

Endoscopy ORDER FORM

FAX to: 336-328-4415

➤ **REQUIRED**

➤ Pt. Name : Last First Middle	➤ Pt. D.O.B.	➤ Practitioner Signature	➤ Date Time
Pt. Phone #:	➤ Precert / Authorization #	Pt Sex: M or F	➤ Print Name of Practitioner
Expires on:			

BOTH Required

➤ Reason for Exam: _____

➤ ICD-10 Code : _____

	CPT(s)
Special Procedures (Obtain consent for the following)	
EGD	43235
EGD with Dilation	43450
ERCP	43260
Bronchoscopy	31622
Colonoscopy	45378
Flexible Sigmoidoscopy	45330

	CPT(s)
Special Procedures (Obtain consent for the following)	
PEG placement (with EGD)	43246
PEG change with Endoscopic Guide	49450
PEG Change with out Endoscopic G	43760

Anesthesia Assistance needed	
Check a reason below	
ASA Score Greater than 3	
ERCP	
Other Reason	

EKG	
Electrocardiogram (EKG)	93005

LAB Work

	CPT(s)
COAG Studies	
PTT	85730
Prothrombin Time (PT with INR)	85610

Urinalysis	
Urinalysis (UA)	81001
Urine Pregnancy Test	84703
Urine Drug Screen	80307

Microbiology	
Clostridium Difficile Toxin	87324
Fungus Culture	87102
Ova & Parasites (O & P)	87177
Stool Culture	87045
Stool for WBC's	89055

Hematology	
CBC with Diff	85025
CBC (no Diff)	85027
Cell Count with Diff:	89050
Specify Source:	
HGB and HCT (H&H)	85014/ 85018
Retic Count	85045
SED Rate (ESR)	85651

	CPT(s)
Chemistry	
AFP, tumor marker	82105
Ammonia	82140
Amylase	82150
ANA (Anti-nuclear AB)	86038
Autoimmune Hepatitis Panel 83516 x3 / 86038 / 86256 x3 / 86376	
BUN	84520
CA 19-9	86301
CEA	82378
Celiac Disease Profile 82784 / 83516 x4 / 86255	
CRP (C-Reactive Protein)	86140
Creatinine	82565
Ferritin	82728
Giardia antigen/stool	87329
Iron & TIBC (FE & TIBC)	83550
Lipase	83690
Potassium (K+), Serum	84132
Pregnancy Test, urine	84703
Vitamin B12 & Folate	82746 / 82607
Vitamin D,25 Hydroxy	82306

	CPT(s)
Panels	
Basic Metabolic (BMP)	80048
Comprehensive Metabolic (CMP)	80053
Liver (Hepatic Function)	80076
Hepatitis, Acute	80074
Lipid	80061
Thyroid w/TSH (order set)	84479/ 84436/84443

Pre-Procedure Nursing Orders	
<input checked="" type="checkbox"/>	Complete Assessment Sheet
<input checked="" type="checkbox"/>	Start IV/Access PAC
<input checked="" type="checkbox"/>	NS at 20ml/hr
<input checked="" type="checkbox"/>	Mylicon drops 40mg (0.6ml) po x 1 dose for EGD and ERCP procedures.
<input checked="" type="checkbox"/>	Urine pregnancy test on all females of reproductive age who have not had surgical sterilization
<input checked="" type="checkbox"/>	Capillary Blood Glucose on all patients with history of Diabetes



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Reviewed: 9/12/24

Endoscopy Outpatient Order Form

