



78300020-8 3233025-1

REGISTRATION # (IF APPLICABLE) M M D YEAR DATE OF BIRTH 01/20/1953

PATIENT NAME (LAST, FIRST, MIDDLE) Epstein Jeffrey

ACCOUNT # BRUCE MOSKOWITZ, MD NATIONWIDE ACCOUNT 1411 N FLAGLER DR STE 7100 WEST PALM BEACH, FL 33401-3418

Patient Service Center location and appointment scheduling information is on the back. Each sample should be labeled with at least two patient identifiers at time of collection. ICD Diagnosis Codes are Mandatory. Fill in the applicable fields below.

PATIENT EMAIL ADDRESS CELL PHONE PATIENT PHONE PRINT NAME OF INSURED/RESPONSIBLE PARTY (LAST, FIRST, MIDDLE) - IF OTHER THAN PATIENT PATIENT STREET ADDRESS (OR INSURED/RESPONSIBLE PARTY) APT. # KEY #

DATE COLLECTED TIME AM PM TOTAL VOL/HR. Fasting Non Fasting

PH/UPIN ORDERING/SUPERVISING PHYSICIAN AND/OR PAYORS (MUST BE INDICATED) 1376970335 ACCELTURO, AMANDA 1386702876 MOSKOWITZ, BRUCE W 1477952133 MOUTCHEMS, BRITTAN

PRIMARY INSURANCE CITY STATE ZIP RELATIONSHIP TO INSURED: SELF SPOUSE DEPENDENT PRIMARY INSURANCE CO. NAME MEMBER / INSURED ID NO. # GROUP # INSURANCE ADDRESS CITY STATE ZIP

ABN required for tests with these symbols Medicare Limited Coverage Tests Provide signed ABN when necessary Visit QuestDiagnostics.com/MLCP for Medicare coverage guideline ICD Codes (enter all that apply) E88.52

ADD'L PHYS.: Dr. NP/UPIN ON-PHYSICIAN PROVIDER: NAME

PANEL COMPONENTS ON BACK ORGAN / DISEASE PANELS 34392 Electrolyte Panel 10256 Hepatic Function Panel 10165 Basic Metabolic Panel 10231 Comp Metabolic Panel 87600 Lipid Panel (Fasting) 14852 Lipid Panel w/Reflex D-LDL 20210 Obstetric Panel w/Reflex 10306 Hepatitis Panel, Acute w/Reflex 10314 Renal Functional Panel

4420 C-Reactive Protein (CRP) 29493 CA 27.29 29256 CA 125 303 Calcium 11173 CCP Ab IgG 8978 CEA 8334 Cholesterol, Total 374 CK, Total 375 Creatinine 402 DHEA Sulfate, Immunoassay 8293 LDL Cholesterol, Direct 4021 Estradiol 457 Ferritin 466 Folic Acid 470 FSH 8482 GGT 8477 Glucose, Gestational Screen (50g, 135 cutoff) GY 19833 Glucose, Gestational Screen (50g, 140 cutoff) GY 8484 Glucose, Plasma 8483 Glucose, Serum 8435 hCG, Serum, Qual 88396 hCG, Serum, Quant 8496 Hemoglobin A1c 16802 Hemoglobin A1c w/eAG 499 Hep B Surface Ab Qual 498 Hep B Surface Ag w/Reflex Confirm S 8472 Hep C Antibody w/Reflex to Quant S 891431 HIV-1/2 AG/AB, 4th w/Reflex S 31789 Homocysteine S 10124 hs CRP S 561 Insulin S 549 Immunofixation (IFE) S 7573 Iron, TIBC, % Sat S

571 Iron S 593 LOH S 599 Lead, Blood TN S 615 LH S 606 Lipase S 6646 Lyme Disease Ab w/Reflex to Blot (IgG, IgM) S 622 Magnesium S 6517 Microalbumin, Random Urine w/Creat S Fecal Globin, Feces - FIT, InSure 11290 Diagnostic S F 11293 Medicare Screen S 718 Phosphorus S 733 Potassium S 745 Progesterone S 746 Prolactin S B5363 PSA, Total S 793 Reticulocyte Count, Automated L 4418 Rheumatoid Factor S 799 RPR (Monitoring) w/Reflex Titer S B36126 RPR (DX) w/Reflex Confirm S 802 Rubella IgG S 809 Sed Rate by Mod West L 15983 Testosterone, Total, LC/MS/MS SR 873 Testosterone, Total, Male SR 5081 Thyroid Peroxidase Antibodies (TPO) S 896 Triglycerides S 899 TSH S B36127 TSH w/Reflex T4, Free S 34429 T3, Free S 859 T3, Total S 861 T3 Uptake S 867 T4 (Thyroxine), Total S 866 T4 (Thyroxine), Free S

6448 UA, Dipstick Only S 7909 UA, Dipstick w/Reflex Microscopic S 5463 UA, Complete (Dipstick & Microscopic) S 3020 UA, Complete, w/Reflex Culture S 294 Urea Nitrogen (BUN) S 905 Uric Acid S 916 Valproic Acid S 4439 Varicella-Zoster Virus Ab (IgG) S 7065 Vitamin B12/Folic Acid S 927 Vitamin B12 S B17306 Vitamin D, 25-Hydroxy, Total, Immunoassay S B91935 Vitamin D (QuestAssure) for Infants (25-Hydroxyvitamin D) (CMSMS) (4 level) S

HEMATOLOGY 510 Hemoglobin L 509 Hematocrit L 1759 CBC (Hgb, Hct, RBC, WBC, Plt) L 6399 CBC w/Diff (Hgb, Hct, RBC, WBC, Plt, Diff) L B8847 PT with INR B 763 PTT, Activated B OTHER TESTS 7788 ABO Group & Rh Type Y 237 AFP Tumor Marker S 223 Albumin S 234 Alkaline Phosphatase S 823 ALT S 243 Amylase S 249 ANA Screen, IFA, with Reflex to Titer and Pattern S 795 Antibody Scr, RBC w/Reflex ID Y 822 AST S 285 Bilirubin, Direct S 287 Bilirubin, Total S

HEMATOLOGY 510 Hemoglobin L 509 Hematocrit L 1759 CBC (Hgb, Hct, RBC, WBC, Plt) L 6399 CBC w/Diff (Hgb, Hct, RBC, WBC, Plt, Diff) L B8847 PT with INR B 763 PTT, Activated B OTHER TESTS 7788 ABO Group & Rh Type Y 237 AFP Tumor Marker S 223 Albumin S 234 Alkaline Phosphatase S 823 ALT S 243 Amylase S 249 ANA Screen, IFA, with Reflex to Titer and Pattern S 795 Antibody Scr, RBC w/Reflex ID Y 822 AST S 285 Bilirubin, Direct S 287 Bilirubin, Total S

MICROBIOLOGY Source (Required) 4550 Culture, Aerobic Bacteria\* S 4446 Culture, Aerobic & Anaerobic\* S 4485 Culture, Group A Strep\* S 5617 Culture, Group B Strep\* S 4558 Culture, Genital\* S 394 Culture, Throat\* S 395 Culture, Urine, Routine\* (Inc. Indwelling) S Amplified Specimen Type (Aptima) 11363 Endocervical gonorrhoeae RNA, T S

MICROBIOLOGY Source (Required) 4550 Culture, Aerobic Bacteria\* S 4446 Culture, Aerobic & Anaerobic\* S 4485 Culture, Group A Strep\* S 5617 Culture, Group B Strep\* S 4558 Culture, Genital\* S 394 Culture, Throat\* S 395 Culture, Urine, Routine\* (Inc. Indwelling) S Amplified Specimen Type (Aptima) 11363 Endocervical gonorrhoeae RNA, T S Stool Pathogens (Salms/Shig/Campy) 11008 Culture, Stool, Shiga toxins w/Reflex S 34838 H. pylori Ag, EIA Stool S 14839 H. pylori Urea Breath Test S 681 O & P w/Permanent Stain S Additional charge for ID and Susceptibility

ADDITIONAL TESTS: (INCLUDE COMPLETE TEST NAME AND ORDER CODE) Reflex tests are performed at an additional charge. Quest Diagnostics is the associated logo and all associated Quest Diagnostics marks are the trademarks of Quest Diagnostics. Copyright © 2018 Quest Diagnostics Incorporated. All rights reserved. www.questdiagnostics.com

807978 CP 307978 608 HDL CHOLESTEROL 718-Phosphate \* test code 4422 Stone Risk diagnostic profile 1635-Calcium 24 hr. urine w/creatinine

Physician Signature (Required for PA, NY, NJ & WV) Many payers (including Medicare and Medicaid) have medical necessity requirements. You should only order those tests which are medically necessary for the diagnosis and treatment of the patient. TOTAL TESTS ORDERED