# Laboratory Services Outpatient Order Form


Lake Forest Hospital

Laboratory Services
660 N. Westmoreland Road
Lake Forest, Illinois 60045-1696

LABORATORY:
(847) 535-6119 TEL
lfh.org

SCHEDULING:
(847) 535-8000 TEL
(847) 535-8001 FAX


Thank you for referring your patient for Laboratory services at Lake Forest Hospital.

Walk-ins are welcome for most tests. Patients should enter the hospital's Main Entrance to the Registration Department before their appointment. You will be given a scheduled time for the test when you arrive at Registration. Registration Department hours are 6:00 a.m. to 6:00 p.m. (Monday–Friday) and 6:30 a.m. to 2:30 p.m. (Saturday).

For questions or any further information, please call Laboratory Services at (847) 535-6119.

**In order to provide the best possible services to you and your patients, we request the following information. Please complete all fields to expedite your request.**

❒ STAT **CALL RESULTS TO:** _____

**FAX RESULTS TO:** _____

## PATIENT INFORMATION

Last Name _____ First Name _____

Date of Birth _____

Home Phone Number _____ Work/Cell Phone Number _____

## PHYSICIAN INFORMATION

Referring Practitioner Last Name _____ First Name _____

NPI # _____ Practitioner's Fax Number _____

Practitioner's Signature _____ Date _____

## SIGNS & SYMPTOMS / DIAGNOSIS / ICD-9

When ordering multiple tests on the same order form, please indicate a sign, symptom, diagnosis or ICD-9 for each test/treatment. Do not include a "rule-out" diagnosis.

_____

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**TEST NAME** NOTE: Tests in **bold** require advanced beneficiary notice at time of testing.

- ❒ ANA
- ❒ Alkaline Phosphatase
- ❒ Amylase
- ❒ Basic Metabolic Prof.
- ❒ Bili, Neonatal Total
- ❒ Bili, Neo. Direct/Total
- ❒ **BNP**
- ❒ **Cardio CRP (High Sen)**
- ❒ **CRP (C-Reactive prot.)**
- ❒ Calcium
- ❒ **CBC w/plts, auto diff**
- ❒ **CEA**
- ❒ CK, Total
- ❒ Comprehensive Metabol.
- ❒ **Coronary Risk Lipids**
- ❒ Electrolytes, Serum
- ❒ **Ferritin, Serum**
- ❒ Folate, Serum
- ❒ **GGTP**
- ❒ Rapid Strep, Throat
- ❒ Culture, Throat, Routine
- ❒ Culture, Stool
- ❒ Stool, Clostridium difficile
- ❒ Culture, Stool, Hem.E. coli
- ❒ **Stool, Occult Blood**
- ❒ Stool, Ova & Parasite
- ❒ Stool, Rotavirus
- ❒ Culture, AFB
- ❒ **Culture, Urine**
- ❒ Culture, Wound
- ❒ **Glucose, Serum**
- ❒ Glucose Serum, 1 Hr. GTT
- ❒ 2 Hr. GTT (Standard)
- ❒ 3 Hr. GTT (Pregnancy)
- ❒ **Glycohemoglobin, A1C**
- ❒ HCG Beta Quant.
- ❒ Hepatitis B surface AB
- ❒ Hepatitis B surface AG
- ❒ Hepatitis C AB
- ❒ **Hepatic Function**
- ❒ **Hepatitis Profile (A, B, C)**
- ❒ **HIV**
- ❒ Homocysteine
- ❒ Immunoglobulin, quant
- ❒ Immunofixation Serum
- ❒ Immunofixation Urine qualrandom/24h
- ❒ **Iron & TIBC**
- ❒ LDH
- ❒ Lipase
- ❒ **Magnesium**
- ❒ Mono Screen
- ❒ Phosphorus
- ❒ *Platlet Function, Screen
- ❒ Potassium
- ❒ **PSA Screen (1x per year)**
- ❒ **PSA, Free (elevated total)**
- ❒ **PSA Total (diagnostic)**
- ❒ Protein Electrophoresis (serum)
- ❒ **PT (venipuncture)**
- ❒ **PT (capillary/finger)**
- ❒ PTT
- ❒ Reticulocyte count
- ❒ **Sed Rate, ESR**
- ❒ **T3 Total**
- ❒ **T4, Free**
- ❒ **TSH**
- ❒ **Transferrin**
- ❒ Urine Microalbumin
- ❒ **Urinalysis, Routine**
- ❒ Urinalysis w/micro
- ❒ Vitamin B12
- ❒ Vitamin D, 1 25 Dihydroxy
- ❒ Uric Acid
- ❒ 24-Hr. Urine CRE CLR — HT:
- ❒ 24-Hr. Urine Total Prot. — WT:
- ❒ 24-Hr. Urine 5-HIAA
- ❒ 24-Hour VMA
- ❒ *Semen, Fertility
- ❒ *Semen, Post Vas.
- ❒ Other: _____

*Scheduled test can only be performed at Lake Forest Hospital