

FAILURE TO COMPLETE MAY DELAY RESULTS

Patient's Last Name		First	Middle	Birth date (required)	Sex
Outside Patient Number	Outside Specimen Number		Send Report To:		
Primary Care Provider:			Address:		
Provider Phone & Fax Numbers:		DIAGNOSIS / ICD-9:	Phone/Fax:		

SPECIMEN INFORMATION

Date collected: ___ / ___ / ___ Time collected: _____ Specimen Type: Lavender Top/EDTA whole blood

BILLING INFORMATION*

**All Samples will be billed to the referring institution unless complete billing and diagnosis information is provided when appropriate.*

BILL TO: Referring Institution (provide billing address if different from report address) Insurance (attach front and back copy of card)
 DSHS (Only Alaska, Idaho, Montana, and Washington accepted)

Patient Address		Patient Phone
Guarantor Name	DOB	Relationship to Patient
Guarantor Address (if different from patient's)		
Guarantor Phone (if different from patient's)		Employer

Insurance Company/Medical Coverage

Claims Address	Insurance Phone Number
Policy/ID Number	Group Number
Subscriber Name	Subscriber DOB

IMPORTANT INFORMATION REGARDING MEDICAL NECESSITY:

PHYSICIAN NOTIFICATION: Only tests that you believe are appropriate for patient care should be ordered. Medicare/Medicaid will pay only for tests that are medically necessary for the diagnosis and treatment of the patient, rather than for screening purposes.

NEWBORN SCREENING FOLLOW-UP TESTING for SCID

SCID NB F/U: SCID Newborn Screen Follow-up Panel

Specimen Requirements: 2 mL Lavender Top/EDTA whole blood. Ship overnight ambient

If you have questions about the screening test or specimen requirements for diagnostic testing, please contact:

Seattle Children's Lab Client Services	(206) 987-2617
Sheila Weiss, MSc, Newborn Screening Program	(206) 418-5509
John D. Thompson, PhD, Newborn Screening Program	(206) 418-5531

Results: Please fax a copy of results to Washington State Newborn Screening Program (Fax: 206-418-5415)

Send specimens to:	SEATTLE CHILDREN'S LABORATORY 4800 Sand Point Way NE, M/S: OC.8.720 Seattle, WA 98105 (206) 987-2102
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