

**3 PROVIDER INFORMATION**

Client Name / Account # \_\_\_\_\_

Address / APT# \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Ordering Physician \_\_\_\_\_ Date of Service (mm-dd-yyyy) \_\_\_\_\_

Collection Date (mm-dd-yyyy) \_\_\_\_\_ Time \_\_\_\_\_  AM  PM

Specimen Collected By \_\_\_\_\_

**1 PATIENT INFORMATION**

Last Name / First Name / M.I. \_\_\_\_\_  Male  Female

Address / APT# \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

DOB \_\_\_\_\_ SSN \_\_\_\_\_

Insurance \_\_\_\_\_

Policy Number \_\_\_\_\_ Group Number \_\_\_\_\_

Please provide copy ( front and back ) of current insurance card and photo ID

**2 CONSENT FOR TESTING**

The information I have provided on this form is accurate. I authorize St. Jude Laboratories to release the results of this test to my treating physician or facility. I hereby authorize my insurance or other payment to St. Jude Laboratories for services I receive. I am aware that St. Jude Laboratories may be an out of network provider with my insurer. I am aware that I am responsible for all co-pays and deductibles not covered by insurance or other payers.

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**4 MEDICAL NECESSITY**

As part of my antibiotic stewardship policy, I find it medically necessary to rapidly determine and differentiate a viral and/or bacterial infection in order to treat with or without appropriate antibiotics. Having the most accurate and timely data available to me directly guides my treatment and patient management. Empiric treatment and management leads to inappropriate and unnecessary antibiotic use (50% according to the CDC) and delayed diagnosis which can lead to severe consequences.

Standard antibody/antigen detection is only available to detect few pathogens and comes with a high false negative rate, relatively lower sensitivity (60-70%) and specificity (80-90%). In addition, standard antibody/antigen detection requires the infection to be present for days allowing the body to make ample antibodies in order to detect. Qualitative Nucleic Acid Amplification Testing (NAAT) is far superior with sensitivities and specificities > 98% and available to detect many pathogens. In addition, NAAT has built in controls to determine if an adequate patient sample was collected and processed, therefore greatly reducing false negative results.

NAAT also includes controls to easily determine a contaminated sample, therefore reducing false positive results.

Physician Signature: \_\_\_\_\_

**5 PANEL LIST: Please check appropriate panels that address your patient's needs. These tests are done by Molecular PCR technique.**

**RESPIRATORY**

**VIRAL TARGETS:**  
Adenovirus  
Bocavirus  
Coronavirus 229E  
Coronavirus HKU-1  
Coronavirus NL63  
Coronavirus OC43  
Influenza A  
Influenza B  
Metapneumovirus A & B  
Parainfluenza virus Type 1  
Parainfluenza virus Type 2  
Parainfluenza virus Type 3  
Parainfluenza virus Type 4  
Parechovirus  
Respiratory syncytial virus A & B  
Rhinovirus/Enterovirus

**BACTERIAL TARGETS:**  
Bordetella pertussis/holmesii  
Chlamydia pneumoniae  
Haemophilus influenzae  
Klebsiella pneumoniae  
Legionella (pneumophila & longbeachae)  
Moraxella catarrhalis  
Mycoplasma pneumoniae  
Salmonella spp  
Staphylococcus aureus  
Streptococcus pneumoniae  
Endogenous Control

**Collection Method**  
 Nasopharyngeal swab  Buccal swab  
 Oropharyngeal swab

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**WOMEN'S HEALTH PANEL**

**PATHOGENS DETECTED:**  
Atopobium vaginae  
BVABZ  
Candida albicans  
Candida glabrata  
Candida parapsilosis  
Candida tropicalis  
Escherichia coli  
Enterococcus faecalis  
Gardnerella vaginalis  
Lactobacillus crispatus  
Lactobacillus iners  
Lactobacillus jensenii  
Mycoplasma hominis  
Megasphaera 1 & 2  
Streptococcus agalactiae  
Staphylococcus aureus  
Ureaplasma urealyticum  
Endogenous Control

**Collection Method**  
 Vaginal swab

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**UTI PANEL ID**

**PATHOGENS DETECTED:**  
Candida species  
E.Coli  
Enterobacter cloacae  
Enterococcus faecalis  
Klebsiella oxytoca  
Klebsiella pneumoniae  
Mycoplasma hominis  
Morganella morganii  
Proteus mirabilis  
Providencia stuartii  
Pseudomonas aeruginosa  
Serratia marcescens  
Staphylococcus aureus  
Staphylococcus saprophyticus  
Streptococcus agalactiae  
Ureaplasma urealyticum  
Endogenous Control

**Collection Method**  
 Clean catch urine

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**GI PANEL**

**PATHOGENS DETECTED:**  
Adenovirus  
Campylobacter jejuni  
Campylobacter upsaliensis  
Campylobacter coli  
Clostridioides difficile Toxin A  
Clostridioides difficile Toxin B  
Helicobacter pylori  
Astrovirus  
Rotavirus

Norovirus G1  
Norovirus G2  
Enteroinvasive Escherichia coli\_ipaH  
Enterogaagregative Escherichia coli\_aggR  
Escherichia coli spp.  
Salmonella spp  
Enterotoxigenic Escherichia coli  
Enterohemorrhagic Escherichia coli  
Yersinia enterocolitica

**Collection Method**  
 Stool sample

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_

**PHARYNGEAL PANEL**

**PATHOGENS DETECTED:**  
Adenovirus  
Chlamydia pneumoniae  
Coronavirus 229E  
Coronavirus HKU1  
Coronavirus NL63  
Coronavirus OC43  
Enterovirus  
Influenza A  
Influenza B  
Mycoplasma pneumoniae  
PIV-1  
PIV-2  
PIV-3  
PIV-4  
Respiratory Syncytial Virus (A & B)  
Rhinovirus

Staphylococcus aureus  
Streptococcus agalactiae  
Streptococcus dysgalactiae  
Streptococcus pyogenes  
Streptococcus pneumoniae  
Endogenous Control

**Collection Method**  Nasopharyngeal swab  Oropharyngeal swab

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**STD/STI PANEL**

**PATHOGENS DETECTED:**  
Chlamydia trachomatis  
Gardnerella vaginalis  
Haemophilus ducreyi  
Herpes simplex 1  
Herpes simplex 2  
Mycoplasma genitalium  
Mycoplasma hominis  
Treponema pallidum  
Trichomonas vaginalis  
Ureaplasma urealyticum  
Endogenous Control  
Neisseria gonorrhoeae

**Collection Method**  
 Dirty catch urine  
 Vaginal swab

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**WOUND PANEL TESTING**

**PATHOGENS DETECTED:**  
Acinetobacter baumannii  
Bacteroides spp.  
Citrobacter freundii  
Citrobacter braakii  
Enterobacter aerogenes  
Enterobacter cloacae  
Escherichia coli  
Enterococcus faecalis  
Enterococcus faecium  
Klebsiella oxytoca  
Klebsiella pneumoniae  
Morganella morganii  
Pseudomonas aeruginosa  
Proteus mirabilis  
Proteus vulgaris  
Staphylococcus aureus  
Streptococcus pyogenes  
Endogenous Control

**Collection Method**  
 Molecular swab

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ANTIBIOTIC RESISTANCE PANEL**

Erythromycin Resistance Gene (ermB)  
Klebsiella pneumoniae carbapenemase  
Methicillin Resistance (mecA)  
Sulaydryl Variable-β-lactamase  
Vancomycin Resistance (Van A)  
Vancomycin Resistance (Van B)

**Collection Method**  
 Molecular swab  Clean catch urine

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**RSV COMBO PANEL**

**PATHOGENS DETECTED:** Influenza B  
COVID-19 Respiratory Syncytial Virus A  
Influenza A Respiratory Syncytial Virus B

**Collection Method**  
 Nasopharyngeal swab

**Diagnosis Codes**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COVID-19 PANEL**

**Collection Method**  
 Molecular Swab

**Diagnosis Codes**  
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 \_\_\_\_\_  
 \_\_\_\_\_

**6 PLEASE INDICATE IF YOUR PATIENT HAS TAKEN ANTIBIOTICS IN THE PAST 72 HOURS:  YES  NO**



## Advantages of molecular PCR over traditional cultures

### Molecular PCR

- ✓ Advanced technology replicates the tiny amount of genetic material to detect the pathogens present within hours.
- ✓ Quickly detects disease when there is only a small amount of pathogens thus catches infection at an early stage.
- ✓ Produces accurate results quickly.
- ✓ Leads to faster diagnosis and treatment options.
- ✓ Can detect antibiotic resistance and enables accurate prescribing & treatment.
- ✓ Patient can be taking antibiotics and undergo a PCR test – results are still accurate.
- ✓ Targeted treatment to treat patients efficiently and effectively.

### Traditional Cultures

- ✗ Outdated technology. Relies on humans to isolate the organism to detect the pathogen. False sensitivity.
- ✗ Takes days to complete the test and depends on amount of pathogens in the sample to produce results.
- ✗ Accuracy is low. Human error can occur during test sequencing.
- ✗ Slows down diagnosis and effective treatment.
- ✗ Cannot detect resistance thus leads to inaccurate prescribing to resistant antibiotics.
- ✗ Patients cannot start antibiotics as they hinder in the cultures' result. Result is inaccurate.
- ✗ Unnecessary targets and inaccurate treatment. Increased chance of overprescribing due to inaccurate culture results.