

Date: \_\_\_\_\_ Collection Time: \_\_\_\_\_

Please check involved eye:  Right  Left  Both

Diagnosis: \_\_\_\_\_  
 Conjunctivitis Clinical Onset \_\_\_\_\_  
 Keratitis  
 Blepharitis  
 Other: (diagnostic code) \_\_\_\_\_

Treatment Instituted: \_\_\_\_\_

Source of Specimen: Cornea \_\_\_\_\_ Conj. \_\_\_\_\_ Lids \_\_\_\_\_

Other: \_\_\_\_\_

Tests Requested\* (CPT Code)  
 Bacterial Culture Aerobic (87070)  HSV 1+2 AmpliVue (87529)  
 Fungal Culture (87102)  HSV 1+2 PCR (87529)  
 Smear Gram/Giemsa (87205)  ADV PCR (87798)  
 Acanthamoebae Culture (87081)  Chlamydia NAAT (87491)  
 Acanthamoebae PCR (87798)  Other PCR \_\_\_\_\_  
 Other Culture \_\_\_\_\_

\* Antibiotic susceptibilities and bacterial/fungal I.D.s will be performed on clinically appropriate pathogens for additional charges unless otherwise notified.

Patient Name: \_\_\_\_\_

Medical Record No.: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Physician/Location: \_\_\_\_\_

Patient Referred to: \_\_\_\_\_

Medicare and Medicaid will only pay for those tests which are medically necessary for the diagnosis or treatment of a beneficiary. You, the ordering physician are responsible for assuring the medical necessity of the testing order. The Office of the Inspector General for The Federal Department of Health Services considers the ordering of medically unnecessary tests to be an abusive and/or fraudulent practice which can subject the person ordering the tests to sanctions or remedies available under civil, criminal or administrative law.

## THIS SPACE FOR RESULTS ONLY

Bacitracin _____ mm	Tobramycin _____ mm
Erythromycin _____ mm	Sulfa _____ mm
Vancomycin _____ mm	Amikacin _____ mm
Gentamicin _____ mm	Ceftazidime _____ mm
Ciprofloxacin _____ mm	Azithromycin _____ mm
Ofloxacin _____ mm	Ampicillin _____ mm
Trimethoprim _____ mm	Clindamycin _____ mm
Polymyxin B _____ mm	Moxifloxacin _____ mm
Cefazolin _____ mm	Cefoxitin _____ mm

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Trimethoprim _____ mm	Clindamycin _____ mm
Polymyxin B _____ mm	Moxifloxacin _____ mm
Cefazolin _____ mm	Cefoxitin _____ mm

Received: \_\_\_\_\_

Out: \_\_\_\_\_