

9800-B Twin Lakes Pkwy
 Charlotte, NC 28269
 (866) 992-0708

Standing Order Form

Please Indicate: New Change

Effective Date: 4/1/2008

 Clinic Location: **Smithville Dialysis Clinic**

Patient Name: Doe, Jane M

Dr: Tom Smith

(last name, first, middle initial)

 Modality: **Hemo** *PD* *HH*

 Sex: Male **Female**

DOB: 1/2/1950

SS#: 111-22-3333

M/W/F or T/T/Sa

Shift: _____

MR # 123456

Physician Signature/Date _____

CMS requires all ordered test must have a Physician's signature with diagnosis. The medical necessity for tests ordered must be noted in the patient's permanent medical record.

Panels listed below are example panels Meridian Laboratory offers. Tests may be added or deleted.

O=As needed per center protocol, M=Monthly, Q=Quarterly, S=Semi-Annual, Y=Yearly

	<input checked="" type="checkbox"/>	ICD9	Frequency	<input checked="" type="checkbox"/>	ICD9	Frequency
Chemistry Composite Panel (Medicare Patients billed to facility.)	<input checked="" type="checkbox"/>	111.1	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y			
<small>(Albumin, Alkaline Phosphatase, CO2, Calcium, Chloride, LDH, Phosphorus, Potassium, AST, Total Protein, Creatinine)</small>						
Chemistry	<input checked="" type="checkbox"/>	ICD9	Frequency	Trace Elements	<input checked="" type="checkbox"/>	ICD9
Sodium	<input checked="" type="checkbox"/>	222.2	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Aluminum	<input checked="" type="checkbox"/>	414.4
Potassium			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Hematology		
Magnesium	<input checked="" type="checkbox"/>	333.3	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	BC		
Albumin			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	CBC w/diff	<input checked="" type="checkbox"/>	515.5
Calcium			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Reticulocyte		
Phosphorus			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Hemoglobin/Hematocrit	<input checked="" type="checkbox"/>	616.6
Ca/Phos			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Platelet Count		
PTH - Intact	<input checked="" type="checkbox"/>	444.1	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Infectious Disease		
PSA			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Hepatitis B Antigen	<input checked="" type="checkbox"/>	717.7
TSH			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Hepatitis B Antibody	<input checked="" type="checkbox"/>	818.8
Cholesterol		555.5	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Hepatitis C Antibody	<input checked="" type="checkbox"/>	919.9
Triglycerides			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	HIV		
Vit B12			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Therapeutic Drugs		
Folate			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Digoxin		
Uric Acid			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Phenytoin (Dilantin)		
Hemoglobin A1C	<input checked="" type="checkbox"/>	666.60	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Vancomycin		
Glucose	<input checked="" type="checkbox"/>	777.7	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Urine Testing		
Ferritin	<input checked="" type="checkbox"/>	888.8	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	24 hr urine (BUN, Creat, TP)		
Prealbumin			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Creatinine Clearance		
ALT (SGPT)	<input checked="" type="checkbox"/>	999.9	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Urea Clearance		
PT/INR			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Urinalysis		
Lipid Panel	<input checked="" type="checkbox"/>	110.1	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Urine C&S		
<small>Chol, Trig, HDL, LDL</small>				cath _____ clean catch _____		
Recirc. Study			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	PD Testing		
<small>Arterial, Venous, Systemic</small>				PD Adequacy		
Iron Studies	<input checked="" type="checkbox"/>	212.2	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	PET Study		
<small>Fe, TIBC, UIBC, %SAT, Transferrin</small>				PD Fluid Cell Count		
Liver Function			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Home Hemo		
<small>Alb, ALP, TP, ALT, AST, DBIL, TBIL</small>				NxStage KT/V		
KT/V Panel	<input checked="" type="checkbox"/>	313.3	<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y	Additional Tests		
<small>Pre BUN, Post BUN, KT/V, URR</small>				CRP	<input checked="" type="checkbox"/>	110.1
Pre BUN			<input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Q <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> Y			