

		Centers Laboratory Inc.	Client Information	
			ACCOUNT: Bronx Gardens Rehabilitation and Nursing Center 2175 Quarry Road Bronx, NY 10457	
Patient Information			Ordering Physician Information	
NAME: Cunningham, Kenneth			PHYSICIAN NAME: Navarro Oviedo, Aldo Manuel	
D.O.B.: 12/17/1947 SEX: Male			UPIN:	
I.D.: 6830 S.S.N: 053-52-0368			NPI: 1235487703	
UNIT: Unit 7 ROOM/BED: 706/A			DIAGNOSIS CODES	
ORDER DATE/TIME:			Z29.9	
COLLECTION DATE/TIME:				
			FASTING: Y / N	
Responsible Party			TEST LIST	
NAME: Bronx Gardens Rehabilitation and Nursing Center ADDRESS: 2175 Quarry Road Bronx, NY 10457			Covid 19 Swab	
Primary Billing (INSURANCE)				
INS NAME: MA G PAYOR CODE: GROUP #: ADDRESS: , SUBSCRIBER#: ME85248D				
2nd Billing (INSURANCE)				
INS NAME: MC G PAYOR CODE: GROUP #: ADDRESS: , SUBSCRIBER#: 6QU0AQ5FD16				
		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				
LAB I.D. #				

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