



Direct Access Lab Test

CLIENT D8417

Premier Health
Employees and
Providers Only

Accession Label	Lab Use Only
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PRINT NAME (LAST, FIRST, MIDDLE)				
SEX	DATE OF BIRTH	MONTH	DAY	YEAR
PATIENT PHONE			BEST TIME TO CALL	
ALTERNATE PHONE			BEST TIME TO CALL	
EMAIL ADDRESS				
STREET ADDRESS				
ADDRESS 2				
CITY			STATE	ZIP

DATE COLLECTED/INITIALS	TIME: ____:____ AM; ____:____ PM
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CompuNet Clinical Laboratories will attempt to contact the patient with any questions or critical laboratory values which may indicate serious medical conditions in need of immediate care. **OPTIONAL** If CompuNet Clinical Laboratories cannot reach the patient at the numbers provided, **CompuNet is authorized to leave a message (which may include personal medical information) with:**

Name (Last, First, Middle) _____

You may be contacted by CompuNet Clinical Laboratories regarding any abnormal test results. If you have a critical test result, two attempts will be made to reach you at the phone numbers you provide. It is your responsibility to contact your physician.

TO BE TESTED, YOU MUST READ AND INITIAL EACH SECTION BELOW:

- I am 18 years or older.
- I understand that, because a physician has not ordered these tests, my health insurance (including Medicare and Medicaid) will not pay for these tests. I will not ask my health insurer, Medicare, Medicaid, or any other federal or state health care program to pay for these tests.
Payment is due at time of service.
- I understand that CompuNet Clinical Laboratories will not submit these tests for reimbursement or payment to my health insurer, Medicare, Medicaid, any federal or state health program, or third party payer.
- I understand that CompuNet Clinical Laboratories' DIRECT access testing does not replace the advice and care of my physician. It is intended for educational purposes. A CompuNet DIRECT lab test result is not a medical diagnosis, a treatment or a form of medical advice. I am solely responsible for promptly talking with a physician about my lab test results. I understand that only my physician can interpret my test results.
- I release and will not hold CompuNet Clinical Laboratories, LLC and CompuNet DIRECT responsible if I do not promptly communicate the results of these tests to my physician.
- I understand that the results of this Antibody test will be reported to the appropriate state Department of Health where the patient resides in accordance with Infectious Disease Reporting guidelines.
- IMPORTANT: For State Department of Health requirements we must have your county information. Please list the county where you reside below:**

Please sign below if it would be acceptable for Premier Health Research to contact you about your SARS CoV2 Antibody results for plasma donation.

Signature: _____

76963 SARS CoV2 ANTIBODY TEST **Requisition Valid June 1 – December 31, 2020 only**
1 SST \$40 **Must show Premier Health Employee Badge**

To Access Your Test Results:
The fastest way to receive lab results is through CompuNet's online portal, **My Labs Now**. To sign up or log in go to www.compunetlab.com
If after 5 days you have not received test results in My Labs Now portal, contact MyLabsNow at help@luminatehealth.com or 855-569-5227.

PSC USE ONLY
Place Stamp

5/2020