

Urgent Care Minor Report Correction Add-On Test Order Form

MRC INSTRUCTIONS - MANDATORY

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1. Fill in requestor's first and last name in field 1.
2. Fill in the patient name in field 2 exactly as it appears in on the final report.
3. Fill in patient's date of birth (DOB) in field 3.
4. Fill in the appropriate lab accession number in field 4 (lab accession number found in top right of results).
5. Fill in the appropriate phone number for the patient in field 5.
6. Choose whether this is an add-on, replacement, or deletion of order in field 6.
7. Choose a panel, then the swab site in field. You may only choose one whole panel.

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1. Update ICD code as necessary in field 7.
2. Print ordering provider's name in field 8.
3. Ordering provider must leave a signature in field 9.
4. Fill out the date in field 10.
5. Submit paperwork to HealthTrack via fax at (940) 222-2702, or via email at mrcsubmission@healthtrackrx.com

THE FOLLOWING FIELDS MUST BE FILLED OUT BEFORE SUBMITTING PAPERWORK

I, request that the following information be corrected and/or tests (listed below) be added to the previously submitted sample. This is to serve as a correction and/or as an addendum to the originally submitted requisition and to each of the previous test orders originally submitted.

Patient Name (as it appears on the final report):

Patient DOB (as it appears on the final report): Lab Accession Number:

Phone Number

Please update the following tests to this sample: Add-On Replace Delete

Orders must be specifically listed by the whole panel you wish to have changed.

**Signature of the ordering provider is REQUIRED for updating test orders

BY PROVIDING A MOBILE NUMBER, THE PATIENT CONSENTS TO RECEIVE TEXT MESSAGES FROM HEALTHTRACK. MESSAGE AND DATA RATES MAY APPLY. CONSENT IS NOT REQUIRED FOR SERVICE. PATIENTS MAY OPT-OUT UPON RECEIPT OF FIRST NOTIFICATION. VISIT WWW.HEALTHTRACKRX.COM/ONLINE-PRIVACY-POLICY.

■ RESPIRATORY TRACT INFECTION		Sample Type: <input type="checkbox"/> Nasopharyngeal/Nares <input type="checkbox"/> Oropharynx/Throat/Oral <input type="checkbox"/> Cough Sputum	WHITE TUBE
<ul style="list-style-type: none"> Adenovirus Bordetella pertussis, parapertussis, bronchiseptica Chlamydia pneumoniae 	<ul style="list-style-type: none"> Coronaviruses (229E, NL63, HKU1, OC43) COVID-19 Coronavirus (SARS-CoV-2) Enterovirus D68 	<ul style="list-style-type: none"> Human metapneumovirus Influenza virus A, B Mycoplasma pneumoniae 	<ul style="list-style-type: none"> Parainfluenza virus (types 1, 2, 3, 4) Respiratory syncytial virus Rhinovirus/Enterovirus
PANEL CODES INCLUDE PATHOGENS ABOVE AND ADDITIONAL PATHOGENS LISTED BELOW. ORDER USING ONLY THE CODE BELOW; IT INCLUDES THE BASE PANEL AND THE ADDITIONAL PATHOGENS LISTED.			
■ RTI - PERSISTENT	<ul style="list-style-type: none"> Haemophilus influenzae 	<ul style="list-style-type: none"> Moraxella catarrhalis 	<ul style="list-style-type: none"> Streptococcus pneumoniae
■ RTI - ATYPICAL PHARYNGITIS	Sample Type: Oropharynx/Throat/Oral ONLY		
	<ul style="list-style-type: none"> Epstein-Barr Virus (Human Herpesvirus 4) 	<ul style="list-style-type: none"> Fusobacterium nucleatum, necrophorum 	<ul style="list-style-type: none"> Streptococcus dysgalactiae (Group C/G Strep)

■ PHARYNGITIS		Sample Type: <input type="checkbox"/> Oropharynx/Throat/Oral	WHITE TUBE
<ul style="list-style-type: none"> Adenovirus Chlamydia pneumoniae Coronaviruses (229E, NL63, HKU1, OC43) 	<ul style="list-style-type: none"> COVID-19 Coronavirus (SARS-CoV-2) Enterovirus D68 Human metapneumovirus 	<ul style="list-style-type: none"> Influenza virus A, B Mycoplasma pneumoniae Parainfluenza virus (types 1, 2, 3, 4) 	<ul style="list-style-type: none"> Respiratory syncytial virus Rhinovirus/Enterovirus Streptococcus pyogenes (Group A Strep)
PANEL CODES INCLUDE PATHOGENS ABOVE AND ADDITIONAL PATHOGENS LISTED BELOW. ORDER USING ONLY THE CODE BELOW; IT INCLUDES THE BASE PANEL AND THE ADDITIONAL PATHOGENS LISTED.			
■ PHARYNGITIS - PERSISTENT	<ul style="list-style-type: none"> Epstein-Barr Virus (Human Herpesvirus 4) 	<ul style="list-style-type: none"> Fusobacterium nucleatum, necrophorum 	<ul style="list-style-type: none"> Streptococcus dysgalactiae (Group C/G Strep)

■ FLU, COVID, RSV		Sample Type: <input type="checkbox"/> Nasopharyngeal/Nares	WHITE TUBE
<ul style="list-style-type: none"> COVID-19 Coronavirus (SARS-CoV-2) 	<ul style="list-style-type: none"> Influenza virus A,B 	<ul style="list-style-type: none"> Respiratory syncytial virus 	

■ MEASLES		Sample Type: <input type="checkbox"/> Nasopharyngeal/Nares <input type="checkbox"/> Oropharynx/Throat/Oral	WHITE TUBE
<ul style="list-style-type: none"> Measles 			

■ URINARY TRACT INFECTION		Sample Type: <input type="checkbox"/> Urine (voided) <input type="checkbox"/> Urine (catheter)	WHITE TUBE
<ul style="list-style-type: none"> Acinetobacter baumannii Candida albicans, parapsilosis, tropicalis Candida glabrata (Nakaseomyces glabratus) Candida krusei (Pichia kudriavzevii) Citrobacter freundii Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes Enterococcus faecalis, faecium 	<ul style="list-style-type: none"> Escherichia coli Klebsiella pneumoniae, oxytoca Morganella morganii Proteus mirabilis, vulgaris Pseudomonas aeruginosa Serratia marcescens Staphylococcus aureus 	<ul style="list-style-type: none"> Staphylococcus epidermidis, haemolyticus, lugdunensis Staphylococcus saprophyticus Streptococcus agalactiae (Group B Strep) Resistance Genes ACT, MIR, FOX, ACC Groups CTX-M Groups 	<ul style="list-style-type: none"> dfc (A1, A5), sul(1, 2) ermA, B, C; mefA IMP, NDM, VIM Groups mecA (Methicillin Resistance) OXA Groups qnrA, qnrB SHV, KPC Groups tet B, tet M VanA, VanB
PANEL CODES INCLUDE PATHOGENS ABOVE AND ADDITIONAL PATHOGENS LISTED BELOW. ORDER USING ONLY THE CODE BELOW; IT INCLUDES THE BASE PANEL AND THE ADDITIONAL PATHOGENS LISTED.			
■ UTI + STI COMBINED	<ul style="list-style-type: none"> Chlamydia trachomatis Mycoplasma genitalium 	<ul style="list-style-type: none"> Neisseria gonorrhoeae 	<ul style="list-style-type: none"> Trichomonas vaginalis
■ UTI + STI - ATYPICAL (MYCOPLASMA/ UREAPLASMA)	<ul style="list-style-type: none"> Mycoplasma hominis Ureaplasma parvum 	<ul style="list-style-type: none"> Ureaplasma urealyticum 	

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VAGINITIS	Sample Type: <input type="checkbox"/> Vaginal	WHITE TUBE
<ul style="list-style-type: none"> BVAB2,3 (Bacterial vaginosis-associated bacteria 2,3); Mobiluncus spp Candida albicans, parapsilosis, tropicalis Candida glabrata (Nakaseomyces glabratus) Candida krusei (Pichia kudriavzevii) Chlamydia trachomatis Fannyhessea (Atopobium) vaginae Gardnerella vaginalis Megasphaera (types 1, 2) Mycoplasma genitalium Neisseria gonorrhoeae Trichomonas vaginalis 		
<p>PANEL CODES INCLUDE PATHOGENS ABOVE AND ADDITIONAL PATHOGENS LISTED BELOW. ORDER USING ONLY THE CODE BELOW; IT INCLUDES THE BASE PANEL AND THE ADDITIONAL PATHOGENS LISTED.</p>		
VAGINITIS - RECURRENT	<ul style="list-style-type: none"> Herpes simplex virus 1 Herpes simplex virus 2 Mycoplasma hominis Ureaplasma parvum Ureaplasma urealyticum 	

CHLAMYDIA / GONORRHEA / TRICHOMONAS (CGT)	Sample Type: <input type="checkbox"/> Urine (voided) <input type="checkbox"/> Vaginal <input type="checkbox"/> Rectal	WHITE TUBE
<ul style="list-style-type: none"> Chlamydia trachomatis Neisseria gonorrhoeae Trichomonas vaginalis 		

URETHRITIS	Sample Type: <input type="checkbox"/> Urine (voided) <input type="checkbox"/> Internal Urethra	WHITE TUBE
<ul style="list-style-type: none"> Chlamydia trachomatis Herpes simplex virus 1 Herpes simplex virus 2 Mycoplasma genitalium Mycoplasma hominis Neisseria gonorrhoeae Trichomonas vaginalis Ureaplasma parvum Ureaplasma urealyticum 		

GENITAL LESION	Sample Type: <input type="checkbox"/> Genital Ulcer/Lesion <input type="checkbox"/> Ulcer/Lesion	WHITE TUBE
<ul style="list-style-type: none"> Chlamydia trachomatis Herpes simplex virus 1 Herpes simplex virus 2 Haemophilus ducreyi (Chancroid) Mpox (Monkeypox) Treponema pallidum (Syphilis) 		

DIARRHEAL INFECTION	Sample Type: <input type="checkbox"/> Rectal (fecal) <input type="checkbox"/> Stool	WHITE TUBE
<ul style="list-style-type: none"> Adenovirus F40/41 Astrovirus Campylobacter coli, jejuni, upsaliensis Enteroinvasive E. coli (EIEC) / Shigella spp Enteropathogenic E. coli (EPEC) Enterotoxigenic E. coli (ETEC) Norovirus (Genogroup 1, 2) Rotavirus A Salmonella Sapovirus Shiga toxin-producing E. coli (STEC) Shiga toxin-producing E. coli O157 (STEC O157) Vibrio cholerae, parahaemolyticus, vulnificus Yersinia enterocolitica 		
<p>PANEL CODES INCLUDE PATHOGENS ABOVE AND ADDITIONAL PATHOGENS LISTED BELOW. ORDER USING ONLY THE CODE BELOW; IT INCLUDES THE BASE PANEL AND THE ADDITIONAL PATHOGENS LISTED.</p>		
DI + C. DIFF	<ul style="list-style-type: none"> Clostridioides difficile (toxins A,B) 	
DI + PARASITES	<ul style="list-style-type: none"> Cryptosporidium Cyclospora cayetanensis Dientamoeba fragilis Entamoeba histolytica Giardia lamblia (intestinalis) Microsporidium (Enterocytozoon bienewisi, Encephalitozoon intestinalis) 	

WOUND	Sample Type: Wound Location:	WHITE TUBE
<ul style="list-style-type: none"> Bacteroides fragilis, Phocaecicola vulgatus Candida albicans, glabrata, parapsilosis, tropicalis Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes Escherichia coli Herpes simplex virus 1 Herpes simplex virus 2 Klebsiella pneumoniae, oxytoca Proteus mirabilis, vulgaris Pseudomonas aeruginosa Serratia marcescens Staphylococcus aureus Streptococcus agalactiae (Group B Strep) Streptococcus pyogenes (Group A Strep) Varicella zoster virus (Human Herpesvirus 3, VZV) Vibrio cholerae, parahaemolyticus, vulnificus Resistance Genes: ACT, MIR, FOX, ACC Groups CTX-M Groups dfr (A1, A5), sul (1, 2) ermA, B, C; mefA IMP, NDM, VIM Groups mecA (Methicillin Resistance) OXA Groups qnrA, qnrB SHV, KPC Groups tet B, tet M VanA, VanB 		

BLISTERING LESION	Sample Type: Wound Location:	WHITE TUBE
<ul style="list-style-type: none"> Herpes simplex virus 1 Herpes simplex virus 2 Staphylococcus aureus Streptococcus pyogenes (Group A Strep) Varicella zoster virus (Human Herpesvirus 3, VZV) Resistance Genes: mecA (Methicillin Resistance) 		

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SENIOR 65+

FLU, COVID, RSV	Sample Type: <input type="checkbox"/> Nasopharyngeal/Nares	WHITE TUBE
<ul style="list-style-type: none"> • COVID-19 Coronavirus (SARS-CoV-2) • Influenza virus A,B • Respiratory syncytial virus 		

VAGINITIS	Sample Type: <input type="checkbox"/> Vaginal	GREEN TUBE
<ul style="list-style-type: none"> • Bacterial Vaginosis • Candida albicans, parapsilosis, tropicalis, dubliniensis • Candida glabrata (Nakaseomyces glabratus) • Candida krusei (Pichia kudriavzevii) • Trichomonas vaginalis 		

PANEL CODES INCLUDE PATHOGENS ABOVE AND ADDITIONAL PATHOGENS LISTED BELOW. ORDER USING ONLY THE CODE BELOW; IT INCLUDES THE BASE PANEL AND THE ADDITIONAL PATHOGENS LISTED.

VAGINITIS + CG	<ul style="list-style-type: none"> • Chlamydia trachomatis • Neisseria gonorrhoeae
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CHLAMYDIA / GONORRHEA / TRICHOMONAS (CGT)	Sample Type: <input type="checkbox"/> Urine (voided) <input type="checkbox"/> Vaginal	YELLOW TUBE	GREEN TUBE
<ul style="list-style-type: none"> • Chlamydia trachomatis • Neisseria gonorrhoeae • Trichomonas vaginalis 			

CHLAMYDIA / GONORRHEA (CG)	Sample Type: <input type="checkbox"/> Urine (voided) <input type="checkbox"/> Vaginal <input type="checkbox"/> Rectal <input type="checkbox"/> Oral	YELLOW TUBE	GREEN TUBE
<ul style="list-style-type: none"> • Chlamydia trachomatis • Neisseria gonorrhoeae 			

Updated Diagnosis Code(s):

Ordering Provider Name (printed):

Ordering Provider Name (Signed, stamp signature not accepted):

Date:

****Signature of the ordering provider is REQUIRED for updating test orders SUBMIT TO CUSTOMER CARE AT:
FAX TO: (940)-222-2702 or via EMAIL: mrcsubmission@healthtrackrx.com**