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MOLECULAR PCR REQUSITION

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1 PATIENT INFORMATION

LAST NAME / FIRST NAME / M.I.

ADDRESS / SUITE #

CITY / STATE / ZIP

PHONE # EMAIL

DOB ☐ MALE ☐ FEMALE

INSURANCE SSN

2 PROVIDER INFORMATION

CLIENT NAME / ACCOUNT #

ADDRESS / SUITE #

CITY / STATE / ZIP

PHONE #

ORDERING PHYSICIAN / / DATE OF SERVICE

/ / : ☐ AM ☐ PM
COLLECTION DATE TIME

SPECIMEN COLLECTED BY

3 MEDICAL NECESSITY

AS PART OF MY ANTIBIOTIC STEWARDSHIP POLICY, I FIND IT MEDICALLY NECESSARY TO RAPIDLY DETERMINE AND DIFFERENTIATE A VIRAL AND/OR BACTERIAL INFECTION IN ORDER TO TREAT WITH OR WITHOUT APPROPRIATE ANTIBIOTICS. HAVING THE MOST ACCURATE AND TIMELY DATA AVAILABLE TO ME DIRECTLY GUIDES MY TREATMENT AND PATIENT MANAGEMENT. EMPIRIC TREATMENT AND MANAGEMENT LEADS TO INAPPROPRIATE AND UNNECESSARY ANTIBIOTIC USE (50% ACCORDING TO THE CDC) AND DELAYED DIAGNOSIS WHICH CAN LEAD TO SEVERE CONSEQUENCES. STANDARD ANTIBODY/ANTIGEN DETECTION IS ONLY AVAILABLE TO DETECT FEW PATHOGENS AND COMES WITH A HIGH FALSE NEGATIVE RATE, RELATIVELY LOWER SENSITIVITY (60-70%) AND SPECIFICITY (80-90%). IN ADDITION, STANDARD ANTIBODY/ANTIGEN DETECTION REQUIRES THE INFECTION TO BE PRESENT FOR DAYS ALLOWING THE BODY TO MAKE AMPLE ANTIBODIES IN ORDER TO DETECT. QUALITATIVE NUCLEIC ACID AMPLIFICATION TESTING (NAAT) IS FAR SUPERIOR WITH SENSITIVITIES AND SPECIFICITIES > 98% AND AVAILABLE TO DETECT MANY PATHOGENS. IN ADDITION, NAAT HAS BUILT IN CONTROLS TO DETERMINE IF AN ADEQUATE PATIENT SAMPLE WAS COLLECTED AND PROCESSED, THEREFORE GREATLY REDUCING FALSE NEGATIVE RESULTS. NAAT ALSO INCLUDES CONTROLS TO EASILY DETERMINE A CONTAMINATED SAMPLE, THEREFORE REDUCING FALSE POSITIVE RESULTS.

PROVIDER SIGNATURE: _____

4 CONSENT FOR TESTING

I PROVIDE FULL CONSENT THAT APOLLO LABORATORY OR IT'S REFERENCE PARTNER(S) TO PERFORM LAB TESTING ON MY SPECIMEN. BY SIGNING THIS DOCUMENT, I CERTIFY THAT I HAVE PROVIDED THE SPECIMEN MYSELF FOR ANALYSIS AND IT IS FRESH, MY OWN , AND UNADULTERATED AND THAT THE INFORMATION ON THIS FORM IS ACCURATE. I AUTHORIZE APOLLO LABORATORY TO BILL MY INSURANCE FOR THE SERVICES ORDERED ON THIS FORM, TO BE PAID DIRECTLY TO APOLLO LABORATORY. I AUTHORIZE APOLLO LABORATORY TO RELEASE ANY NECESSARY INFORMATION ON THIS FOR BILLING PURPOSES. I ADDITIONALLY RELEASE APOLLO LABORATORY TO OBTAIN ANY INFORMATION NECESSARY FOR BILLING FROM MY HEALTH CARE PROVIDER. I UNDERSTAND THAT APOLLO LABORATORY MAY BE OUT-OF-NETWORK WITH MY INSURANCE PROVIDER. IF MY HEALTH INSURANCE PROVIDER RELEASES PAYMENT DIRECTLY TO ME, I WILL BE RESPONSIBLE FOR THE FULL PAYMENT TO APOLLO LABORATORY.

PATIENT SIGNATURE: _____ DATE: / /

5 PANEL LIST: Please check appropriate panels that address your patients needs.

☐ UTI W/ ABX RESISTANCE

- ☐ Acinetobacter baumannii
- ☐ Bacteroides fragilis
- ☐ Citrobacter braakii/freundii
- ☐ Citrobacter koseri
- ☐ Enterobacter cloacae
- ☐ Enterococcus spp.
- ☐ Escherichia coli
- ☐ Klebsiella aerogenes
- ☐ Klebsiella oxytoca/ michiganensis
- ☐ Klebsiella pneumoniae
- ☐ Morganella morganii
- ☐ Proteus mirabilis
- ☐ Pseudomonas aeruginosa
- ☐ Staphylococcus aureus
- ☐ Staphylococcus epidermidis
- ☐ Staphylococcus saprophyticus
- ☐ Streptococcus pyogenes (Group A)
- ☐ Serratia Marcescens

ABX Resistance Markers

- ☐ Class A β-lactamase (blaKPC)
- ☐ Class A β-lactamase (CTX-M-Group 1)
- ☐ Class B metallo-β-lactamase (blaNDM)
- ☐ Vancomycin (vanA, vanB)
- ☐ Methicillin/Oxacillin (mecA)
- ☐ Sulfonamides
- ☐ Fluoroquinolones
- ☐ Trimethoprim

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH A UTI:

- ☐ R35.0 Frequency of Micturition
- ☐ Z22.39 Carrier of other specified bacterial disease
- ☐ N39.0 Urinary Tract Infection, site not specified
- ☐ R30.0 Dysuria
- ☐ _____
- ☐ _____
- ☐ _____

SPECIMEN SOURCE:

- ☐ Clean catch urine
- ☐ Other: _____

☐ WOUND/INFECTION W/ABX RESISTANCE

- ☐ Acinetobacter baumannii
- ☐ Bacteroides fragilis
- ☐ Citrobacter braakii/freundii
- ☐ Citrobacter koseri
- ☐ Enterobacter cloacae
- ☐ Enterococcus spp.
- ☐ Escherichia coli
- ☐ Klebsiella aerogenes
- ☐ Klebsiella oxytoca/ michiganensis
- ☐ Klebsiella pneumoniae
- ☐ Morganella morganii
- ☐ Proteus mirabilis
- ☐ Pseudomonas aeruginosa
- ☐ Staphylococcus aureus
- ☐ Staphylococcus epidermidis
- ☐ Streptococcus saprophyticus
- ☐ Streptococcus pyogenes (Group A)
- ☐ Serratia Marcescens

ABX Resistance Markers

- ☐ Class A β-lactamase (blaKPC)
- ☐ Class A β-lactamase (CTX-M-Group 1)
- ☐ Class B metallo-β-lactamase (blaNDM)
- ☐ Vancomycin (vanA, vanB)
- ☐ Methicillin/Oxacillin (mecA)
- ☐ Sulfonamides
- ☐ Fluoroquinolones
- ☐ Trimethoprim

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH A WOUND INFECTION:

- ☐ L08.9 Local Infection of the skin and subcutaneous tissue, unspecified
- ☐ Z22.39 Carrier of other specified bacterial disease
- ☐ Z22.322 Carrier or suspected carrier of MRSA
- ☐ _____
- ☐ _____

SPECIMEN SOURCE:

☐ Swab ☐ Aspiration

☐ VAGINITIS

- ☐ Atopobium vaginae
- ☐ Bacteroides fragilis
- ☐ BVAB-2
- ☐ Candida albicans
- ☐ Candida dubliniensis
- ☐ Candida glabrata
- ☐ Candida krusei
- ☐ Candida lusitaniae
- ☐ Candida parapsilosis
- ☐ Candida tropicalis
- ☐ Chlamydia trachomatis
- ☐ Enterococcus spp.
- ☐ Escherichia coli
- ☐ Gardnerella vaginalis
- ☐ Haemophilus ducreyi
- ☐ HHV-1 (Herpes Simplex)
- ☐ HHV-2 (Herpes Simplex)
- ☐ Lactobacillus crispatus
- ☐ Lactobacillus gasseri
- ☐ Lactobacillus iners
- ☐ Lactobacillus jensenii
- ☐ Megasphaera Type 1
- ☐ Megasphaera Type 2
- ☐ Mobiluncus curtisii
- ☐ Mobiluncus mulieris
- ☐ Mycoplasma genitalium
- ☐ Mycoplasma hominis
- ☐ Neisseria gonorrhoeae
- ☐ Prevotella bivia
- ☐ Staphylococcus aureus
- ☐ Streptococcus agalactiae (Group B)
- ☐ Treponema pallidum
- ☐ Trichomonas vaginalis
- ☐ Ureaplasma urealyticum

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH VAGINITIS:

- ☐ N76.0 Acute vaginitis
- ☐ N77.1 Vaginitis, vulvitis, & vulvovaginitis
- ☐ B37.3 Candidiasis of vulva & vagina
- ☐ _____
- ☐ _____

SPECIMEN SOURCE:

☐ Vaginal Swab

☐ RESPIRATORY PATHOGEN

- ☐ Adenovirus
- ☐ Bordetella parapertussis
- ☐ Bordetella pertussis
- ☐ Chlamydia pneumoniae
- ☐ Coronavirus 229E
- ☐ Coronavirus HKU1
- ☐ Coronavirus NL63
- ☐ Coronavirus OC43
- ☐ Human Metapneumovirus
- ☐ Human Rhinovirus/ Enterovirus
- ☐ Influenza A
- ☐ Influenza A/H1
- ☐ Influenza A/H1-2009
- ☐ Influenza A/H3
- ☐ Influenza B
- ☐ Mycoplasma pneumoniae
- ☐ Parainfluenza Virus 1
- ☐ Parainfluenza Virus 2
- ☐ Parainfluenza Virus 3
- ☐ Parainfluenza Virus 4
- ☐ Respiratory Syncytial Virus

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH A RESPIRATORY INFECTION:

- ☐ J00 Acute nasopharyngitis (Common Cold)
- ☐ J05.0 Acute obstructive laryngitis (croup
- ☐ J06.9 Acute respiratory infection, NOS
- ☐ J20.9 Acute bronchitis, NOS
- ☐ _____
- ☐ _____
- ☐ _____

SPECIMEN SOURCE:

☐ Nasopharyngeal Swab

☐ GASTROINTESTINAL

- ☐ Adenovirus F40/41
- ☐ Astrovirus
- ☐ Campylobacter (jejuni, coli, upsaliensis)
- ☐ Clostridium difficile (toxins A/B)
- ☐ Cryptosporidium
- ☐ Cyclospora cayetanensis
- ☐ Diarrheagenic E. coli/ Shigella
- ☐ E. coli 0157
- ☐ Entamoeba histolytica
- ☐ Enteroaggregative E. coli (EAEC)
- ☐ Enteropathogenic E. coli (EPEC)
- ☐ Enterotoxigenic E. coli (ETEC) It/st
- ☐ Giardia lamblia
- ☐ Norovirus GI/GII
- ☐ Plesiomonas shigelloides
- ☐ Rotavirus A
- ☐ Salmonella
- ☐ Sapovirus (I, II, IV, V)
- ☐ Shig-like toxin-producing E. coli (STEC) stx1/stx2
- ☐ Shigella/Enteroinvasive E. coli (EIEC)
- ☐ Vibrio cholerae
- ☐ Vibrio (parahaemolyticus, vulnificus, cholerae)
- ☐ Yersinia enterocolitica

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH A GI INFECTION:

- ☐ A04.8 Other specified bacterial intestinal infection
- ☐ A08.11 Acute gastroenteropathy
- ☐ A02.0 Salmonella enteritis
- ☐ A03.8 Shigellosis, NOS
- ☐ _____
- ☐ _____
- ☐ _____

SPECIMEN SOURCE:

☐ Fecal Swab

☐ SEXUALLY TRANSMITTED INFECTION

- ☐ Atopobium vaginae
- ☐ Chlamydia trachomatis
- ☐ Gardnerella vaginalis
- ☐ Haemophilus ducreyi
- ☐ HHV-1 (Herpes Simplex)
- ☐ HHV-2 (Herpes Simplex)
- ☐ Neisseria gonorrhoeae
- ☐ Treponema pallidum
- ☐ Trichomonas vaginalis

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH A STI:

- ☐ N76.0 Acute vaginitis
- ☐ N89.8 Other specified noninflammatory disorders of vagina
- ☐ R36.9 Urethral discharge unspecified
- ☐ _____
- ☐ _____

SPECIMEN SOURCE:

☐ Urine ☐ Swab

☐ ANTIBIOTIC RESISTANCE

- ☐ Class A β-lactamase (blaKPC)
- ☐ Class A β-lactamase (CTX-M-Group 1)
- ☐ Class B metallo-β-lactamase (blaNDM)
- ☐ Vancomycin (vanA, vanB)
- ☐ Methicillin/Oxacillin (mecA)
- ☐ Sulfonamides
- ☐ Fluoroquinolones
- ☐ Trimethoprim

PATIENT PRESENTS WITH SIGNS & SYMPTOMS CONSISTENT WITH ANTIBIOTIC RESISTANCE:

- ☐ Z22.322 Carrier or suspected carrier of MRSA
- ☐ Z16.19 Resistance to other specified Beta Lactam antibiotics

☐ CULTURE ID WITH REFLEXITVE ANTIBIOTIC SENSITIVITY TESTING

*Antibiotic Sensitivity Testing Is not available for Vaginitis, Respiratory, Gastrointestinal and STI,

6 PLEASE INDICATE IF YOUR PATIENT HAS TAKEN ANTIBIOTICS IN THE PAST 72 HOURS: ☐ YES ☐ NO