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Billings, MT 59102
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LAB REQUISITION

PATIENT INFORMATION

Last Name	First	Sex	☐ M	☐ F
Address	Birth Date			
City	SS #			
State	Zip	Home Phone		

ORDERING PROVIDER CONTACT

Provider Name	Provider Phone	☐ Call Results to phone number: (____) _____
Provider Signature		☐ Fax report to: (____) _____
Provider NPI#		

INDICATE TESTS REQUESTED

☐ AST	☐ Creatinine	☐ Magnesium	☐ Uric acid
☐ ALT	☐ CRP	☐ Mono screen	☐ Urinalysis
☐ ABO Group and Rh Type	☐ Electrolyte panel	☐ Pregnancy, quantitative	☐ Urinalysis with reflex to culture
☐ Alk Phos	☐ Ferritin	☐ Potassium	☐ Urine culture, clean catch
☐ Albumin	☐ Folate	☐ Phosphorus	☐ Vitamin D
☐ Amylase	☐ Free T4	☐ Platelet count	☐ Vitamin B12
☐ ANA Screen	☐ Fasting Glucose	☐ Protein, total	☐ Wound Culture (aerobic)
☐ Anemia panel	☐ Hematocrit	☐ Protein, 24-hour urine	☐ Wound culture (aerobic and anaerobic)
☐ Bilirubin, Direct	☐ Hemoglobin	☐ PSA, diagnostic	
☐ Bilirubin, Indirect	☐ Hemoglobin A1c	☐ PSA, screen	
☐ Bilirubin, total	☐ Hepatic function	☐ PT/INR	
☐ BMP	☐ Hepatitis, Acute	☐ PTT	
☐ BNP	☐ Hepatitis B surface antigen	☐ Rheumatoid factor	
☐ CBC w/o	☐ Hepatitis C, AB	☐ Renal function	
☐ CBC w/ diff	☐ Iron	☐ Sed rate	
☐ CK	☐ Iron binding capacity	☐ Sodium	
☐ CMP	☐ LDH	☐ Strep culture (A/B)	
☐ C-Diff Toxin A & B	☐ Lipase	☐ Stool culture	
☐ Calcium, serum	☐ Lipid panel	☐ TSH	

ADDITIONAL TESTS

☐	_____
☐	_____
☐	_____
☐	_____
☐	_____
☐	_____

PANELS

☐ YEARLY HEALTH MAINTENANCE \$150.00 CBC, CMP, TSH, Lipid panel, Vit D Add PSA for \$25.00? ☐ YES	☐ MALE COMPREHENSIVE PANEL \$225.00 CBC, CMP & Lipid Panel, DHEA Sulfate, Free T3/Free T4/TSH, Hemoglobin A1C, PSA Free & Total, Testosterone Free & Total, Vitamin B12, Vitamin D-25 Hydroxy
☐ THYROID PANEL \$50.00 Free T3, Free T4, TSH	☐ PCOS - PRE & PERIMENOPAUSAL FEMAL COMPREHENSIVE PANEL \$250.00 CBC (Inc. diff & plt.), CMP & Lipid Panel, DHEA Sulfate, Free T3/T4/TSH, FSH, Hemoglobin A1C, Insulin (fasting), LH, Testosterone Free & Total, Vitamin B12, Vitamin D-25 Hydroxy
☐ COMPREHENSIVE THYROID PANEL \$150.00 Free T3, Free T4, TSH, TPO Antibodies, RT3, TGA Antibodies	☐ POST MENOPAUSAL FEMALE COMPREHENSIVE PANEL \$250.00 CBC (Inc. diff & plt.), CMP & Lipid Panel, DHEA Sulfate, Free T3/T4/TSH, FSH, Hemoglobin A1C, Insulin, LH, Progesterone, Testosterone Free & Total, Vitamin B12, Vitamin D-25 Hydroxy
☐ STD PANEL (urine and blood collection) \$175.00	
☐ GHONORHEA AND CHLAMYDIA \$85.00	
☐ INFERTILITY PANEL \$150.00 FSH, LH, Prolactin, Estradiol (E2), Quantitative B-HCG	