



Laboratory
P) 605-995-2214
F) 605-995-2282

ADD ON REQUEST FORM

The following verbal add-on order was received at
Avera Queen of Peace Laboratory.

Regulations require that we obtain a written order for documentation.
Please review the order that was added and sign below that you did indeed
request the test(s) be performed.

Please complete all of the information below
and **fax it back to AQOP Lab at 605-995-2282**.

Thank you for your assistance.

Today's Date: _____ Tech: _____

Specimen Date: _____

Patient Name: _____

Test(s): _____

Supporting Signs, Symptoms, or Diagnosis: _____

Facility Requesting Add-on: _____

Provider Requesting Add-on: _____

Signature/Title: _____