



1. Account Information

Clinic Name: \_\_\_\_\_ Requesting Physician: \_\_\_\_\_  
Address: \_\_\_\_\_ NPI #: \_\_\_\_\_  
Clinic Phone: \_\_\_\_\_

2. Patient Information

**REQUIRED: ENCLOSE A COPY OF THE FRONT AND BACK OF PATIENT'S INSURANCE CARD(S)**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Sex:  M  F  
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
S.S. #: \_\_\_\_\_ Workers Comp./Auto/LOP:  Medicare:  Medicaid:  Self Pay:

I understand that I am responsible for all deductibles and co-pays for amounts not covered by insurance. By signing below, I acknowledge, authorize, and assign to Qitek Labs of Oklahoma, LLC, any payment(s) made on my behalf for services provided to me by Qitek Labs of Oklahoma, LLC. I also allow the release of any medical information necessary to process this claim.

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

3. ICD-10 Diagnosis Code(s)

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_ 4) \_\_\_\_\_

4. Test(s) Requested

- Respiratory Panel (Check Here for Full Panel) *If adding COVID-19, also check COVID-19.***
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Influenza A                          | <input type="checkbox"/> Enterovirus                      | <input type="checkbox"/> Acinetobacter Baumanni       |
| <input type="checkbox"/> Influenza B                          | <input type="checkbox"/> Streptococcus Pneumoniae         | <input type="checkbox"/> Enterobacter Aerogenes       |
| <input type="checkbox"/> RSV A                                | <input type="checkbox"/> Mycoplasma Pneumoniae            | <input type="checkbox"/> Enterbacter Cloacae          |
| <input type="checkbox"/> RSV B                                | <input type="checkbox"/> Moraxella Catarrhalis            | <input type="checkbox"/> Klebsiella Pneumoniae        |
| <input type="checkbox"/> HMPV A                               | <input type="checkbox"/> Haemophilus Influenzae           | <input type="checkbox"/> Proteus Mirabilis            |
| <input type="checkbox"/> HMPV B                               | <input type="checkbox"/> Legionella Pneumophila           | <input type="checkbox"/> Pseudomonas Aeruginosa       |
| <input type="checkbox"/> Rhinovirus (types A&B)               | <input type="checkbox"/> Bordetella Pertussis             | <input type="checkbox"/> COVID-19 (SARS-CoV-2)        |
| <input type="checkbox"/> Bocavirus                            | <input type="checkbox"/> Streptococcus Pyogenes (Group A) | <i>ABX Resistance Marker</i>                          |
| <input type="checkbox"/> Adenovirus                           | <input type="checkbox"/> Chlamydomphila Pneumoniae        | <input type="checkbox"/> Methicillin/Oxacillin (mecA) |
| <input type="checkbox"/> Parainfluenza Virus (type 1-4)       | <input type="checkbox"/> Staphylococcus Epidermidis       |   |
| <input type="checkbox"/> Coronavirus (229E, HKU1, NL63, OC43) | <input type="checkbox"/> Staphylococcus Aureus            |   |

- UTI/STI Panel (Check Here for Full Panel) *If adding Urinalysis, also check Urinalysis.***
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> A. baumannii                              | <input type="checkbox"/> C. parapsilosis                         | <input type="checkbox"/> <b>Urinalysis</b> |
| <input type="checkbox"/> C. freundii/braakii                       | <input type="checkbox"/> C. krusei                               | Glucose                                    |
| <input type="checkbox"/> C. koseri                                 | <input type="checkbox"/> C. glabrata                             | Bilirubin                                  |
| <input type="checkbox"/> K. aerogenes                              | <input type="checkbox"/> C. dublinensis                          | Ketone                                     |
| <input type="checkbox"/> E. cloacae                                | <input type="checkbox"/> C. tropicalis                           | Specific Gravity                           |
| <input type="checkbox"/> B. fragilis                               | <input type="checkbox"/> P. bivia                                | Blood                                      |
| <input type="checkbox"/> Enterococcus spp. (E. faecalis/E.faecium) | <input type="checkbox"/> M. genitalium                           | pH   |
| <input type="checkbox"/> E. coli                                   | <input type="checkbox"/> M. hominis                              | Protein                                    |
| <input type="checkbox"/> K. oxytoca/michiganensis                  | <input type="checkbox"/> S. agalactiae                           | Urobilinogen                               |
| <input type="checkbox"/> K. pneumoniae                             | <input type="checkbox"/> U. urealyticum                          | Nitrite                                    |
| <input type="checkbox"/> M. morganii                               | <i>ABX Resistance Markers</i>                                    | Leukocyte Esterase                         |
| <input type="checkbox"/> P. mirabilis                              | <input type="checkbox"/> Class A Beta-lactamase (CTX-M-Group 1)  |  |
| <input type="checkbox"/> P. aeruginosa                             | <input type="checkbox"/> Class A Beta-lactamase (blaKPC)         |  |
| <input type="checkbox"/> S. epidermidis                            | <input type="checkbox"/> Class B metallo Beta-lactamase (blaNDM) |  |
| <input type="checkbox"/> S. saprophyticus                          | <input type="checkbox"/> vanA/vanB Vancomycin                    |  |
| <input type="checkbox"/> S. aureus                                 | <input type="checkbox"/> mecA                                    |  |
| <input type="checkbox"/> S. pyogenes (Group A)                     | <input type="checkbox"/> Sulfonamides                            |  |
| <input type="checkbox"/> S. marcescens                             | <input type="checkbox"/> Fluoroquinones                          |  |
| <input type="checkbox"/> C. albicans                               | <input type="checkbox"/> Trimethoprim                            |  |



**Wound Panel (Check Here for Full Panel)**

- |  |  |
|--|--|
| <input type="checkbox"/> A. baumannii                              | <input type="checkbox"/> S. aureus             |
| <input type="checkbox"/> C. freundii/braakii                       | <input type="checkbox"/> S. pyogenes (Group A) |
| <input type="checkbox"/> C. koseri                                 | <input type="checkbox"/> S. marcescens         |
| <input type="checkbox"/> K. aerogenes                              | <input type="checkbox"/> C. glabrata           |
| <input type="checkbox"/> E. cloacae                                | <input type="checkbox"/> C. dublinensis        |
| <input type="checkbox"/> B. fragilis                               | <input type="checkbox"/> C. tropicalis         |
| <input type="checkbox"/> Enterococcus spp. (E. faecalis/E.faecium) | <input type="checkbox"/> S. agalactiae         |
| <input type="checkbox"/> E. coli                                   |  |
| <input type="checkbox"/> K. oxytoca/michiganensis                  |  |
| <input type="checkbox"/> K. pneumoniae                             |  |
| <input type="checkbox"/> M. morgani                                |  |
| <input type="checkbox"/> P. mirabilis                              |  |
| <input type="checkbox"/> P. aeruginosa                             |  |
| <input type="checkbox"/> S. epidermidis                            |  |
| <input type="checkbox"/> S. saprophyticus                          |  |
| <input type="checkbox"/> C. albicans                               |  |
| <input type="checkbox"/> C. parapsilosis                           |  |
| <input type="checkbox"/> C. krusei                                 |  |

*ABX Resistance Markers*

- Class A Beta-lactamase (CTX-M-Group 1)
- Class A Beta-lactamase (blaKPC)
- Class B metallo Beta-lactamase (blaNDM)
- vanA/vanB Vancomycin
- mecA
- Sulfonamides
- Fluoroquinolones
- Trimethoprim

**Ear Infection Panel (Check Here for Full Panel)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Influenza A                          | <input type="checkbox"/> Enterovirus                      | <input type="checkbox"/> Acinetobacter Baumannii      |
| <input type="checkbox"/> Influenza B                          | <input type="checkbox"/> Streptococcus Pneumoniae         | <input type="checkbox"/> Enterobacter Aerogenes       |
| <input type="checkbox"/> RSV A                                | <input type="checkbox"/> Mycoplasma Pneumoniae            | <input type="checkbox"/> Enterbacter Cloacae          |
| <input type="checkbox"/> RSV B                                | <input type="checkbox"/> Moraxella Catarrhalis            | <input type="checkbox"/> Klebsiella Pneumoniae        |
| <input type="checkbox"/> HMPV A                               | <input type="checkbox"/> Haemophilus Influenzae           | <input type="checkbox"/> Proteus Mirabilis            |
| <input type="checkbox"/> HMPV B                               | <input type="checkbox"/> Legionella Pneumophila           | <input type="checkbox"/> Pseudomonas Aeruginosa       |
| <input type="checkbox"/> Rhinovirus (types A&B)               | <input type="checkbox"/> Bordetella Pertussis             |   |
| <input type="checkbox"/> Bocavirus                            | <input type="checkbox"/> Streptococcus Pyogenes (Group A) | <i>ABX Resistance Marker</i>                          |
| <input type="checkbox"/> Adenovirus                           | <input type="checkbox"/> Chlamydomphila Pneumoniae        | <input type="checkbox"/> Methicillin/Oxacillin (mecA) |
| <input type="checkbox"/> Parainfluenza Virus (type 1-4)       | <input type="checkbox"/> Staphylococcus Epidermidis       |   |
| <input type="checkbox"/> Coronavirus (229E, HKU1, NL63, OC43) | <input type="checkbox"/> Staphylococcus Aureus            |   |

**5. Collection Information**

Sample Type:  Nasopharyngeal Swab (RPP)     Clean Catch Urine (UTI)     Swab (Wound)     Swab (Ear)

Time Collected: \_\_\_\_\_ AM / PM    Collected by: \_\_\_\_\_    Swab Location: \_\_\_\_\_

Date Collected: \_\_\_\_\_

*Note: Only one location can be collected per day for proper insurance coverage.*

**6. Physician Signature**

As part of my antibiotic stewardship policy, I find it medically necessary, and can furnish sufficient documentation in the patient's records showing medical necessity, 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: \_\_\_\_\_ Date: \_\_\_\_\_