

Kelsey-Seybold Clinic has a standardized process for receiving radiology and laboratory orders from non-Kelsey physicians participating in **capitated health plans** (generally identified by “*KelseyCare*”, *Capitated* or *Marketplace* in the plan name. You can also refer to the Managed Care Resource Guide.)

To ensure a timely and seamless experience for patients and plan members, **please submit orders via the appropriate fax/e-fax, or email addresses listed below.**

When orders are faxed to Kelsey-Seybold, they are entered directly into the electronic medical record (EMR) system. Submitting orders via fax or e-fax helps ensure they are processed and available in advance, allowing for faster service when the patient arrives at a Kelsey location.

Laboratory Orders	Radiology Orders
<p>Complete & Submit the Laboratory Services Test Requisition Form to:</p> <p>Fax to (713) 442-2806, or Email to - labserviceslaborders@kelsey-seybold.com</p> <p>When possible, provide the patient with a printed copy to bring to their visit at Kelsey.</p> <p>Retain a copy for your records.</p>	<p>Complete & Submit the Imaging Order Form to:</p> <p>Fax to (713) 442-1176, or Email to - radorders@kelseyseybold.com</p> <p>When possible, provide the patient with a printed copy to bring to their visit at Kelsey.</p> <p>Retain a copy for your records.</p>

What should my patient do next?

- Patients can visit any Kelsey-Seybold location for laboratory or radiology services.
 - Note: Some radiology services require a scheduled appointment—refer to the radiology order form for details.
- Upon arrival, patients will be directed to the appropriate check-in desk.
- Patients will be responsible for paying any applicable cost-share.
- After check-in, they will proceed to the Lab/Radiology waiting area until called for their service

What if orders weren't sent electronically?

- Patients whose orders have not been submitted electronically may experience longer wait times upon arrival.
- If a patient brings only paper orders and they have not been sent ahead electronically, Kelsey-Seybold must complete an internal processing step.
- This process typically takes 15-30 minutes, which may delay service.

How does our office view the results?

- Results are automatically faxed to the affiliate provider's default number on file in Epic, with an additional copy sent to the fax number listed on the requisition.
- Results can be accessed in Epic through **Care Everywhere**.
- When a Kelsey PCP places the order, they have the option to CC the affiliate provider on the results at the time of ordering.

Patient Legal Name (Last, First, MI):		Legal Sex:
Date of Birth (MM/DD/YYYY):		
Patient Phone Number:	Health Plan:	

Fax completed form to (713)-442-2806, and keep a copy for your records.	
Order Priority (Circle one):	
Stat	Routine

Physician NPI #:		Physician Phone Number:
Physician Last Name:	Physician First Name:	Physician's Address:
Physician/Authorized Signature:		Physician's Fax number:

ICD-10 Diagnoses Codes

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Order Code	Organ or Disease Panels
LS322758	Basic Metabolic Panel (8)
LS322000	Comp Metabolic Panel (14)
LS303755	Electrolyte Panel
322744	Acute Hepatitis Panel
LS322755	Hepatic Function Panel
LS322777	Renal Function Panel
LS221010	Lipid Panel
LS231950	OB Panel with HIV
	Hematology/Coagulation
LS005009	CBC/D+PL
LS028142	CBC
LS031088	H/H
LS005249	PL Count
005215	ESR
LS005280	Retic
LS005199	PT/INR
LS005207	PTT
LS115188	D-dimer
LS377036	UA/M with Culture Reflex
LS003384	Urinalysis w/no Micro
LS004036	Urine Preg

Order Code	Alphabetical Test
LS001081	Albumin
LS001107	Alk Phosphatase
LS001545	ALT(SGPT)
LS001396	Amylase
LS001123	AST(SGOT)
000810	B12 and Folate
LS015602	Bilirubin, Total
LS001040	BUN
LS001016	Calcium
006627	C-Reactive Protein
002139	CEA
LS001065	Cholesterol
LS001370	Creatinine
004515	Estradiol
004598	Ferritin
028480	FSH and LH
LS001958	GGT
LS001032	Glucose
LS004416	HCG, Beta Subunit
LS001925	HDL Cholesterol
001453	Hgba1c
001321	Iron and TIBC
LS001115	LDH

Order Code	Alphabetical Test
LS001537	Magnesium
LS006189	Mononucleosis, qual
LS001024	Phosphorus
LS001180	Potassium
LS015610	PTH
LS004465	Prolactin
480772	PSA
202945	Rubella, IgG
LS006072	RPR
LS001198	Sodium
LS004226	Testosterone
LS001172	Triglyceride
LS004259	TSH
LS349829	TSH RFX on Abnormal to Free T4
LS001057	Uric Acid
LS081950	Vitamin D, 25 Hydroxy
Microbiology/Waived (Must be collected by RTC)	
87804LS	FLU
87807LS	RSV
87880LS	Strep
85610LS	COAGUCHEK XS PT/INR
85610LS	COVID (Pedi only)
139900	COVID (Huntsville)

Test Number	Test Description
LS183194	Chlamydia/GC Amplification (pt collect)
008847	Urine Culture, Routine
LS188052	Trichomonas (pt collect urine/vaginal swab)

Test Number	Test Description
182949	Occult Blood, Fecal, IA
480772	PSA Total (Reflex to Free)
006502	Rheumatoid Arthritis Factor

Write In:	
Test Description	(include additional tests on a separate page)

KEEP A COPY FOR YOUR RECORDS

Fax this form to:

(713)442-2806 (Routine orders)

(713)442-2807 (Urgent orders)

Or eFax to: LabServicesLabOrders@Kelsey-Seybold.com

If faxing is not available, please print a copy for the patient to bring to the front desk of a Kelsey-Seybold Clinic location.

Kelsey-Seybold Clinic

Imaging Order

KSC Radiology Scheduling

Phone: 713-442-1161 Fax: **713-442-1176** or radorders@kelsey-seybold.com

Please fill out form in its entirety

If the exam is to be scheduled in advance, please fax to Kelsey-Seybold Clinic

If you have not heard from us in 3-5 Business Days, give us a call at 713-442-1161

Priority

Routine

Urgent

Patient Name:	DOB:	Patient Phone:
Today's Date:		ICD 10 Codes:
Stat Report Call To:	Phone:	Fax:

Routine x-rays do not require a scheduled appointment

i.e. CXR, extremities, KUB, etc.

When entering the order please be specific about laterality and number of views if applicable

Order:

Left Right Bilateral

ICD-10

Diagnosis/Reason for Exam:

Appointment Required for the Following Modalities

Mammography, Ultrasound, Computed Tomography (CT), MRI, Fluoroscopy, Nuclear Medicine, Bone Density

Order:

ICD-10

Diagnosis/Reason for Exam:

Notes/Comments:

Authorized Practitioner (print):

Authorized Practitioner Signature: