MERCYONE

Laboratory Update

Mandatory Requirements for Test Requisitions

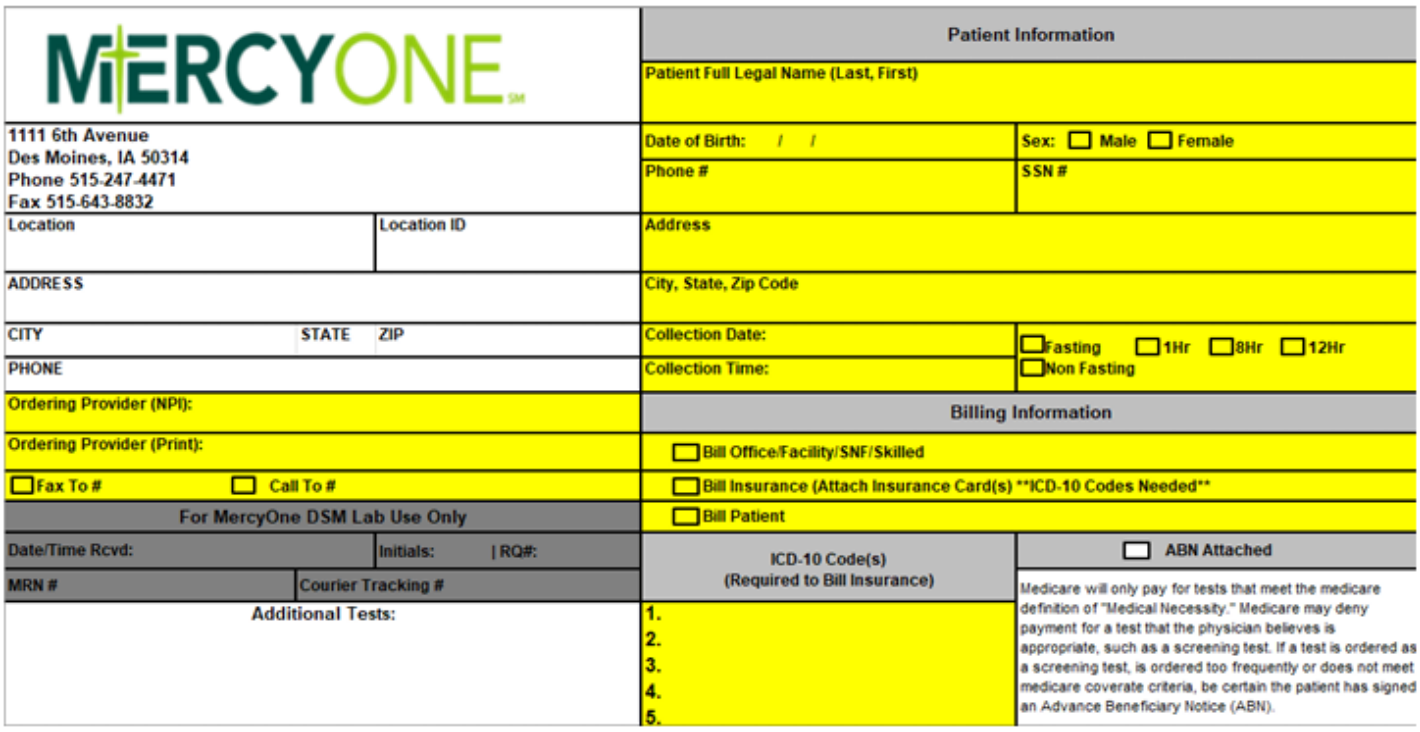
We would like to remind all clients that fill out paper test requisitions that the sections outlined below **must** be completed thoroughly and accurately for every test ordered.

Incomplete requisitions may result in specimen processing and testing delays, and delays in the delivery of test results. To help ensure timely service, please pay particular attention to completing the following sections in full:

- **Billing Information**
- **ICD-10 Codes**
- **Ordering Provider Information (Including NPI)**

If your requisition forms do not have your client information and location pre-filled in the upper left corner, contain outdated lab or CPT codes, or include other inaccuracies, please contact us for the correct form. To ensure accurate test ordering, always use the most up-to-date MercyOne Des Moines Laboratory requisition form.

Your cooperation in providing complete and accurate information on every requisition is greatly appreciated and helps us avoid unnecessary delays in testing and reporting.



MERCYONE

1111 6th Avenue
Des Moines, IA 50314
Phone 515-247-4471
Fax 515-643-8832

Location | Location ID

ADDRESS

CITY | STATE | ZIP

PHONE

Ordering Provider (NPI):

Ordering Provider (Print):

☐ Fax To # ☐ Call To #

For MercyOne DSM Lab Use Only

Date/Time Rcvd: | Initials: | RQ#:

MRN # | Courier Tracking #

Additional Tests:

Patient Information

Patient Full Legal Name (Last, First)

Date of Birth: / / | Sex: ☐ Male ☐ Female

Phone # | SSN #

Address

City, State, Zip Code

Collection Date: | ☐ Fasting ☐ 1Hr ☐ 8Hr ☐ 12Hr

Collection Time: | ☐ Non Fasting

Billing Information

☐ Bill Office/Facility/SNF/Skilled

☐ Bill Insurance (Attach Insurance Card(s) **ICD-10 Codes Needed**

☐ Bill Patient

ICD-10 Code(s)
(Required to Bill Insurance)

1.
2.
3.
4.
5.

☐ ABN Attached

Medicare will only pay for tests that meet the medicare definition of "Medical Necessity." Medicare may deny payment for a test that the physician believes is appropriate, such as a screening test. If a test is ordered as a screening test, is ordered too frequently or does not meet medicare coverate criteria, be certain the patient has signed an Advance Beneficiary Notice (ABN).

September 11, 2026