INSTRUCTIONS:
1. IMPORTANT: Fill in all information within the double lined box at the bottom of form.
2. Most common tests are listed here, for other testing information, see reverse for web-based lab test information.
3. CAUTION: Mislabeled, unlabeled, leaking, improperly collected, or poorly-contained specimens are not accepted.
4. See reverse for description of reflexive testing.

When ordering tests for which Medicare reimbursement will be sought, providers 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.

TEST REQUEST FROM ORTHOPEDIC SURGERY

BODY FLUID, WOUND, TISSUE
(Describe specimen site below)

- Bacterial culture with Gram stain (with anaerobe screen)
  FLDANO, TISO, WNDANO*

- Fungal culture (includes direct exam except on CSF)
  FLDF, TISF, WNDF

- AFB culture (includes AFB stain, see back side)
  AFBHSC

MOLECULAR
(Describe specimen site below)

Molecular detection of microbial DNA in clinical specimens
(More information: http://depts.washington.edu/molmicdx)

- Bacteria
- Mould

- AFB
- Yeast

BLOOD (Describe draw site below)

- Bacterial culture, routine aerobic and anaerobic
  BLDC

- Fungal culture
  BLDF

- AFB culture
  AFBBC

Notes for Surgical Team:
1. Large amount of fluid (at least 3 ml) is preferred for culture.
2. Place fluid in two separate capped syringes.
3. Place tissue in two or more sterile cups (desirable for AFB).
4. Swabs are not acceptable for molecular testing.
5. Page Lab Medicine Resident for any questions.

FLDANO, TISO, WNDANO tests include:
- 28 day cultures
- Aerobic and anaerobic screen
- STAT Gram stain
Isolates will get identification and sensitivity testing

*Codes effective 7/1/06. Through 6/30/06, use: FLDANC, TISC, WNDANC

STAT Gram stain Requested
Please phone results to: REQUIRED
For other STAT requests, page Lab Medicine Resident.

SPECIAL REQUESTS:

SREQ: OSS
Use code “OSS” at SREQ prompt

Shrink-seal all plates

OTHER REQUESTS:

☐ Please check if SCCA HSCT patient
REFLEXIVE TESTING DESCRIPTIONS

Identification and Susceptibility Testing
When suspected pathogenic microorganisms are detected, identification procedures are performed for the organism and specimen.

Gram Stain
Gram stain is included with routine bacterial culture on tissues, body fluids, abscesses, and wounds collected appropriately to preserve anaerobic flora. The following specimens are not cultured anaerobically except by written request: CSF, urine, bone marrow, skin, genital, ear, eye, R/O GC, stool, R/O pertussis, environmental, and swabs in routine transport medium.

Homogenization and Concentration
To optimize organism recovery, tissues are homogenized, and body fluid and lower respiratory specimens may be concentrated by centrifugation or filtration.

Special Stain with Ova and Parasite Exam
The ova and parasite exam includes a special permanent stain.

Cryptococcal Antigen
If the cryptococcal antigen test is positive, the antigen titer is determined.

Sputum Cultures on Cystic Fibrosis Patients
Sputum culture includes selective media for *Burkholderia cepacia*.

AFB Stain with Culture
AFB stain is included with AFB culture except for CSF and urine specimens. When AFB stain is ordered, AFB culture is always performed.

BLOOD CULTURE SPECIMEN LABELING
When labeling blood culture bottles, do not cover the existing barcode label, which must be scanned by the automated blood culture instrument.

SPECIAL COLLECTION REQUIREMENTS
For complete specimen collection information, consult the online lab test information database. See below for website.

Blood Culture Bottles
Tops of bottles are not sterile. Wipe tops with alcohol and allow to dry before inoculating.

ONLINE LAB TEST INFORMATION DATABASE
An online database of lab test information is available online at website: byblos.labmed.washington.edu

The database contains information on test names and battery components, specimen collection, special handling, testing frequency, CPT codes and reference ranges. Search either by test name or the lab mnemonic (shown in gray on the front of requisition).

MEDICAL NECESSITY DOCUMENTATION - PARTIAL ICD9 LIST

For outpatient use only: This partial ICD9 code list is being provided only as informational assistance in documenting medical necessity. It is not an all-inclusive list of codes for conditions related to tests on this requisition. If the correct diagnosis, sign or symptom code is not found here or on a service-specific ICD9 code list at your location, please write the diagnosis, signs or symptoms in the Medical Necessity box located on the bottom front of this sheet. Do not circle codes here, please transcribe them to the front.

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
<th>CODE</th>
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<th>CODE</th>
<th>DESCRIPTION</th>
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<td>780.79</td>
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</table>

30°C AFB Incubation
Skin and superficial tissue specimens are cultured at 30°C in addition to routine 37°C incubation to R/O mycobacteria (AFB’s) with lower optimal growth temperatures.

Legionella Detection by Fluorescent In Situ Hybridization (FISH)
When the Legionella FISH screen is positive, a confirmatory FISH test is performed to identify *L. pneumophila*, *L. micdadei*, and *L. longbeachae*.