Panels

- Lipid Panel
- Renal Functional Panel
- Lipid Panel

Cardiovascular Risk

- Cardiac Markers
- Troponin I

Neurological Tests

- Electrolytes, CSF
- Glucose, Protein

Cancer Markers

- CA 125
- CA 15-3

Neuroendocrine Panel

- ACTH
- Cortisol

Hormone Status

- Estrogen, Progesterone
- Androgens

Gastrointestinal Tests

- Fecal Microbiota Composition
- Fecal Bacteria Identification

Malignancy Markers

- CA 125
- CA 15-3

Hiv & Hepatitis Panel

- HIV-1/2 AG/AB, 4th w/Reflex Titer
- Hepatitis B Surface Ag w/Reflex Confirm
- Hepatitis B Surface Ab Qual

Miscellaneous Tests

- Alanine Transaminase
- Alkaline Phosphatase

Histoplasmosis

- Histoplasmosis, Serum

Yersinia Testing

- Yersinia Testing

Other Tests

- Electrolyte Panel
- Urea Nitrogen (BUN)
- Creatinine

TOTAL TESTS

MEDICARE LIMITED COVERAGE

CODES THAT MAY NOT BE COVERED

- F = has prescribed frequency rules for coverage.
- B = may not be covered for the reported diagnosis.
- G = has both diagnosis and frequency-related coverage limitations.
- H = has both diagnosis and frequency-related coverage limitations.

EXCEPT FOR THE FOLLOWING:

- HIV & Hepatitis Panel
- Hepatitis B Surface Ag
- Hepatitis B Surface Ab
- Histoplasmosis, Serum

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For any patient of any payer (including Medicare and Medicaid), only order those tests which are medically necessary for the diagnosis and treatment of the patient.

Additional Tests (include complete test name and order code)

Reflex tests are performed at an additional charge.

For any patient of any payer (including Medicare and Medicaid), only order those tests which are medically necessary for the diagnosis and treatment of the patient.

Optional Testing

- Serum Glucose, 100g Oral Glucose Tolerance Test
- ADH, Plasma

Laboratory Close-Out

- UA, Dipstick w/Reflex Microscopic
- UA, Complete (dipstick & microscopic)

Other Tests

- Electrolyte Panel
- Urea Nitrogen (BUN)
- Creatinine

TOTAL TESTS

* Additional charge for ID and Susceptibilities

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Reflex Tests Are Performed At An Additional Charge.

Each Sample Should Be Labeled With At Least Two Patient Identifiers At Time Of Collection.

**DID YOU KNOW**

With At Least Two Patient Identifiers

Each Sample Should Be Labeled

Reflex Tests Are Performed At An Additional Charge.

Each Sample Should Be Labeled With At Least Two Patient Identifiers At Time Of Collection.

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With At Least Two Patient Identifiers

Each Sample Should Be Labeled

Reflex Tests Are Performed At An Additional Charge.

Each Sample Should Be Labeled With At Least Two Patient Identifiers At Time Of Collection.
INHERITED CANCER RISK TESTING

BILL TO: [Box to be checked]
- My Account
- Insurance Provided
- Lab Card/Select
- Patient

PRINT PATIENT NAME (LAST, FIRST, MIDDLE)

REGISTRATION # (IF APPLICABLE)

DATE OF BIRTH

IMPORTANT! THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY.

DEMOGRAPHIC INFORMATION

NAME

DATE OF BIRTH

SEX

ZIP

SPOUSE

DEPENDENT

TIME

SMOOTHSEAL®

SPECIMEN KEY ON BACK SPECIMEN KEY ON BACK

Report to:

Duplicate

Send

Print Results on Request

SIGNATURE REQUIRED

confirm that the person listed in the Ordering Physician space above is authorized by law to order the test(s) requested herein.

I, [Patient’s Name], understand that each test reports upon one or more genes / syndromes / disorders and the results will be used in the medical management and treatment decisions for the patient. I have performed. I further confirm that this test is medically necessary for the diagnosis or detection of disease, illness, impairment, symptom, syndrome, or disorder and the results will be used in the medical management and treatment decisions for the patient. I understand that the person listed in the Ordering Physician space above is authorized by law to order the test(s) requested herein.

I authorize Quest Diagnostics (Quest) to release information received, including, without limitation, medical information, which may be protected by law, to another laboratory or other person for the purpose of providing the services ordered. A test or service performed with research/experimental kit.

Signature

Date

Medicare Limited Coverage Tests

- = May not be covered for the reported diagnosis.
- = Has prescribed frequency rules for coverage.
& = Has both diagnosis and frequency-related coverage limitations.
F = A test or service performed with research/experimental kit.

ICD CODES (ENTER ALL THAT APPLY)

ICD Diagnosis Codes are Mandatory.

RISK TESTING

Non Fasting

Fasting

REFLEX TESTING

ICD Diagnosis Codes are Mandatory.

STATEMENT OF MEDICAL NECESSITY AND INFORMED CONSENT

[Box to be checked]

- AUTHORIZATION FOR GENETIC TESTING

EQUIRED SIGNATURES

MENTION OF MEDICAL NECESSITY AND INFORMED CONSENT

[Box to be checked]

- AUTHORIZATION FOR GENETIC TESTING

have supplied information to the patient regarding genetic testing and the patient has given consent for genetic testing to be performed. I further confirm that this test is medically necessary for the diagnosis or detection of disease, illness, impairment, symptom, syndrome, or disorder and the results will be used in the medical management and treatment decisions for the patient. I attest that the person listed in the Ordering Physician space above is authorized by law to order the test(s) requested herein.

Signature

Date

If you have questions regarding this order, please call 888.GENE.INFO

Many payers (including Medicare and Medicaid) have medical necessity requirements. You should only order those tests which are medically necessary for the diagnosis and treatment of the patient.
### Prescription Drug Monitoring without MedMATCH

**Panel Components Are Listed On The Back**
**Reflex And Confirmation Tests Are Performed At An Additional Charge**
**Each Sample Should Be Labeled With At Least Two Patient Identifiers At Collection.**

**See reverse for profile components.**

#### Drug/Drug Class

<table>
<thead>
<tr>
<th>Screen</th>
<th>Test Code</th>
<th>Qualitative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Metabolites</td>
<td>16910</td>
<td>16217</td>
</tr>
<tr>
<td>Amphetamines</td>
<td>92222</td>
<td>91589</td>
</tr>
<tr>
<td>Amphetamines d/l Isomers</td>
<td>92223</td>
<td>92483</td>
</tr>
<tr>
<td>Barbiturates</td>
<td>92224</td>
<td>91692</td>
</tr>
<tr>
<td>Benzodiazepines</td>
<td>92225</td>
<td>91601</td>
</tr>
<tr>
<td>Buprenorphine</td>
<td>92226</td>
<td>916213</td>
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<tr>
<td>Carisoprodol</td>
<td>92227</td>
<td>91691</td>
</tr>
<tr>
<td>Cocaine Metabolite</td>
<td>92228</td>
<td>916916</td>
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<tr>
<td>Fentanyl</td>
<td>92229</td>
<td>916917</td>
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<tr>
<td>Gabapentin</td>
<td>92230</td>
<td>91692</td>
</tr>
<tr>
<td>Heroin Metabolite</td>
<td>92231</td>
<td>916918</td>
</tr>
<tr>
<td>Methadone Metabolite (EDDP)</td>
<td>92232</td>
<td>916919</td>
</tr>
<tr>
<td>Methamphetamine d/l isomers</td>
<td>92233</td>
<td>916920</td>
</tr>
<tr>
<td>Methylphenidate</td>
<td>92234</td>
<td>916921</td>
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<tr>
<td>Mepiprideline</td>
<td>92235</td>
<td>916922</td>
</tr>
<tr>
<td>Methadone Metabolite (EDDP)</td>
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<td>916923</td>
</tr>
<tr>
<td>Methamphetamine d/l isomers</td>
<td>92237</td>
<td>916924</td>
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<tr>
<td>Oxycodone</td>
<td>92238</td>
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<td>Phencyclidine</td>
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<td>Pregabalin</td>
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<td>Propoxyphene</td>
<td>92241</td>
<td>916928</td>
</tr>
<tr>
<td>Tapentadol</td>
<td>92242</td>
<td>916929</td>
</tr>
<tr>
<td>Tramadol</td>
<td>92243</td>
<td>916930</td>
</tr>
<tr>
<td>Tricyclic Antidepressants</td>
<td>92244</td>
<td>916931</td>
</tr>
</tbody>
</table>

**Special Codes**

- S = screen  S,C = Screen, reflex to confirmation  S,C, I = Screen, reflex to confirmation, d/l isomers

**Prescription Drug Monitoring Consultation Hotline 877-40-RX-TOX (877-407-9869)**

---

**DIAGNOSTIC LABORATORY OF OKLAHOMA**

800.891.2917 • www.dlolab.com

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---

**Additional Information:**

- For any patient of any payer (including Medicare and Medicaid), only order those tests which are medically necessary for the diagnosis and treatment of the patient.

---

**Labels:**

- Sample: 800.891.2917 SPECIMEN KEY ON BACK
### Special Instructions: One Specimen and One Panel per Requisition.

**Panels for Women and Men**

<table>
<thead>
<tr>
<th>Panel Code</th>
<th>Description</th>
<th>Acceptable Specimen</th>
<th>PLEASE CIRCLE SPECIMEN TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>95198</td>
<td><em>Women's Health Panel - 15:1</em> Atopobium vaginae, Candida albicans, Candida glabrata, Candida krusei, Candida parapsilosis, Candida tropicalis, Chlamydia trachomatis, Gardnerella vaginalis, Herpes Simplex Virus Types 1 &amp; 2, Mycoplasma genitalium, Mycoplasma hominis, Neisseria gonorrhoeae, Trichomonas vaginalis, Ureaplasma urealyticum</td>
<td>Endocervical Swab</td>
<td>Urethral Swab</td>
</tr>
<tr>
<td>95621</td>
<td><em>Candidiasis Panel</em> Candida albicans, Candida glabrata, Candida krusei, Candida parapsilosis, Candida tropicalis</td>
<td>Endocervical Swab</td>
<td>Urethral Swab Men Only</td>
</tr>
<tr>
<td>95848</td>
<td><em>STD 5 Panel</em> Chlamydia trachomatis, Herpes Simplex Virus Types 1 &amp; 2, Neisseria gonorrhoeae, Trichomonas vaginalis</td>
<td>Endocervical Swab</td>
<td>Urethral Swab Men Only</td>
</tr>
<tr>
<td>95176</td>
<td><em>Bacterial Vaginosis Panel</em> Atopobium vaginae, Gardnerella vaginalis, Mycoplasma hominis, Mycoplasma genitalium, Ureaplasma urealyticum</td>
<td>Urine (STD)</td>
<td>Vaginal Swab</td>
</tr>
<tr>
<td>95618</td>
<td>Group B Streptococcus (GBS) Streptococcus agalactiae</td>
<td>Rectal Swab</td>
<td>Vaginal Swab</td>
</tr>
<tr>
<td>95619</td>
<td>GBS with sensitivities <strong>USE ONLY FOR PATIENTS WITH PENCILLIN ALLERGY</strong></td>
<td>Rectal Swab</td>
<td>Vaginal Swab</td>
</tr>
</tbody>
</table>

**ICD Codes (enter all that apply)**

**Important! This Form Must Be Filled Out in Its Entirety.**

Reflex tests are performed at an additional charge.

Each sample should be labeled with at least two patient identifiers at time of collection.

ICD Diagnosis Codes are Mandatory. Fill in the applicable fields below.

---

DID YOU KNOW

* Medical Records May Be Requested to Support Diagnosis Code for Test(s) Ordered

Many payers (including Medicare and Medicaid) have medical necessity requirements. You should only order those tests which are medically necessary for the diagnosis and treatment of the patient.
**TEM-PCR® Diagnostic Differential Panels**

<table>
<thead>
<tr>
<th>Diagnostic Differential Panels</th>
<th>Acceptable Specimen</th>
<th>PLEASE CIRCLE SPECIMEN SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>@ 95052 Bacterial Pneumonia Panel</td>
<td>Bronchial Aspirate</td>
<td>Nasopharyngeal Aspirate/Wash</td>
</tr>
<tr>
<td></td>
<td>Sputum Specimen Swab</td>
<td>Nasopharyngeal Swab</td>
</tr>
<tr>
<td>95045 Gastrointestinal Panel</td>
<td>Rectal Swab</td>
<td>Stool Specimen</td>
</tr>
<tr>
<td>95048 Infectious Disease Panel</td>
<td>General Swab</td>
<td>Synovial Fluid</td>
</tr>
<tr>
<td>@ 96411 Necrosis Panel</td>
<td>General Swab</td>
<td>Other:</td>
</tr>
<tr>
<td>@ 95049 Respiratory Infection Panel</td>
<td>Bronchial Aspirate</td>
<td>Nasopharyngeal Aspirate/Wash</td>
</tr>
<tr>
<td></td>
<td>Sputum Specimen Swab</td>
<td>Nasopharyngeal Swab</td>
</tr>
<tr>
<td>@ 95852 Skin and Soft Tissue Panel</td>
<td>General Swab</td>
<td>Other:</td>
</tr>
<tr>
<td>@ 95047 Staphylococcus Differentiation Panel</td>
<td>General Swab</td>
<td>Nasopharyngeal Aspirate/Wash</td>
</tr>
<tr>
<td></td>
<td>Source:</td>
<td>Nasopharyngeal Swab</td>
</tr>
<tr>
<td>58753 Viral Respiratory Panel</td>
<td>Bronchial Aspirate</td>
<td>Nasopharyngeal Aspirate/Wash</td>
</tr>
<tr>
<td></td>
<td>Sputum Specimen Swab</td>
<td>Nasopharyngeal Swab</td>
</tr>
</tbody>
</table>

**Special Instructions:** One Specimen and One Panel per Requisition.

Specimens for TEM-PCR® testing must be collected using TEM-PCR® Swab Kit, #9001285. Specimens submitted using any other swab will not be processed. Please contact DLO Client Supply to order collection kit.
Non-Invasive Prenatal Screening

800.891.2917 • www.dlolab.com

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### HISTOLOGY REQUEST

**TISSUE PATHOLOGY AND NON GYN CYTOLOGY TEST OFFERINGS**

<table>
<thead>
<tr>
<th>Specimen (Sources)</th>
<th>Procedure (excision, cone, punch, shave, etc.)</th>
<th>Spec# &amp; Anatomy #</th>
<th>Pre-Op Dx (duration, size, impression, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
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<tr>
<td>3</td>
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<tr>
<td>4</td>
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<tr>
<td>5</td>
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</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**GYNECOLOGIC TISSUE BIOPSY HISTORY**

<table>
<thead>
<tr>
<th>LMP:</th>
<th>PREVIOUS BIOPSY NO.</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**NON-GYNECOLOGIC TISSUE BIOPSY HISTORY**

<table>
<thead>
<tr>
<th>PREVIOUS PAP ACCESSION NO.</th>
<th>ACCESSION NO.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Clinical History:**

- Affixed Label

---

Note: These offerings may require special studies, markers, or stains as deemed appropriate for proper evaluation by the AmeriPath Pathologist. These additional tests may result in additional charges.