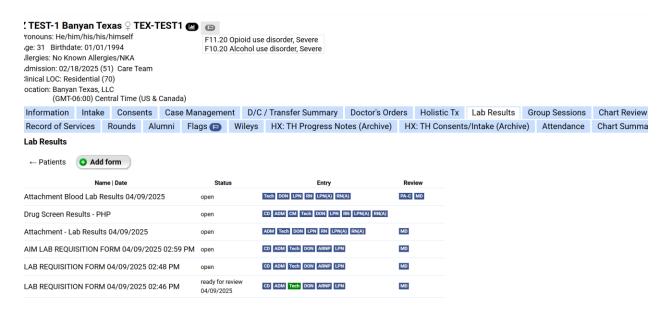
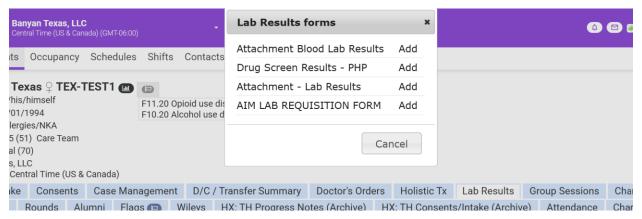
KIPU AIM Requisition Form

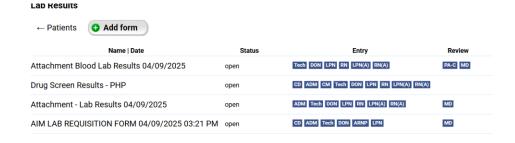
Instructions on ordering lab testing using AIM REQUISITION Form with face sheet information



Select Lab Results Tab in patients' chart and ADD form



Select AIM REQUISITION FORM to add



Select the AIM LAB REQUISITION with open status

AIM LABORATORY REQUISITION FORM	
Date/Time Created: 04/09/2025 05:12 PM	
CLIENT INFORMATION Patient Name: Z TEST-1 Banyan Texas Patient MR#TEX-TEST1 Date of Birth01/01/1994 Gender: female	
INSURANCE INFORMATION ANTHEM BCBS Policy 12345567 Phone 888-222-1223	
SPECIMEN INFORMATION Specimen Type: Oral Fluid	
□ Blood □ Urine UA Colletion Date and time /Collected by	
DIAGNOSIS (ICD-10) CODES (MEDICALLY NECESSARY) Current as of 04/09/25 05:12 PM: F11.20 Opioid use disorder, Severe F10.20 Alcohol use disorder, Severe	Hx Update Diagnosis Code

- Up to 3 sample types can be selected
 - UA requires collection Date /Time /By
- Face Sheet information included (DOB, Insurance, Policy, & Group)
- Diagnosis Codes are auto populated and can be updated as needed

TEST ORDER	1							
AMMONIA	Amylase	BHCG Quantitative	ВМР	CBC w/Differential	CMP	FERRITIN	FOLATE	
HCG, Beta Subunit, Quant	HCV Antibody Reflex to Quant PCR	HEMOGLOBIN A1C	Hep C AB	Hepatic Function	Hepatitis Acute Panel with Quantitative	HIV p 24 Antigen/Antibody With Reflex to Confirmation		
HSV Screen (1 & 2)	Lipase	Lipid Panel	Lithium (Eskalith)	Potassium	PT/INR	PTT	T 3, Free	T 4, Free
Tegretol Level	TESTOSTERONE FREE	TESTOSTERONE, TOTAL	Thyroid Panel	Thyroxine (T4) Free, Direct, S	TSH w/reflex	Urinalysis W/reflex to culture		
UTI PCR with ABR	VALPROIC ACID	Vitamin B12	VITAMIN D, 25- HYDROXY	TB PCR Test				
Panel Orders SUD Admission Labs (CBC, CMP, Hepatitis C AB, TB PCR Test, RPR, Rfx Qn RPR/Confirm TP MH Admission Labs (CBC, CMP, Hepatitis C AB, TB PCR Test, TSH w/reflex, RPR, Rfx Qn RPR/Confirm TP Sexually Transmitted Test: RPR, Rfx Qn RPR/Confirm TP STD Basic Panel – (Neisseria Gonorrhoeae, Chlamydia Trachomatis, Trichomonas Vaginalis, HSV 1& HSV2)								
Tox Tests: Drug Screen Reflex to Confirmation (Amphetamine (Amph), Barbiturates (Barb), Benzodiazepines (Benz), Buprenorphine (BUP), Cocaine (COC), Ecstasy MDMA, Ethyl Glucuronide (Et G), Fentanyl (Fent), Heroin (6- AM), Methadone, Opiates, Oxycodone (Oxy), Phencyclidine (PCP), Tetrahydrocannabinol (THC), Tramadol (TRAM) Validity Testing (Urine Creatinine, p H, Specific Gravity (SPG)								
Tox Medications List please add prescribed medications								
Medications below include all current active orders logged via Doctor's Orders. These may include medications self-reported by the patient that were logged, medication orders entered at the facility, and medications brought to the facility by the patient ordered to be continued upon admission. If the patient is not being treated in a residential/inpatient setting, this list may not be inclusive of all medications taken by the patient outside of the facility.								
Ourrent op of 04/09/2025 06:12 PM: BACK TO TOP 25 mg x 1 Tablet , oral, tablet, every 4 hours, until further notice, PRN, indication: Pain								

- Individual test(s) can be ordered
- Banyan Customized Panels can be ordered with 1 click
- Prescribed medication(s) are auto populated and can be edited



Submit and Sign

Oral Fluid , Blood , Urine: 4-9- 2025 5 am by Jay

Specimen Type:

- Print a copy for AIM Phlebotomist AIM REQ has face sheet information
- LAB REQUISITION FORM in pending review status for provider signature