precision diagnostics

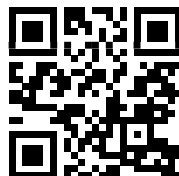# SPECIMEN PROCESSING CHECKLIST:
ONLINE

1. Treating Provider identifies patient to be tested based on medical necessity.
2. Patient takes a urine collection cup or Quantisal® oral fluid collection device and provides a sample. Once sample is collected from the patient place the provided barcode label, which includes at least two patient identifiers, over the device.
3. Have the patient initial the barcode label once the label is affixed on specimen device. This is good practice and recommended, but not required.
4. Go to www.precisiondxlab.com, click on Client Resources, and then Client Login.
5. Login using your unique login identification which includes your Lab Username and Password.
6. Once logged in, you will be directed to the iConnect "Dashboard"
7. To create an order, select the tile "Create Test Order" or tab 'Test Order'
   i. Enter or scan the unique barcode number that is placed over the device into the Specimen ID Field
   ii. Click in the empty box next to "Physician Name". Select the appropriate treating provider and select 'Apply Selected' to proceed.
   iii. To select an existing patient, click in the empty box next to 'Last Name', search for the intended patient, click on patient entry and select "Apply Selected". The patient information will populate appropriately.
      - You can select 'Add New' if the intended patient is a new patient and complete required areas indicated in red
   iv. To enter the insurance information, click in the empty box next to 'Insurance Name.' Select from a previously used insurance for the patient, or you can also select 'Add New' to update or add insurance for the indicated patient.
      - You may also make a copy of the patient's health insurance and place it into the specimen bag.
   v. Select diagnosis code(s) provided by the treating provider.
   vi. Collection time and date will be recorded automatically once the test order page is loaded. Please update if the date of collection and date of submission are different.
   vii. Select Specimen Type: Urine or Oral Fluid.
   viii. Optional: To Record POC results, expand the drop-down menu.
   ix. Select your testing option. Options include 'Perform Custom Profile,' if one has been established, or select the individual test(s) based on medical necessity.
   x. Select medication(s) by typing in the desired medication or selecting from the provided list.
   xi. Indicate the specimen collector in the 'Collector's Initials' field.
   xii. Carefully review all fields to ensure information accuracy, then click on 'Submit' on the bottom right corner.
   xiii. Once submitted, you'll receive a 'Certification of Test Order' agreement followed by a confirmation window.
8. Please be sure the specimen device is secure preventing any leaks in transit to the laboratory.
9. Place the device into the biohazard specimen bag and ensure the bag is sealed.
10. Place the biohazard specimen bag into the shipping bag (FedEx/UPS) and affix the shipping label to the outside of the package.
11. Schedule a FedEx or UPS pickup by calling 800-635-6901 Option 3.
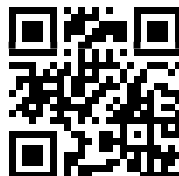
iConnect Guide PDF

SPECIMEN PROCESSING CHECKLIST:
PAPER

1. Treating provider identifies patient to be tested based on medical necessity.
2. Patient takes a urine collection cup or Quantisal® oral fluid device and provides a sample.
3. Once the sample is collected from the patient and place the provided barcode label on the top left corner of the requisition, which includes at least two patient identifiers, over the device. This is good practice and recommended, but not required.
4. Have the patient initial the barcode label once the label is affixed on the specimen device
5. Accurately and thoroughly complete the patient information on the requisition form. At minimum, please include full patient name, date of birth and gender matching the patient identifiers indicated on the barcode label.
   -You may also include a copy of the demographic sheet and send it with the sample
6. Indicate specimen type, urine or oral fluid along with the date of collection. You may also include a copy of the demographic sheet and send it with the sample.
7. Indicate the diagnosis codes provided by the treating provider.
8. Optional: To record POC results, please indicate in appropriate area on requisition form.
9. Select your testing option. Options include 'Perform Custom Profile,' if one has been established, or select the individual test(s) based on medical necessity.
10. Select medication(s) from the provided list on the requisition form or make a copy of patient's medication list and place into the biohazard specimen bag.
11. Make a copy of the patient's health insurance and place it into the biohazard specimen bag.
12. Have the treating provider sign and date the bottom of the requisition form before completion. This is good practice and recommended, but not required.
13. Review the requisition form to ensure all necessary information has been completed.
14. Please ensure that the specimen device is properly sealed to prevent any leaks in transit.
15. Fold the requisition form along with any other patient demographics (insurance, medication lists, etc.) into fourths and place the information in the back pocket of the biohazard specimen bag.
16. Place the specimen in the front of the biohazard specimen bag and ensure the bag is sealed.
17. Place the specimen bag into the shipping bag (FedEx/UPS) and affix the shipping label to the outside of the package.
18. Schedule a FedEx or UPS pickup by calling 800-635-6901 Option 3.

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