

**BRONX LEBANON HOSPITAL CENTER**

**LABORATORY TEST REQUISITION**

1650 Grand Concourse 1276 Fulton Avenue  
Bronx, NY 10457 Bronx, NY 10456  
(718) 518-5160  
CLIA No: 33D0671605 CLIA No: 33D0006588

Press Hard!! Fill in all the information below. rev 11/00  
Medical Record Number Hospital ZIP/Hospital Location/Clinic Code

Patient Name (Last Name, First Name, MI)

Address

City, State, Zip

Age Sex

Hospital or Clinic Location

Home Telephone

Business Telephone

Ordering Physician (please print) AND USA Code Number

Physician's Signature

Phlebotomist

Date Collected Time AM

ICD-9 Codes or Diagnosis

Date Received Time AM

This specimen is:  Blood  CSF  Urine  Stool  STAT

Tube Color: S = Red/Gray Speckle Y = Yellow L = Lavender B = Blue Gr = Green

Blood Collection Protocol: Collect one blood tube per column or per tube top color. Order prudently to avoid unnecessary patient blood loss.

Chemistry	Special Chemistry	Therapeutic Drug Monitoring	Hematology	Serology	Immunology
<input type="checkbox"/> Sodium S 181	<input type="checkbox"/> Acid Phos Tot S 1367	<input type="checkbox"/> Acetaminophen S 1031	<input type="checkbox"/> CBC L 30	<input type="checkbox"/> HBs Ag S 4231	<input type="checkbox"/> C-React Pro S 5399
<input type="checkbox"/> Potassium S 174	<input type="checkbox"/> Acid Phos Prost S 1367	<input type="checkbox"/> Carbamazepine S 1361	<input type="checkbox"/> Manual Diff L 31	<input type="checkbox"/> HBs Ab S 4232	<input type="checkbox"/> C3 S 4138
<input type="checkbox"/> Chloride S 123	<input type="checkbox"/> AFP (tumor mkr) S 1525	<input type="checkbox"/> Digoxin S 194	<input type="checkbox"/> Sed Rate L 304	<input type="checkbox"/> HbC Ab S 4235	<input type="checkbox"/> C4 S 4140
<input type="checkbox"/> CO2 S 117	<input type="checkbox"/> CEA S 1614	<input type="checkbox"/> Ethanol S 1034	<input type="checkbox"/> Retic. Count L 303	<input type="checkbox"/> HAV IgM S 4234	<input type="checkbox"/> CH 50 S 4112
<input type="checkbox"/> Glucose S 145	<input type="checkbox"/> PSA S 1202	<input type="checkbox"/> Lithium S 1286	<input type="checkbox"/> Sickle Screen L 305	<input type="checkbox"/> HCV Ab S 4238	<input type="checkbox"/> Rheum Factor S 4102
<input type="checkbox"/> BUN S 191	<input type="checkbox"/> Cortisol AM S 1433	<input type="checkbox"/> Phenobarbital S 1355	<b>Special Hematology</b>	<input type="checkbox"/> IgG Mumps S 4502	<input type="checkbox"/> Haptoglobin S 312
<input type="checkbox"/> Creatinine S 130	<input type="checkbox"/> Cortisol PM S 1433	<input type="checkbox"/> Phenytoin S 1332	<input type="checkbox"/> Fibrinogen B 342	<input type="checkbox"/> IgM Rubella S 4828	<input type="checkbox"/> IgA Total S 5303
<input type="checkbox"/> AST S 189	<input type="checkbox"/> Estriol Total S 1407	<input type="checkbox"/> Primidone S 1355	<input type="checkbox"/> Thrombin T B 344	<input type="checkbox"/> IgG Rubella S 4503	<input type="checkbox"/> IgG Total S 5305
<input type="checkbox"/> Alk Phos S 170	<input type="checkbox"/> FSH, LH S 1440	<input type="checkbox"/> Procainamide/NAPA S 135	<input type="checkbox"/> D-DIMER B 366	<input type="checkbox"/> IgM CMV S 4787	<input type="checkbox"/> IgM Total S 5304
<input type="checkbox"/> Calcium S 115	<input type="checkbox"/> Prolactin S 1451	<input type="checkbox"/> Quinidine S 1333	<input type="checkbox"/> Urine Elect S 5669	<input type="checkbox"/> IgG CMV S 443	<input type="checkbox"/> ANA S 4108
<input type="checkbox"/> Total Protein S 188	<input type="checkbox"/> Free T4 S 180	<input type="checkbox"/> Salicylates S 1084	<input type="checkbox"/> Serum Elect S 5668	<input type="checkbox"/> IgM Toxoplasma S 4789	<input type="checkbox"/> Anti-ONA S 4119
<input type="checkbox"/> Albumin S 105	<input type="checkbox"/> T3 S 1421	<input type="checkbox"/> Theophylline S 1329	<input type="checkbox"/> Hgb Elect. L 315	<input type="checkbox"/> IgG Toxoplasma S 436	<input type="checkbox"/> Anti Mitoch Ab S 4130
<input type="checkbox"/> Bilirubin Total S 110	<input type="checkbox"/> T4 S 177	<input type="checkbox"/> Valproic Acid S 1363	<input type="checkbox"/> Hgb A2/F L 316/317	<input type="checkbox"/> T1 Herpes S 4411	<input type="checkbox"/> Anti Sm Mus Ab S 4132
<input type="checkbox"/> Bilirub Direct S 111	<input type="checkbox"/> TSH S 179	<input type="checkbox"/> Amik 1340 <input type="checkbox"/> Tr S 1351	<input type="checkbox"/> Protein C S 350	<input type="checkbox"/> T2 Herpes S 4413	<input type="checkbox"/> Anti Par Cell Ab S 1138
<input type="checkbox"/> Bilirub Neonate S 109	<input type="checkbox"/> B-12 S 1411	<input type="checkbox"/> Genta 1341 <input type="checkbox"/> Tr S 1354	<input type="checkbox"/> Protein S S 352	<b>Urine Chemistry</b>	<input type="checkbox"/> Anti-TPO Ab S 089
<input type="checkbox"/> Phosphorus S 171	<input type="checkbox"/> Folate S 1412	<input type="checkbox"/> Vanco 1080 <input type="checkbox"/> Tr S 1078	<input type="checkbox"/> Immunofix'n S 5780	<input type="checkbox"/> Creatinine clear'nc [24h] 1632	<input type="checkbox"/> Mono-Spot L 302
<input type="checkbox"/> LDH S 147	<input type="checkbox"/> Iron Total S 1040	<b>Body Fluid Analysis</b>	<input type="checkbox"/> Platelet Agg'n B 354	<input type="checkbox"/> Rnd 1130 Creatinine [24h] 1131	<input type="checkbox"/> Chlamydia/GC S 450
<input type="checkbox"/> ALT S 122	<input type="checkbox"/> Transferritin/TIBC S 1309	BF Type _____	<input type="checkbox"/> Antithromb 3 B 347, 348	<input type="checkbox"/> Rnd 1971 Albumin [24h] 1972	<input type="checkbox"/> T&B Cell Assay YL 5720.3
<input type="checkbox"/> Amylase S 106	<input type="checkbox"/> Ferritin S 1413	Check one <input type="checkbox"/> CSF <input type="checkbox"/> BF	<input type="checkbox"/> Lupus anticoag B 341	<input type="checkbox"/> Rnd 1181 Sodium [24h] 1182	<input type="checkbox"/> Varicella S 4345
<input type="checkbox"/> Uric Acid S 192	<input type="checkbox"/> HbA1c/Glyco-Hgb L 137	<input type="checkbox"/> Cell Count (all) 34, 35	<input type="checkbox"/> Mixing APTT B 337	<input type="checkbox"/> Rnd 1174 Potassium [24h] 1175	<input type="checkbox"/> Rubella S 4501
<input type="checkbox"/> GGT S 349	<input type="checkbox"/> Magnesium S 119	<input type="checkbox"/> Protein (CSF) 1788	<input type="checkbox"/> Factor Assay B	<input type="checkbox"/> Rnd 1123 Chloride [24h] 1124	<input type="checkbox"/> Lyme Ab Total S 4101
<input type="checkbox"/> Cholesterol S 124	<input type="checkbox"/> Myoglobin Ur 1535	<input type="checkbox"/> Protein (SF) 1688	Specify _____	<input type="checkbox"/> Rnd 1115 Calcium [24h] 1116	<input type="checkbox"/> RPR S 1427
<input type="checkbox"/> Triglycerides S 113	<input type="checkbox"/> Osmolality Ur Rnd 1197	<input type="checkbox"/> Glucose (CSF) 1745	<input type="checkbox"/> Stool	<input type="checkbox"/> Rnd 1171 Phosphorus [24h] 1172	<input type="checkbox"/> VORL (CSF) 5636
<input type="checkbox"/> HDL, LDL, VLDL S 1530	<input type="checkbox"/> Osmolality Ur 24h 1198	<input type="checkbox"/> Glucose (SF) 1645	<input type="checkbox"/> Occult Blood 1798	<input type="checkbox"/> Rnd 1187 Protein [24h] 1188	<input type="checkbox"/> MHA-TP S 1428
<input type="checkbox"/> CK TOTAL S 193	<input type="checkbox"/> Osmolality S 197	<input type="checkbox"/> Crystals (all) 4171		<input type="checkbox"/> Rnd 1192 Uric acid [24h] 1193	<b>Urine Toxicology</b>
<input type="checkbox"/> CK MB S 1305	<b>Miscellaneous (write in)</b>				<input type="checkbox"/> Drug Abuse Screen 1457
<input type="checkbox"/> Ammonia Gr 1037					Abbv's Rnd-random, 24h=24hrs.
<input type="checkbox"/> Lead Gr 438					

