



LABORATORY OF FLORIDA
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www.LabFlorida.com





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Thank you for using LabFlorida services!

Account Number:	
User Name:	
Password:	
Contacts for Customer Service & Support:	
Account Manager:	
Account Manager:	
Lab Manager:	Roberto Rodriguez (813) 885-7755

Welcome to MyLabFlorida Orders & Results | www.MyLabFlorida.com

MyLabFlorida.com is an Internet-based solution for LabFlorida clients who seek an alternative to a comprehensive Electronic Health Record (EHR) system. MyLabFlorida Orders & Results provides electronic lab test ordering, online delivery and viewing of lab results. With MyLabFlorida.com, you can view patient results... anytime... anywhere!

How to order

1. Open Internet Explorer on your computer and type the following URL in the address bar: www.MyLabFlorida.com.
2. Add the website to your Favorites and create a shortcut on your desktop.
3. Login using the info in the table above.

Other options:

1. Use digital version of LabFlorida requisition form (<http://www.mylabflorida.com/order/> or provided to you by e-mail). Fill the order, save in the patient's folder/chart and e-mail it to service@labflorida.com or print and fax to (813) 885-6688.
2. Use paper requisition to fax orders to (813) 885-6688.

Results will be posted at www.MyLabFlorida.com, and faxed as instructed in the order.



Guidelines for Sending Lab Testing to LabFlorida

Lab Test Orders

Please use MyLabFlorida.com for online lab work orders, LabFlorida Requisition or physician's prescription. Online ordering is the preferred method.

The following information must be provided for each order:

1. Full Legal Name of the Patient
2. Patient's address and phone
3. Patient's ID, date of birth and Social Security Number
4. Other clinical information: gender, specimen source, fasting status, STAT
5. Physicians name, address and NPI number
6. Panels and Tests ordered
7. Diagnosis and/or ICD-9 or ICD-10 codes
8. Insurance or billing information
9. Other clinical information necessary to process the lab work request

Note: If using physician prescription advise patient they will be required to provide insurance information or copy of insurance card on date of collection to the laboratory prior to specimen collection.

**PLEASE MAKE SURE TO PROVIDE ACCURATE AND
COMPLETE INFORMATION.**

*Errors and missing information create problems for
ordering physicians and for the lab. Failure to provide
all required information may delay testing and
reporting.*



Lab Order NOT Accepted

URGENT	To:	Date:	Follow up:
	Fax:	Pages:	
	Phone:		
	Re:	<i>Missing Patient Information</i>	

WE CANNOT PROCESS YOUR LAB ORDER!
Accurate and complete patient information is required

Please complete and fax ASAP to 813-885-6688 or service@LabFlorida.com:

Patient's Name (Last, First, Other):		
DOB:	SS#	Other:

Provide the following:	Medicare Card:	Medicaid Card:
	Other Insurance:	
	Diagnosis for ordered tests:	
	Diagnosis codes for ordered tests:	
	Physician's name/NPI Number:	
	Other:	

The form was completed by:	Name/Title:		
	Signature:		Date:

The contents of this message and any attachments are intended solely for the addressee(s) named in this message. This communication is intended to be and to remain confidential and may be subject to applicable attorney/client and/or work product privileges. If you are not the intended recipient of this message, or if this message has been addressed to you in error, please immediately alert the sender then destroy this message and its attachments. Do not deliver, distribute or copy this message and/or any attachments and if you are not the intended recipient, do not disclose the contents or take any action in reliance upon the information contained in this communication or any attachments.

Receipt of Specimens into the Laboratory

The samples will be entered into the laboratory information system (LIS) upon receipt into the laboratory. The lab requisition is reviewed for complete and accurate information. The date and time of receipt into the lab is verified to ensure proper storage and transport guidelines have been followed.

If there is any question as to integrity of the specimens, testing to be ordered, any missing information, etc. the processor will add additional comments to the requisition which will initiate a “Lab Order NOT Accepted” alert faxed to the ordering physician/facility for completion (see Exhibit enclosed). The form must be completed and returned to LabFlorida ASAP to insure timely processing and reporting.

**LABFLORIDA IS NOT RESPONSIBLE FOR DELAYS OR
REJECTIONS CAUSED BY INCOMPLETE INFORMATION OR
FAILURE TO RESPOND TO INFORMATION REQUESTS
WITHIN TWO (2) DAYS.**

Reporting Results

1. Results are reported via MyLabFlorida.com, fax, e-mail, EMR/EHR, etc. – as requested by the client.
2. The Physician or client will be notified immediately of any Critical Results.
3. STAT results are to be completed within 4 hours of collection.
4. Routine testing performed in-house will be completed within 24 hours of collection.

Patient Instruction for Samples Collection

Clean Catch Urine Collections

Females

1. Wash hands. Wash the vulvar area well from the front to the back with a towelette: twice using a fresh towelette each time.
2. With one hand, separate the labia and lean slightly forward so that the urine flows directly down into the toilet without running along the skin.
3. After voiding the first portion of urine, with the other hand, place a clean container under the stream of urine and collect a sample.
4. Do not touch the inside of the container.
5. Make sure your first name and last name is on the cup.
6. Return the container with urine to the collection center or lab within 1 hour of collection. The sample can be refrigerated up to 24 hours until delivery to the lab.

Males

1. Use a towelette to wash the end of the penis. Twice using a fresh towelette each time.
2. Begin to urinate into the toilet.
3. After voiding the first part, place a clean, sterile container under the stream of urine and collect the rest of the urine except the very last part.
4. Do not touch the inside of the container.
5. Make sure your first and last name is on the cup.
6. Return the container with urine to the collection center or lab within 1 hour of collection. The sample can be refrigerated up to 24 hours until delivery to the lab.

IF COLLECTING THE SAMPLE AT HOME OR IN AN ALF OR NURSING FACILITY, PLEASE REFRIGERATE THE SAMPLE UNTIL IT CAN BE DELIVERED TO THE LABORATORY.

24 Hour Urine Collection

Because proper collection and preservation of 24-hour urine specimens are essential for accurate test results, patients should be carefully instructed in the correct procedure.

Important Note: For those analyses requiring the addition of 6N HCl, add the acid at the start of collection. Have the patient collect each voiding in a smaller container and carefully pour the urine into the 24-hour container to avoid any possible acid burns to the patient (make sure the patient understands the hazard presented by the acid preservative). Be sure to mix urine thoroughly before removing the aliquot.

Follow these instructions if someone other than the patient is to collect the urine:

1. Unless the physician indicates otherwise, instruct the patient to maintain the usual amount of liquid intake, but to avoid alcoholic beverages.
2. During the collection period, place the 24-hour urine container (with appropriate preservatives, if applicable) provided by Quest Diagnostics in a refrigerator or cool place to prevent growth of microorganisms and possible decomposition of urine constituents. (See specimen requirements for the individual tests in the General Test Listing section for any information on required preservatives.)
3. Have the patient empty his/her bladder in the morning into the toilet (not to be included in the 24-hour collection). Write the date and time of voiding on the container label.
4. Collect the patient's next voiding and add it as soon as possible to the 24-hour container.
5. Add all subsequent voidings to the container as in (4). The last sample collected should be the first specimen voided the following morning at the same time as the previous morning's first voiding.
6. Mix the contents of the container gently but thoroughly. Examine to ensure that the contents appear homogeneous.
7. Measure and note the total volume of urine.
8. Transfer the required aliquot to the plastic screw-cap plastic containers provided by Quest Diagnostics.
9. Record the total 24-hour urine volume on the specimen container and on the Test Requisition (Field 7 on the sample physician requisition) before sending to the laboratory.
10. If required, refrigerate the aliquot until it can be sent to the laboratory. For frozen specimens, freeze before packing in dry ice for transport. (See section on FROZEN SPECIMENS.)
11. Ensure the lid is properly tightened to prevent leakage.

Follow these instructions if the patient is to collect the urine:

Important Note: For those analyses requiring the addition of 6N HCl, add the acid to the 24-hour container at the start of collection. Have the patient collect each voiding in a smaller container and carefully pour the urine into the 24-hour container to avoid any possible acid burns to the patient (make sure the patient understands the hazard presented by the acid preservative). Be sure to mix urine thoroughly before removing the aliquot.

Give the patient the clean, labeled container provided by Quest Diagnostics, and instruct patient not to remove any preservatives (powder, liquid or tablet) that may be in the container. Alert the patient that preservatives are hazardous chemicals and are not to be ingested.

- Unless the physician indicates otherwise, instruct the patient to maintain the usual amount of liquid intake, but to avoid alcoholic beverages.
- Instruct the patient to carry out steps 3-5 above and return the 24-hour collection to your office for specimen pick-up.

Stool for Culture Collection

Follow these instructions:

1. Do not use antacids, barium, bismuth, antidiarrheal medication or oily laxative prior to collection of the specimen.
2. Place the collection hat into the commode.
3. Be careful to not contaminate the stool specimen with urine.
4. Collect the stool specimen in the collection hat provided.
5. Open the transport vial containing transport medium.
6. Use the collection spoon built into the lid, obtain scoops of stool from areas that appear bloody, slim, or watery and place then into the vial until the volume rises to the red line (fill to here). If the stool is formed (hard), sample small amounts from each end and the middle of the bolus.
7. Mix the contents of the vial with the spoon, twist the cap tightly closed, and shake until the contents are well mixed.
8. Label the transport medium with your first and last name and date it.
9. Bring to the laboratory as soon as possible. Specimen is stable in the Transport medium at room temperature for 96 hours.

Caution:

1. Avoid contact of C&S Solution with skin or eyes.
2. Transport medium solution is an irritant.
3. Should contact occur, flush with running water.
4. If irritation develops, contact a physician.

Sputum Collection

Supplies:

50mL Conical Centrifuge Tube or a Sterile Screw Cap Cup

Follow these instructions:

1. The preferred sputum specimen is an early morning expectorated sample obtained after a deep cough.
2. Rinse mouth with water before sputum is collected.
3. Avoid adding saliva or nasopharyngeal discharges to the sputum sample to avoid contamination by indigenous microorganisms.
4. Cough deeply and from the lungs bring up sputum and spit it into the container provided.
5. Screw the cap on tightly.
6. Label the container with both your first and last name.
7. Bring to the laboratory immediately.
8. Specimen is stable at room temperature up to 2 hours.

Stool for Ova and Parasite

Supplies:

- Ova and Parasite Para Pak that includes one vial of 10% Formalin and one vial of Zn-PVA
- Collection Hat for the Commode

Follow these instructions:

1. Do not use antacids, barium, bismuth, antidiarrheal medication or oily laxative prior to collection of the specimen
2. Place the collection hat into the commode.
3. Be careful to not contaminate the stool specimen with urine.
4. Collect the stool specimen in the collection hat provided.
5. Open the transport vial containing 10% Formalin.
6. Use the collection spoon built into the lid, obtain scoops of stool from areas that appear bloody, slim, or watery and place then into the vial until the volume rises to the red line (fill to here). If the stool is formed (hard), sample small amounts from each end and the middle of the bolus.
7. Mix the contents of the vial with the spoon, twist the cap tightly closed, and shake until the contents are well mixed.
8. Open the transport vial containing zinc=polyvinyl alcohol (PVA).
9. Use the collection spoon built into the lid, obtain scoops of stool from areas that appear bloody, slim, or watery and place then into the vial until the volume rises to the red line (fill to here). If the stool is formed (hard), sample small amounts from each end and the middle.
10. Mix the contents of the vial with the spoon, twist the cap tightly closed, and shake until the contents are well mixed.
11. Label both vials with your first and last name.
12. It is important to indicate specimen consistency (formed, soft, loose, or watery) by checking the appropriate box on the transport vial label.

13. Bring to the laboratory as soon as possible. Specimen is stable for 1 week at room temperature.
14. Return the vials to the Ziploc bag, seal the bag.

Caution:

1. Avoid contact of fixative solutions with the skin and eyes.
2. Should contact occur, flush with running water.
3. If irritation should develop, see a physician.
4. Fixative solutions are poisonous. If ingested, call a physician immediately.

Stool for C. Difficile Toxin

Supplies:

- Collection Hat for the Commode
- Sterile Cup
- Plastic Spoon

Follow these instructions:

1. Place the collection hat in the commode.
2. Be careful to not contaminate the stool specimen with urine.
3. Collect the stool specimen in the collection hat provided.
4. Use a disposable spoon and fill the sterile cup with the stool specimen
5. Screw the lid on the cup tightly.
6. Label the container with your first and last name.
7. Store at refrigerated temperature.
8. It is preferred that the specimen be brought to the lab within 24 hours. If it cannot be brought to the lab within 48 hours then freeze. Stable 7 days frozen.

STAT Testing

A “STAT” test request is an order that needs to be processed and resulted within 1 hour of receipt into the lab or 4 hours after collection.

Procedure:

1. The “STAT” field in the requisition must be checked by the client, and the order must be clearly ordered as a STAT order.
2. The specimen is requisitioned in the processing department and ordered as “STAT” priority.
3. The processing staff will immediately deliver the sample to the lab department and notify the Technical Staff of the STAT request.
4. Technical Staff will analyze and report the sample as soon as possible. Documentation will be noted in the LIS as to time/date and to whom the report was given to.

Reporting:

Client and any additional medical providers listed on the order will be notified by fax. All test results will also be posted on MyLabFlorida as soon as released by the lab technologist.

Critical Lab Results

LabFlorida has established critical values for test results that are life threatening. When the laboratory reports a critical value, the technical staff will notify the Physician, client or medical facility of the critical result. Documentation as to the call and who was notified of the result will be noted on the lab report.

Infectious & Parasitic Diseases

054.9	Herpetic disease, uncomplicated
053.9	Herpes zoster, NOS
075	Infectious mononucleosis
034.0	Strep throat
079.99	Viral infection, unspec.
078.10	Warts, viral, unspec.

Neoplasms

239.2	Skin, soft tissue neoplasm, unspec.
216.9	Skin, unspec.

Endocrine, Nutritional & Metabolic Disorders

Endocrine	
250.01	Diabetes I, uncomplicated
250.91	Diabetes I, w/ unspec. complications
250.00	Diabetes II, uncomplicated
250.90	Diabetes II, w/ unspec. complications
242.90	Hyperthyroidism, NOS
244.9	Hypothyroidism, unspec.
Metabolic/Other	
274.9	Gout, unspec.
272.0	Hypercholesterolemia, pure
272.2	Hyperlipidemia, mixed
278.00	Obesity, NOS
278.02	Overweight

Blood Diseases

285.9	Anemia, other, unspec.
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Mental Disorders

300.00	Anxiety state, unspec.
314.00	Attention deficit, w/o hyperactivity
290.0	Dementia, senile, uncomplicated
311	Depressive disorder, NOS

Nervous System & Sense Organ Disorders

Nervous System Diseases	
354.0	Carpal tunnel
345.90	Epilepsy, unspec., not intractable
346.90	Migraine, unspec., not intractable
Eye Diseases	
372.30	Conjunctivitis, unspec.
368.10	Visual disturbance, unspec.
Ear Diseases	
380.4	Cerumen impaction
389.9	Hearing loss, unspec.
380.10	Otitis externa, unspec.
382.00	Otitis media, acute

Circulatory System

Arrhythmias	
427.31	Atrial fibrillation
Cardiac	
413.9	Angina pectoris, NOS
414.9	Chronic ischemic heart disease, unspec.
428.0	Heart failure, congestive, unspec.
424.1	Heart valve, aortic, not rheum.
Vascular	
796.2	Elevated BP w/o hypertension
401.1	Hypertension, benign
458.0	Hypotension, orthostatic
443.9	Peripheral vascular disease, unspec.
451.9	Thrombophlebitis, unspec.
459.81	Venous insufficiency, unspec.

Supplemental Classification

V25.01	Contraception, oral
V25.02	Contraception, other (diaphragm, etc.)
V01.9	Exposure, infectious disease, unspec.
V72.31	Gynecological exam

Respiratory System

Lower Respiratory Tract	
493.90	Asthma, unspec.
466.0	Bronchitis, acute
496	COPD, NOS
486	Pneumonia, unspec.
Upper Respiratory Tract	
462	Pharyngitis, acute
477.9	Rhinitis, allergic, cause unspec.
461.9	Sinusitis, acute, NOS
465.9	Upper respiratory infection, acute, NOS

Digestive System

578.1	Blood in stool, melena
564.00	Constipation, unspec.
562.10	Diverticulosis, colon
562.11	Diverticulitis of colon, NOS
535.50	Gastritis, unspec., w/o hemorrhage
558.9	Gastroenteritis, noninfectious, unspec.
530.81	GERD, no esophagitis
455.6	Hemorrhoids, NOS
564.1	Irritable bowel syndrome

Genitourinary System

Urinary System Diseases	
592.9	Calculus, urinary, unspec.
595.0	Cystitis, acute
599.70	Hematuria, unspec.
593.9	Renal insufficiency, acute
599.0	Urinary tract infection, unspec./pyuria
Male Genital Organ Diseases	
607.84	Impotence, organic
302.72	Impotence, psychosexual dysfunction
601.9	Prostatitis, NOS
Breast Diseases	
611.72	Breast lump
Female Genital Organ Diseases	
V13.22	Cervical dysplasia, past history
616.0	Cervicitis
616.10	Vaginitis/vulvitis, unspec.
Disorders of Menstruation	
626.0	Amenorrhea
627.9	Menopausal disorders, unspec.
626.2	Menstruation, excessive/frequent
625.3	Menstruation, painful
626.6	Metrorrhagia
Pregnancy, Childbirth	
641.90	Bleeding in pregnancy., unspec.
V24.2	Postpartum follow-up, routine
V22.2	Pregnant state, incidental
V22.0	Prenatal care, normal, first pregnancy
V22.1	Prenatal care, normal, other pregnancy

Skin, Subcutaneous Tissue

706.1	Acne, other
702.0	Actinic keratosis
682.9	Cellulitis/abscess, unspec.
692.9	Contact dermatitis, NOS
691.8	Eczema, atopic dermatitis
703.0	Ingrown nail
110.1	Onychomycosis
709.9	Other skin disease, unspec.
696.1	Psoriasis, NOS
695.3	Rosacea
706.2	Sebaceous cyst
702.19	Seborrheic keratosis, NOS
707.9	Ulcer, skin, chronic, unspec.
708.9	Urticaria, unspec.
V06.8	Immunization, combination, other
V06.1	Immunization, DTP
V04.81	Immunization, influenza
V25.2	Sterilization

Musculoskeletal & Connective Tissue

General	
716.90	Arthropathy, unspec.
729.1	Fibromyalgia/myositis, unspec.
715.90	Osteoarthritis, unspec.
733.00	Osteoporosis, unspec.
714.0	Rheumatoid arthritis (not JRA)
727.00	Synovitis/tenosynovitis, unspec.
Lower Extremity	
729.5	Pain in limb
Spine/Torso	
724.4	Back pain w/ radiation, unspec.
723.9	Cervical disorder, NOS
Upper Extremity	
726.10	Rotator cuff/shoulder syndrome, unspec.

Perinatal (Infant)

779.31	Feeding problem, newborn
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Signs & Symptoms

789.00	Abdominal pain/colic, unspec.
783.21	Abnormal loss of weight
795.01	Abnormal Pap, ASC-US
719.40	Arthralgia, unspec.
569.3	Bleeding, rectal
786.50	Chest pain, unspec.
786.2	Cough
787.91	Diarrhea, NOS
780.4	Dizziness/vertigo, NOS
787.20	Dysphagia, unspec.
788.1	Dysuria
782.3	Edema, localized, NOS
780.79	Fatigue and malaise, other
783.3	Feeding problem, infant/elderly
780.60	Fever, unspec.
271.9	Glucose intolerance
784.0	Headache, unspec.
788.30	Incontinence/enuresis, NOS
782.2	Localized swelling/mass, superficial
785.6	Lymph nodes, enlarged
787.02	Nausea, alone
787.01	Nausea w/ vomiting
719.46	Pain, knee
724.2	Pain, low back
785.1	Palpitations
788.42	Polyuria
782.1	Rash, nonvesicular, unspec.
782.0	Sensory disturbance skin
786.05	Shortness of breath
780.2	Syncope
788.41	Urinary frequency
787.03	Vomiting, alone

Injuries & Adverse Effects

Dislocations, Sprains & Strains	
845.00	Sprain/strain: ankle, unspec.
845.10	Sprain/strain: foot, unspec.
842.10	Sprain/strain: hand, unspec.
844.9	Sprain/strain: knee/leg, unspec.
847.0	Sprain/strain: neck, unspec.
840.9	Sprain/strain: shoulder/arm, unspec.
842.00	Sprain/strain: wrist, unspec.
Other Trauma, Adverse Effects	
919.0	Abrasion, unspec.
924.9	Contusion, unspec.
919.4	Insect bite
894.0	Open wound, lower limb, unspec.
884.0	Open wound, upper limb, unspec.
V58.31	Surgical wound dressing
V70.0	Well adult exam
V20.2	Well child check