

PATIENT NAME: NOT REQUIRED WITH ADT LABEL		PATIENT LOCATION:
UCSF MRN: NOT REQUIRED WITH ADT LABEL		APeX ADT LABEL
DOB: (mm/dd/yyyy)	SEX:	

**UCSF STAT TEST DOWNTIME
REQUISITION – MAIN LAB**

Ordering Provider*:	Authorizing Provider:	Fax Number:
SPECIMEN INFORMATION:		
Collection Date:	Collection Time:	Collected By:
Specimen Source/Type:	ICD-10 Dx Codes (Outpatients Only):	Additional Collection Instructions:

MEDICAL NECESSITY AND ICD-10 CODES: Medicare (and, increasingly, other insurers) will only pay for services that are reasonable and necessary for the diagnosis and treatment of the patient. The physician must specify an ICD-10 diagnostic code to indicate the medical necessity of each test requested. Medicare and other carriers may not pay for screening tests or tests that are not FDA-approved. If there is reason to believe that a carrier will not pay for a test, the patient should be informed and asked to sign an Advanced Beneficiary Notice (ABN) indicating acceptance of responsibility for the cost of the test if the carrier denies payment.

LAB#	TEST NAME	CONTAINER	LAB#	TEST NAME	CONTAINER	LAB#	TEST NAME	CONTAINER	LAB#	TEST NAME	CONTAINER
HEMATOLOGY TESTS:			6167	☐ Basic Metabolic Panel, Fasting	LtGrn	82	☐ Glucose, Nonfasting	LtGrn	40	☐ Vancomycin	LtGrn
294	☐ Complete Blood Count (CBC)	Lav-3	52	☐ Bilirubin, Direct	LtGrn	4541	☐ HCG Serum Pregnancy	LtGrn	OTHER FREQUENTLY ORDERED TESTS:		
293	☐ CBC with Differential	Lav-3	50	☐ Bilirubin, Total	LtGrn	LC703	☐ Hepatic Function Panel	LtGrn			
296	☐ Reticulocyte Count	Lav-3	3012	☐ B-Type Natriuretic Peptide	Lav-3	9000	☐ LDL Cholesterol, Direct	LtGrn	15009	☐ Blood Culture (Add Spec Source)	BCA X2
322	☐ Sedimentation Rate	Lav-3	54	☐ Calcium Ionized	LtGrn	99	☐ Lipase	LtGrn	520	☐ Gram Stain (Add Type and Source)	SterileCon
320	☐ PT/INR	LtBlu-2.7	53	☐ Calcium Total	LtGrn	103	☐ Magnesium	LtGrn	4053	☐ Cell Count and Diff, CSF	SterileCon
325	☐ aPTT	LtBlu-2.7	55	☐ Carbon Dioxide w/Anion Gap	LtGrn	107	☐ Osmolality, Serum	Gold	4052	☐ Cell Count and Diff, Body Fluid	SterileCon
314	☐ Fibrinogen	LtBlu-2.7	59	☐ Chloride	LtGrn	113	☐ Phosphorus	LtGrn	347	☐ Urinalysis	SterileCon
3075	☐ Fibrin D-Dimer	LtBlu-2.7	101	☐ Cholesterol, HDL	LtGrn	114	☐ Potassium	LtGrn	348	☐ Urinalysis with Microscopy	SterileCon
317	☐ Anti-Xa (Heparin Level)	LtBlu-2.7	149	☐ C-Reactive Protein	LtGrn	118	☐ Protein, total	LtGrn	6191	☐ Urinalysis w/Reflex to Culture	SterileCon
CHEMISTRY TESTS:			6170	☐ Comp Metabolic Panel, Nonfasting	LtGrn	122	☐ Sodium	LtGrn	5098	☐ Urine Culture	SterileCon
			64	☐ Creatine Kinase MB Fraction	LtGrn	3004	☐ Tacrolimus	Lav-3	11170	☐ HCG Urine Pregnancy	SterileCon
123	☐ Alanine Transaminase (ALT)	LtGrn	62	☐ Creatine Kinase Total	LtGrn	3019	☐ Testosterone, Total	LtGrn	384	☐ Creatinine, Random Urine	SterileCon
45	☐ Albumin	LtGrn	3001	☐ Creatinine	LtGrn	5445	☐ Tobramycin	LtGrn	3027	☐ Total Protein, Urine	SterileCon
112	☐ Alkaline Phosphatase (ALKP)	LtGrn	874	☐ Cyclosporine A Level	Lav-3	133	☐ Transferrin	LtGrn	ADDITIONAL TESTS:		
47	☐ Ammonia	LtGrn	3000	☐ Electrolytes (Na, K, Cl, CO2)	LtGrn	134	☐ Triglycerides	LtGrn			
48	☐ Amylase	LtGrn	46	☐ Ethanol	LtGrn	747	☐ Troponin I	LtGrn			
131	☐ Aspartate Transaminase (AST)	LtGrn	85	☐ GGT	LtGrn	140	☐ Urea Nitrogen	LtGrn			
6168	☐ Basic Metabolic Panel, Nonfasting	LtGrn	81	☐ Glucose, Fasting	LtGrn	141	☐ Uric Acid	LtGrn			

For Lab Use Only: (Affix Small D-Label Here)