

PT. NO.		
PT NAME (Last, First)		
PT D.O.B.		
ORDERING PHYSICIAN		NPI #
PHONE #		
SPECIMEN SITE DESCRIPTION		
DATE & TIME COLLECTED		<input type="checkbox"/> AM <input type="checkbox"/> PM
SENDER SPECIMEN #		
COMMENTS		
Is patient immunocompromised? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
ICD/DIAGNOSIS		
SEND REPORT TO (Hospital, Clinic, Physician)		
TELEPHONE		
EMAIL		
FAX		
Referring institution will be billed if the insurance company is located outside the state of Washington.		
BILLING ADDRESS		
CITY	STATE	ZIP
TELEPHONE		
RETURN FORMALIN-FIXED PARAFFIN EMBEDDED TISSUE TO:		
Send sample to: Attention: Molecular Diagnosis Specimen Processing, NW220 University of Washington Medical Center 1959 NE Pacific Street Seattle, WA 98195-7110 Phone: (206) 520-4600 or 800-713-5198		

CLINICAL LAB REQUEST

UW MEDICINE
REFERENCE LABORATORY SERVICES

UW LAB ACC. #	
LOGGED IN	PROCESSED BY:

Molecular Microbiology

1. Completely fill in left section and use a separate request form for each specimen type submitted.
2. For unlisted tests - call Reference Laboratory Services (206) 520-4600 or (800) 713-5198.
3. Website: <http://depts.washington.edu/molmicdx> Email: molmicdx@uw.edu

NOTE: When ordering tests for which Medicare reimbursement will be sought, physicians should only order tests which are medically necessary for diagnosis or treatment of the patient. You should be aware that Medicare generally does not cover routine screening tests, and will only pay for tests that are covered by the program and are reasonable and necessary to treat or diagnose the patient.

Testing on Direct Patient Specimens

For solid tissue, please note that we do not process more than 1 cubic cm. Submit only the portion of the specimen with the greatest diagnostic potential. Fresh specimens are recommended when possible, but we also accept formalin fixed paraffin embedded tissue. Fresh samples should be submitted frozen on dry ice. Due to the presence of normal microbiota, not all specimens are acceptable for broad-range PCR. Please refer to our website for more information on our tests, acceptable specimens and an updated order form, <http://depts.washington.edu/molmicdx>.

Please submit one specimen per order form. If multiple specimen "aliquots" are submitted, we will pool them, unless otherwise indicated. If multiple FFPE blocks are submitted from the same body site with an order form, shavings from a maximum of 2 PET blocks will be combined for testing.

BROAD-RANGE PCR

- AFB
 Bacteria (reflex to NGS16S when multiple templates are present)
 Standard Bacterial PCR only (not recommended)
 Fungi

NTMPPCR, TBCPCR
BCTPCR (NGS16S)
BCTPCR
FUNPCR

Next Generation Sequencing

- Bacteria (reflex to NGS16S for poly-microbial specimens with amplifiable template)

BCTPCR (NGS16S)

PATHOGEN-SPECIFIC PCR

Requests for pathogen-specific PCRs, not listed below, will be reflexively tested by the corresponding Broad-range PCR, if applicable.

Bacteria

- Bartonella PCR - Tissue
 Legionella PCR
 Tropheryma whipplei
 Mycoplasma, Respiratory ¹
 Mycoplasma, Genital ²
 Mycoplasma, Miscellaneous ^{1,2}
¹ Detects M. pneumoniae ² Detects M genitalium, M. hominis, U. urealyticum, U. parvum

BRTPCR
LEGPPCR
TWHPCR
MPNPCR
GUMPCR
MSMPCR

AFB

- Mycobacterium tuberculosis Complex PCR
 *Nontuberculous Mycobacteria (AFB other than MTB Complex) PCR
 *Sputum is not acceptable for NTMPPCR
 Mycobacterium avium complex PCR (MAVPCR is included in NTMPPCR testing)

TBCPCR
NTMPPCR
MAVPCR

Fungi

- Aspergillus PCR (detects A. fumigatus) - BAL*
 Aspergillus PCR (detects A. fumigatus) - Tissue*
 Zygomycete PCR*
 Histoplasma PCR*
 Cryptococcus PCR (detects C. neoformans and C. gattii)*
 Coccidioides PCR*
 Pneumocystis PCR*

ASPPCR
ASPTIS
ZGMPCR
HISPCR
CRYPPCR
COCPPCR
PNEPCR
(FUNPCR)

*If negative, do you want broad-range PCR for fungi (for normally sterile sites & BAL only) YES NO

Parasites

- Toxoplasma PCR

TOXPCR

Testing on Cultured Organisms

ORGANISMS IDENTIFIED BY DNA SEQUENCE-BASED METHODS:

- AFB Sequencing Stain result _____
 Bacterial Sequencing Stain result _____
 Fungal Sequencing

AFBSEQ
BCTSEQ
MLDSEQ/YSTSEQ

DETECTION OF SPECIFIC GENES

- mecA gene

MECPCR

STRAIN TYPING

- Bacterial Strain Typing by Whole Genome Sequencing
 MRSA Typing by spa and VNTR analysis

NGSTYP
MRSATP

Other Requests

CMS MEDICAL NECESSITY INFORMATION

It is our policy to provide health care providers with the ability to order only those lab tests medically necessary for the individual patient and to ensure that the convenience of ordering standard panels and custom profiles does not impact this ability. While we recognize the value of this convenience, indiscriminate use of panels and profiles can lead to ordering tests that are not medically necessary. Therefore, all tests offered in our panels and profiles can be ordered individually as well. If a component test is not listed individually on the request form, it may be written in the "OTHER REQUESTS" box. We encourage you to order individual tests or a less inclusive profile when not all of the tests included in the panel or profile are medically necessary for the individual patient.

Medicare Billing Information

Medicare billing policy prevents us from submitting a Medicare claim for laboratory testing referred to us on hospital inpatients or hospital outpatients. For these samples, we will bill the sending location.