



1) Patient Legal Name (Last, First MI)		DOB	2) ( ) STAT	Date/Time of Collection			
Patient Social Security#	Race	MR#/Alternate Pt ID		Phone Results To:			
Patient Address		Phone		Fax Results To:			
City, State, Zip		M F		4) <b>BILL PATIENT/INSURANCE COMPANY</b> ATTACH A COPY OF FACE SHEET AND INSURANCE CARD - ALL required (highlighted) fields must be complete to bill patient's insurance company. Specimen will be registered as patient self and bill will be the responsibility of the patient if required information is not provided.			
3) Physicians Signature	Order Date	Print Physicians Name (F,M,I,L)					
Client (Clinic/Physician) Information			Group Physicians		Primary Insurance		
Send Additional Report To:					Company Name:		
					IU/Policy #	Group #/Name:	
					Insurance Co. Address:		
					City:	State/Zip:	
					Policy Holder Name:		
<b>Notice: Medicare will only pay for tests that meet the Medicare definition of "Medical Necessity".</b> Medicare may deny payment for a test that the physician believes is appropriate, such as a screening test. If a test is being ordered as a screen, be certain the patient has signed the Advanced Beneficiary Notice (ABN) located on back of this requisition.			5) ICD Diagnosis Codes (Enter ALL that apply)		1	2	3
			4	5	6	7	8

### Molecular Pathology Request

Specimen Type (FNA, fluid, resection, etc.) \_\_\_\_\_

Corresponding Pathology # (NG-, FN-, or S-, etc.) \_\_\_\_\_

**Specify test(s) requested:**

**Panel Assays:**

- Lung Molecular Panel (EGFR, BRAF, KRAS (Incl G12C), ALK IHC, ROS1 IHC, PDL1)
- Colon Molecular Panel (KRAS, NRAS, BRAF, MSI PCR)

**Individual Gene Mutation Assays:**

- KRAS gene mutation
- NRAS gene mutation
- BRAF gene mutation
- EGFR gene mutation
- ALK translocation
- IDH 1/2 gene mutation
- ROS1 translocation FISH
- 1p19q FISH
- Microsatellite Instability (MSI) PCR
- FGFR gene mutation

Anatomic Pathology Outreach Phone Numbers (if unsure of correct fax #, fax requests to surgical pathology):

Cytology	(317) 491-6335 (p)	(317) 491-6334 (fax)
Dermatopathology	(317) 491-6422 (p)	(317) 491-6424 (fax)
Surgical Pathology	(317) 491-6417 (p)	(317) 491-6419 (fax)