

		CENTERS LABORATORY		Client Information	
Attending: Talpada, Motibhai MD				ACCOUNT: Citadel Rehabilitation and Nursing Center at Kingsbridge 3400 Cannon Place Bronx, NY 10463	
Patient Information			Ordering Physician Information		
NAME: Cole, Vernon			PHYSICIAN NAME: Talpada, Motibhai MD		
D.O.B.: 12/25/1941 SEX: Male			UPIN:		
I.D.: 10003 S.S.N: 075-88-6587			NPI: 1134502958		
UNIT: West 6 ROOM/BED: 631/B			DIAGNOSIS CODES		
ORDER DATE/TIME:			Z23		
COLLECTION DATE/TIME:			FASTING: Y / N		
Responsible Party			TEST LIST		
NAME: Citadel Rehabilitation and Nursing Center at Kingsbridge ADDRESS: 3400 Cannon Place Bronx, NY 10463			NASOPHARYGEAL SWAB FOR COVID 19, INFLUENZA ANTIGEN A&B AND RSV DUE 2/22/21 AND PRN		
Primary Billing (INSURANCE)					
INS NAME: PAYOR CODE: GROUP #: ADDRESS: SUBSCRIBER#:					
2nd Billing (INSURANCE)					
INS NAME: PAYOR CODE: GROUP #: ADDRESS: SUBSCRIBER#:					
		INTERNAL CONTROL			
___ L-Lav ___ Cultrt ___ R-Red ___ S-SST ___ GY-Grey ___ Lt. Blue ___ Black & Yellow Tube ___ G-Green ___ Y-Yellow ___ W-PPT ___ RB-Royal Blue ___ Strl Cup ___ Viral Cul ___ O&P ___ BLD Cul ___ FS-Froz ___ Slide ___ Thinprep Vial ___ Rand Urine Cup ___ 24 hr ___ U-Urn Tube ___ Timed ___ BORICULT					
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