

Indiana University Health

Month xx, 201x

All Internal Medicine Associates 1234 Anywhere Suite ABC Sometown, USA 99999 Fax: (317)123-4567

Standing Order Renewal Notification

Dear Sir or Madam:

Our records indicate that the Standing Order for <patient> is nearing expiration. Current guidelines from the Office of Inspector General (OIG) and Centers for Medicare and Medicaid Services (CMS) require that written orders be obtained and must include an expiration date, frequency, diagnosis code and provider signature. Renewal orders must be received within 30 days to remain active.

To continue this standing order, please:

- 1. Place a checkmark in the Renew field
- 2. Complete the Renew Start Date and End Date, for a maximum of 12 months.
- 3. Complete the Renew Frequency
- 4. Ordering physician must sign standing order renewal form.

CURRENT STANDING ORDER

Patient		DOB		Test		Ordering Physician
Start Date	Start Date End D		ate Free			
Renew Standing Order? (check here)						
Renew Start Date	Renew End Date (12 month max)		Renew Frequency		Ordering Physician Signature (REQUIRED)	

Please return this form via fax to IU Health Pathology Laboratory Client Services at 317-491-6010.

Sincerely, IU Health Pathology Laboratory

Laboratory Administration | IU Health Pathology Laboratory 350 West 11th Street Indianapolis, IN 46202 T 317.491.6000 F 317.491.6010 iuhealth.org