

1 Patient Information

Last Name / First Name /		☐ Male ☐ Female
Address		Race: ☐ Asian ☐ Black ☐ Caucasian ☐ Hispanic ☐ Native American ☐ Other ☐ N/A
City / State / Zip / County		Ethnicity: ☐ Hispanic ☐ Non-Hispanic ☐ N/A
Phone	Email	
DOB	SSN	
Insurance	Subscriber ID	
Group #	Bill to: ☐ Insurance ☐ Facility ☐ Uninsured ☐ Patient	

2 Provider Information

Client Name / Account	
Address / APT#	
City / State / Zip	
Phone	Fax #
Ordering Provider	Collection Date
Specimen Collected	State Collected
	Collection Time

3 Medical Necessity

As part of my antibiotic stewardship policy, I find it medically necessary to rapidly determine and differentiate a viral and/or bacterial infection in order to treat with or without appropriate antibiotics. Having the most accurate and timely data available to me directly guides my treatment and patient management. Empiric treatment and management leads to inappropriate and unnecessary antibiotic use (50% according to the CDC) and delayed diagnosis which can lead to severe consequences.

Provider Signature _____ Date _____

4 Patient Notification

The information I have provided on this form is accurate. I authorize Streamline Scientific to release the results of this test to my treating physician or facility. I hereby authorize my insurance or other payment to Streamline Scientific for services I receive. I am aware that Streamline Scientific may be an out of network provider with my insurer. I am aware that I am responsible for all co-pays and deductibles not covered by insurance or other payers.

Patient Signature _____ Date _____

5 Panel List Select the panel or targets associated with this sample submission

☐ COVID-19 Only☐ COVID/Flu/RSV

- ☐ COVID-19 (Coronavirus)
☐ Influenza A & B
☐ RSV (types A & B)

☐ COVID Respiratory Lite

(includes all the pathogens in the panel)

- ☐ Haemophilus influenzae
☐ Moraxella catarrhalis
☐ Mycoplasma pneumoniae
☐ Strep. pyogenes (Group A)

☐ COVID Respiratory

(includes all the pathogens in the panel)

- ☐ Adenovirus
☐ Bocavirus
☐ Bordetella pertussis
☐ Chlamydia pneumoniae
☐ Coronavirus (229E, HKU1, NL63, OC43)
☐ EBV (mononucleosis)
☐ Enterovirus
☐ HMPV A & B
☐ Parainfluenza virus (type 1-4)
☐ Rhinovirus (type A&B)
☐ Staphylococcus aureus
☐ Streptococcus pneumoniae

☐ COVID Respiratory Plus☐ COVID Respiratory Plus w/Measles

(includes all the pathogens in the panel)

- ☐ Acinetobacter baumannii
☐ Enterobacter cloacae
☐ Klebsiella aerogenes
☐ Klebsiella pneumoniae
☐ Legionella pneumophila
☐ Proteus mirabilis
☐ Pseudomonas aeruginosa
☐ Staphylococcus epidermidis

ABX Resistance Marker

- ☐ Methicillin/Oxacillin (mecA)

ICD 10 CODES

- ☐ R09.81 Congestion
☐ J02.9 Pharyngitis
☐ R05.9 Cough, unspecified
☐ R50.9 Fever
☐ Z20.89 Exposure

COVID VACCINATION STATUS

- ☐ Z28.311 Partially vaccinated for COVID-19
☐ Z28.310 Unvaccinated for COVID-19
☐ Z28.39 Other underimmunization status

SPECIMEN SOURCE

- ☐ Nasal Swab
☐ Nasopharyngeal Swab
☐ Oropharyngeal Swab
☐ Ear Swab
☐ Sputum
☐ Other: _____

☐ UTI w/ ABX Resistance

- ☐ Acinetobacter baumannii
☐ Bacteroides fragilis
☐ Citrobacter braakii/freundii
☐ Citrobacter koseri
☐ Enterobacter cloacae
☐ Enterococcus spp.
☐ Escherichia coli
☐ Klebsiella aerogenes
☐ K. oxytoca/michiganensis
☐ Klebsiella pneumoniae
☐ Morganella morganii
☐ Proteus mirabilis
☐ Pseudomonas aeruginosa
☐ Serratia marcescens
☐ Staphylococcus aureus
☐ Staphylococcus epidermidis
☐ Staphylococcus saprophyticus
☐ Strep. pyogenes (Group A)
☐ Strep. pyogenes (Group A)

ABX Resistance Markers

- ☐ β -lactamase (blaKPC)
☐ β -lactamase (CTX-M-Group 1)
☐ Metallo- β -lactamase (blaNDM)
☐ Fluoroquinolones
☐ Methicillin/Oxacillin (mecA)
☐ Sulfonamides
☐ Trimethoprim
☐ vanA/vanB

☐ UTI Plus

(includes all the pathogens in the panel)

- ☐ Candida albicans
☐ Candida dubliniensis
☐ Candida glabrata
☐ Candida krusei
☐ Candida parapsilosis
☐ Candida tropicalis
☐ Mycoplasma genitalium
☐ Mycoplasma hominis
☐ Prevotella bivia
☐ Strep. agalactiae (Group B)
☐ Ureaplasma urealyticum

ICD 10 CODES

- ☐ R35.0 Frequency of Micturition
☐ Z22.39 Carrier of other specified bacterial disease
☐ R30.0 Dysuria
☐ N30.00 Acute cystitis without hematuria
☐ N30.20 Other chronic cystitis w/o hematuria
☐ N41.0 Acute prostatitis

SPECIMEN SOURCE

- ☐ Clean catch urine
☐ Urethral swab

☐ Wound/Derm w/ ABX Resistance

- ☐ Acinetobacter baumannii
☐ Bacteroides fragilis
☐ Citrobacter braakii/freundii
☐ Citrobacter koseri
☐ Enterobacter cloacae
☐ Enterococcus spp.
☐ Escherichia coli
☐ Klebsiella aerogenes
☐ K. oxytoca/michiganensis
☐ Klebsiella pneumoniae
☐ Morganella morganii
☐ Proteus mirabilis
☐ Pseudomonas aeruginosa
☐ Staphylococcus aureus
☐ Staphylococcus epidermidis
☐ Staphylococcus saprophyticus
☐ Strep. pyogenes (Group A)
☐ Varicella Zoster (Shingles)

ABX Resistance Markers

- ☐ β -lactamase (blaKPC)
☐ β -lactamase (CTX-M-Group 1)
☐ Metallo- β -lactamase (blaNDM)
☐ Fluoroquinolones
☐ Methicillin/Oxacillin (mecA)
☐ Sulfonamides
☐ Trimethoprim
☐ vanA/vanB

ICD 10 CODES

- ☐ L08.9 Local infection of the skin and subcutaneous tissue, unspecified
☐ Z22.39 Carrier of other specified bacterial diseases
☐ Z22.322 Carrier or suspected carrier of MRSA

SPECIMEN SOURCE

- ☐ Aspiration
☐ Other: _____

☐ Antibiotic Resistance

- ☐ β -lactamase (blaKPC)
☐ β -lactamase (CTX-M-Group 1)
☐ metallo- β -lactamase (blaNDM)
☐ Fluoroquinolones
☐ Methicillin/Oxacillin (mecA)
☐ Sulfonamides
☐ Trimethoprim
☐ Vancomycin (vanA, vanB)

ICD 10 CODES

- ☐ Z22.322 Carrier or suspected carrier of MRSA
☐ Z16.19 Resistance to other specified Beta Lactam antibiotics

☐ Vaginitis

- ☐ Atopobium vaginae
☐ Bacteroides fragilis
☐ BVAB-2
☐ Candida albicans
☐ Candida dubliniensis
☐ Candida glabrata
☐ Candida krusei
☐ Candida lusitanae
☐ Candida parapsilosis
☐ Candida tropicalis
☐ Chlamydia trachomatis
☐ Enterococcus spp.
☐ Escherichia coli
☐ Gardnerella vaginalis
☐ Haemophilus ducreyi
☐ HHV-1 & 2 (Herpes Simplex)
☐ Lactobacillus crispatus
☐ Lactobacillus gasseri
☐ Lactobacillus iners
☐ Lactobacillus jensenii
☐ Megaspheara Type 1 & 2
☐ Mobiluncus curtisii
☐ Mobiluncus mulieris
☐ Mycoplasma genitalium
☐ Mycoplasma hominis
☐ Neisseria gonorrhoeae
☐ Prevotella bivia
☐ Staphylococcus aureus
☐ Strep. agalactiae (Group B)
☐ Treponema pallidum
☐ Trichomonas vaginalis
☐ Ureaplasma urealyticum

ICD 10 CODES

- ☐ N76.0 Acute vaginitis
☐ N77.1 Vaginitis, vulvitis, & vulvovaginitis
☐ B87.3 Candidiasis of vulva & vagina
☐ Z30.9 Encounter for contraceptive management

SPECIMEN SOURCE

- ☐ Vaginal Swab

☐ STI

- ☐ Atopobium vaginae
☐ Chlamydia trachomatis
☐ Gardnerella vaginalis
☐ Haemophilus ducreyi
☐ HHV-1 & 2 (Herpes Simplex)
☐ Neisseria gonorrhoeae
☐ Treponema pallidum
☐ Trichomonas vaginalis

ICD 10 CODES

- ☐ N76.0 Acute vaginitis
☐ N89.8 Other specified noninflammatory disorders of vagina
☐ R36.9 Urethral discharge unspecified
☐ Z30.9 Encounter for contraceptive management

SPECIMEN SOURCE

- ☐ Urine ☐ Other: _____

☐ Gastrointestinal

- ☐ Adenovirus F40/F41
☐ Astrovirus
☐ Campylobacter
☐ C. coli, C. jejuni, C. lari, C. upsaliensis
☐ Cryptosporidium spp.
☐ Entamoeba histolytica
☐ Enterotoxigenic E.coli (ETEC)
☐ Enteroinvasive E.coli (EIEC)/Shigella spp.
☐ Shiga-like Toxin producing E.coli (STEC)
☐ Giardia lamblia
☐ Norovirus GI/GII
☐ Rotavirus A
☐ Salmonella spp.
☐ Vibrio spp.
☐ Yersinia enterocolitica

☐ Gastrointestinal with C. difficile Add On

- ☐ C. difficile (tcdA/tcdB)

ICD 10 CODES

- ☐ R19.7 Diarrhea, unspecified
☐ A06.0 Acute Dysentery
☐ R50.9 Fever
☐ E86.0 Dehydration

SPECIMEN SOURCE

*Cary-Blair media required

- ☐ Rectal Swab ☐ Other: _____
☐ Stool Specimen

☐ Fungal Infection

- ☐ Alternaria spp.
☐ Aspergillus spp.
☐ Candida albicans
☐ Candida glabrata
☐ Candida krusei
☐ Candida parapsilosis
☐ Candida tropicalis
☐ Cryptococcus spp.
☐ Curvularia spp.
☐ Epidermophyton floccosum
☐ Fusarium spp.
☐ Malassezia spp.
☐ Meyerozyma guilliermondii
☐ Microsporium canis
☐ Sarcocladium strictum
☐ Scytalidium dimidiatum
☐ Trichophyton anthropophilic spp.
☐ Trichophyton zoophilic spp.
☐ Trichosporon spp.

☐ Bacterial Add On

- ☐ Pseudomonas aeruginosa
ABX Resistance Markers
☐ Methicillin/Oxacillin (mecA)

ICD 10 CODES

- ☐ B35.1 Onychomycosis

- ☐ ☐

SPECIMEN SOURCE

- ☐ Nail Clipping ☐ Other: _____
☐ Skin Scraping

☐ Candida

- ☐ Candida albicans
☐ Candida dubliniensis
☐ Candida glabrata
☐ Candida krusei
☐ Candida lusitanae
☐ Candida parapsilosis
☐ Candida tropicalis

ICD 10 CODES

- ☐ N76.0 Acute Vaginitis
☐ N89.8 Other specified noninflammatory disorders of vagina

SPECIMEN SOURCE

- ☐ Urine ☐ Other: _____

6 Result Interpretation and Prescriptive Guidance Report*

☐ Yes ☐ No

7 Please indicate if your patient has taken antibiotics in the past 72 hours:

☐ Yes ☐ No