



Bitterroot Health

1200 Westwood Drive, Hamilton, MT 59840
(406) 363-2211 Ext. 4428,4429 • FAX 375-4490

LAB ORDER REQUISITION

Outpatient Hours

Monday-Friday

7:30 – 5:00

Saturday & Sunday

8:00 – 2:00

PATIENT INFORMATION				
Last Name	First Name	MI	Birthdate	Sex
Mailing Address				Apt #
City		State		Zip
Soc. Sec. #			Phone	

SPECIMEN INFORMATION	
<input type="checkbox"/> STAT	<input type="checkbox"/> ROUTINE <input type="checkbox"/> FASTING
COLLECTION DATE	_____
TIME	_____
ORDERING LOCATION:	_____
PHONE: _____	FAX: _____

Please mark the test(s) you are requesting with an "X" and provide an ICD10 Code/DX. The following is a partial list of tests available. Please contact the laboratory for further information.

PHYSICIAN'S SIGNATURE	DATE	TIME
	_____	_____

CPT	X	ICD10	TEST	CPT	X	ICD10	TEST	CPT	X	ICD10	TEST	
			Acetaminophen (Tylenol)				Lithium	URINALYSIS TESTING				
			Albumin				Magnesium	81002			Urine (Dipstick only)	
			Alcohol (ETOH)	82044			Microalbumin Screen (urine)	81000			UA (w/Microscopic if indicated)	
			ALT	86308			Mono Screen				UA reflex (w/microscopic & culture if indicated)	
			Amylase	82270			Occult Blood Stool	81015			Urine (Microscopic only)	
			ANA				Phenytoin (Dilantin)	24 HOUR URINE TESTING				
			ANA w/reflex				PTH LC				24 Hour volume	
			AST				PKU				Creatinine Clearance HT ___ WT ___	
			B12				Potassium				Microalbumin LC	
			Bilirubin Baby				Pregnancy Test				Total Protein	
84520			BUN	84703			Serum	MICROBIOLOGY (Specify Source)				
			CA125 LC	81025			Urine				Culture and Sensitivity if indicated	
82310			Calcium				Prolactin LC	Source			Time of Collection _____	
			Carbamazepine (Tegretol)				PSA (Prostate Specific Antigen)				Aerobic Culture & sensitivity if indicated	
85025			CBC w/auto diff				PSA Screen	Source			Time of Collection _____	
85007/85027			CBC w/man diff if indicated				PT (Prothrombin time)/INR				AFB LC	
			CEA LC				PTT				C. Difficile	
86900			Cord blood (Group,Type,DAT)				Reticulocyte Count				CHLAMYDIA / GC PCR	
82565			Creatinine				Rheumatoid Factor				Fecal Fat LC	
			CRP				RPR				Fungus LC	
			D Dimer				Rubella				Giardia/Crypto Stool	
			Digoxin (Lanoxin)				Salicylate (Aspirin)				Gram Stain	
			Estradiol LC	85652			Sed Rate (ESR)				Group B Strep Screen - OB	
			Ferritin				Sodium				Helicobacter Pylori Stool	
			FSH LC				T3RIA (Total T3) LC				Herpes Culture LC	
			Free and Total Testosterone LC				T4 (Free)				Influenza A & B	
			FT3				TSH Ultrasensitive	87220			KOH	
82950			Gest. Diabetic Screen (1hr, 50gr)				Uric Acid				Leukovue Stool	
82947			Glucose, Fasting				Urine Drug Screen				Ova and Parasites LC	
82947			Random				Valproic Acid (Depakene)				RSV (Resp. Sync. Virus - NP Swab only)	
			2 HPP				Vit D				SARS-CoV-2 single	
			Glucose Tolerance				CARDIAC TESTING					
82951			Gestational (3 hr, 100 gr)				CPK (Total)				Ag: _____	
			Diabetic (2 hr, 75 gr)				Do MB if total elevated CPK (MB)				(NAAT): _____	
			Group & type				Pro BNP				PCR: _____	
			Grp,typ,Abs Hold # Units				Troponin	87880			Viral Panel (SARS/FLU/RSV) by PCR	
			Grp,typ,Abs Cross # Units				PANELS (See reverse for complete description)					
			HCG Quantitative				Acute Hepatitis Panel LC				Strep Screen(Rapid GRP A)	
85027			Hemogram				Basic Metabolic Panel	87210			Back up cult. if screen neg.	
			Hgb A1C				Comprehensive Metabolic Panel				Virus Culture (Source _____)LC	
85018/85014			Hgb/Hct				Electrolyte Panel				Wet Prep (Trich)	
			HIV Antibody Screen				Hepatic Function Panel				BODY FLUIDS	
			Homocysteine LC				Iron Panel				CSF Analysis	
			Iron				Lipid Panel				Cell Count, Protein, Glucose)	
			Lactate				OB (Prenatal) Panel				Body Fluid Analysis	
			LH (Luteinizing Hormone) LC				Renal Function Panel				Source _____	
											Chemistries (please specify):	
											Crystals	

ADDITIONAL ORDERS:

X	ICD10	TEST	X	ICD10	TEST	Comments:
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

62277001(07/13)

**ORDER ONLY IF ALL TESTS WITHIN THE PANEL ARE MEDICALLY NECESSARY,
OTHERWISE, ORDER TESTS INDIVIDUALLY.**

BASIC METABOLIC PANEL [80048]

Anion Gap (calc.)
Calcium (82310)
Carbon Dioxide (82374)
Chloride (82435)
Creatinine (82565)
Glucose (82947)
Osmol (calc.)
Potassium (84132)
Sodium (84295)
Urea Nitrogen (84520)

COMP METABOLIC PANEL [80053]

A/G Ratio (calc.)
Albumin (82040)
Bilirubin T (82247)
Calcium (82310)
Carbon Dioxide (82374)
Chloride (82435)
Creatinine (82565)
Globulin (calc.)
Glucose (82947)
Alk Phos (84075)
Potassium (84132)
Protein T (84155)
Sodium (84295)
ALT, SGPT (84460)
AST, SGOT (84450)
Urea Nitrogen (84520)

ELECTROLYTE PANEL [80051]

Anion Gap (calc.)
Carbon Dioxide (82374)
Chloride (82435)
Potassium (84132)
Sodium (84295)

HEPATIC FUNCTION PANEL [80076]

Albumin (82040)
Bilirubin Total (82247)
Bilirubin Direct (82248)
Alk Phos (84075)
Protein, total (84155)
ALT, SGoT (84450)
ALT, SGpT (84460)

ACUTE HEPATITIS SCREEN [80074]

Hepatitis B surface Ag (87340)
Hepatitis B core Ab (IgM) (86705)
Hepatitis A Ab (IgM) (86709)
Hepatitis C Ab (IgM) (86803)

LIPID PANEL [80061]

Cholesterol (82465)
Triglyceride (84478)
HDL (83718)
LDL (calc.)
Chol/HDL (calc.)

OB (PRENATAL) PROFILE [80055]

CBC (85025)
Blood Typing.ABO (86900)
Blood Typing.Rh (86901)
Antibody Sen (86850)
Rubella Sc11 (86762)
RPR (86592)
Hepatitis B s Ag (87340)

RENAL FUNCTION PANEL [80069]

Albumin (82040)
Calcium (82310)
Carbon Dioxide (82374)
Chloride (82435)
Creatinine (82565)
Glucose (82947)
Phosphorus (84100)
Potassium (84132)
Sodium (84295)
Urea Nitrogen (84520)