

## Laboratory Test Standing Order Form

The following form is only for standing orders with respect to laboratory monitoring for pharmaceuticals administered by 5 Minute Pharmacy. All laboratory tests listed on this form will be collected by health2me and are subject to visit fees.

Patient Information					
Patient First Name	Patient Last Name	Patient M.I.	Patient Phone	Gender	
Patient Street Address			Patient Social Security #		
City	State	Zip Code	Patient Date of Birth		
Send Copy To:		Send Additional Copy To: 5 Minute Pharmacy LLC 94-449 Akoki Street Waipahu, Hawaii 96797 Fax Number: (808) 671-5522			
		health2me LLC 2625 Ferdinand Ave Honolulu, HI 96822 Fax Number: (808) 490-0836			
Standing Laboratory Orders					
Place each test on a separate line with corresponding ICD-10 Codes, Frequency, and Start-Date. Note: All standing orders without an end date will expire 12 months from the start date unless otherwise specified on requisition. For questions or further information, please call health2me at 808.452.0288.					
Test	Priority	ICD-10	Frequency	Start Date	End Date
<b>Clozipine Monitoring</b>					
CBC PLT w/ AUTO DIFF	Routine STAT	D70.2	Weekly		
CBC PLT w/ AUTO DIFF	Routine STAT	D70.2	Every Two(2) Weeks		
CBC PLT w/ AUTO DIFF	Routine STAT	D70.2	Every Four(4) Weeks		
<b>Other Labs</b>					
CBC PLT w/ AUTO DIFF	Routine STAT				
CBC PLT w/o DIFF	Routine STAT				
Basic Metabolic Panel	Routine STAT				
Complete Metabolic Panel	Routine STAT				
Hepatic Function Panel	Routine STAT				
Lipid Profile Panel	Routine STAT				
	Routine STAT				
	Routine STAT				
	Routine STAT				
Ordering Provider Information					
Ordering Provider Stamp (Optional)		Ordering Provider Name			
		Phone Number		Fax Number	
		NPI Number			
		Provider Signature			Date