

# Minor Report Correction Sexual Health Add-On Test Order Form

I,  request that the following information be corrected and/or tests (listed below) be added to the previously submitted sample. This is to serve as a correction and/or as an addendum to the originally submitted requisition and to each of the previous test orders originally submitted.

**Patient Name** (as it appears on the final report):

**Patient DOB** (as it appears on the final report):

Sample/Lab ID/Order Number:

**Please update the following tests to this sample\*:**  Add-On  Replace  Delete \*required

Orders must be specifically listed either by compound, pathogen, or specific gene you wish to have added. If you need additional room, please submit a corrected requisition

\*\*Signature of the ordering provider is REQUIRED for updating test orders

<b>■ GENITOURINARY</b>			
Sample Type:	<input type="checkbox"/> Urine (voided) <input type="checkbox"/> Urine (catheter) <input type="checkbox"/> Cervical/Vaginal/Cervicovaginal/Endometrial <input type="checkbox"/> Vulva/Labia/Vestibule/Perineal	<input type="checkbox"/> Oropharynx/Throat/Oral <input type="checkbox"/> Penile <input type="checkbox"/> Genital Skin <input type="checkbox"/> Rectal/Anal	
<input type="checkbox"/> Acinetobacter baumannii	<input type="checkbox"/> Enterococcus faecalis, faecium	<input type="checkbox"/> Pseudomonas aeruginosa	<b>Add-On:</b> <b>GENITAL LESION</b> <input type="checkbox"/> Haemophilus ducreyi <sup>14</sup> <input type="checkbox"/> Herpes simplex virus 1 <input type="checkbox"/> Herpes simplex virus 2 <input type="checkbox"/> Mpx (Monkeypox) <input type="checkbox"/> Treponema pallidum <sup>3</sup> <input type="checkbox"/> Varicella zoster virus <sup>15</sup> <b>Antibiotic Resistance Genes (listed below)</b>
<input type="checkbox"/> Atopobium vaginae	<input type="checkbox"/> Escherichia coli	<input type="checkbox"/> Serratia marcescens	
<input type="checkbox"/> BVAB 2, 3 (bacterial vaginosis-associated bacteria 2, 3); Mobiluncus spp.	<input type="checkbox"/> Gardnerella vaginalis	<input type="checkbox"/> Staphylococcus aureus	
<input type="checkbox"/> Candida albicans, parapsilosis, tropicalis	<input type="checkbox"/> Klebsiella pneumoniae, oxytoca	<input type="checkbox"/> Staphylococcus epidermis, haemolyticus, lugdunensis	
<input type="checkbox"/> Candida glabrata	<input type="checkbox"/> Megasphaera (Types 1, 2)	<input type="checkbox"/> Staphylococcus saprophyticus	
<input type="checkbox"/> Candida glabrata	<input type="checkbox"/> Morganelia morgani	<input type="checkbox"/> Streptococcus agalactiae <sup>1</sup>	
<input type="checkbox"/> Candida krusei	<input type="checkbox"/> Mycoplasma genitalium	<input type="checkbox"/> Streptococcus pyogenes <sup>2</sup>	
<input type="checkbox"/> Chlamydia trachomatis	<input type="checkbox"/> Mycoplasma hominis	<input type="checkbox"/> Trichomonas vaginalis	
<input type="checkbox"/> Citrobacter freundii	<input type="checkbox"/> Neisseria gonorrhoeae	<input type="checkbox"/> Ureaplasma urealyticum	
<input type="checkbox"/> Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes	<input type="checkbox"/> Proteus mirabilis, vulgaris	<input type="checkbox"/> Ureaplasma parvum	

**Add-on Only – Select for add-on testing:**  High Risk HPV types 16, 18, 45

**Note: If add-ons are ordered, sample cannot be urine**

<input type="checkbox"/> <b>Antibiotic Resistance Genes</b>	SHV, KPC Groups <sup>6</sup> dfr (A1, A5), sul (1, 2) <sup>7</sup> ermB, C; mefA <sup>5</sup> mecA <sup>8</sup>	qnrA1, qnrA2, qnrB <sup>9</sup> tet B, tet M <sup>10</sup> IMP, NDM, VIM Groups <sup>11</sup>	ACT, MIR, FOX, ACC Groups <sup>12</sup> OXA-48,-51 <sup>13</sup> CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups <sup>6</sup>
---	--	---	---

<b>■ URETHRITIS / DISCHARGE</b>			
Sample Type:	<input type="checkbox"/> Urine (voided) <input type="checkbox"/> Urethral Swab		
<input type="checkbox"/> Chlamydia trachomatis	<input type="checkbox"/> Mycoplasma hominis	<input type="checkbox"/> Ureaplasma parvum	<b>Antibiotic Resistance Genes:</b> dfr (A1, A5), sul (1, 2) <sup>7</sup> ermB, C; mefA <sup>5</sup> tet B, tet M <sup>10</sup>
<input type="checkbox"/> Herpes simplex virus 1	<input type="checkbox"/> Neisseria gonorrhoeae		
<input type="checkbox"/> Herpes simplex virus 2	<input type="checkbox"/> Trichomonas vaginalis		
<input type="checkbox"/> Mycoplasma genitalium	<input type="checkbox"/> Ureaplasma urealyticum		

<b>■ VAGINITIS</b>			
Sample Type:	<input type="checkbox"/> Cervical/Vaginal/Cervicovaginal/Endometrial <input type="checkbox"/> Vulva/Labia/Vestibule/Perineal <input type="checkbox"/> Urine (voided)		
<input type="checkbox"/> Atopobium vaginae	<input type="checkbox"/> Candida krusei	<input type="checkbox"/> Megasphaera (types 1, 2)	<b>Antibiotic Resistance Genes:</b> dfr (A1, A5), sul (1, 2) <sup>7</sup> ermB, C; mefA <sup>5</sup> tet B, tet M <sup>10</sup>
<input type="checkbox"/> BVAB 2, 3 (bacterial vaginosis-associated bacteria 2, 3); Mobiluncus spp.	<input type="checkbox"/> Chlamydia trachomatis	<input type="checkbox"/> Neisseria gonorrhoeae	
<input type="checkbox"/> Candida albicans, parapsilosis, tropicalis	<input type="checkbox"/> Gardnerella vaginalis	<input type="checkbox"/> Trichomonas vaginalis	
<input type="checkbox"/> Candida glabrata	<input type="checkbox"/> Herpes simplex virus 1		

**Add-on Only – Select for add-on testing:**  High Risk HPV types 16, 18, 45

<b>■ DISCHARGE + VAGINITIS</b>			
Sample Type:	<input type="checkbox"/> Cervical/Vaginal/Cervicovaginal/Endometrial <input type="checkbox"/> Vulva/Labia/Vestibule/Perineal <input type="checkbox"/> Urine (voided)		
<input type="checkbox"/> Atopobium vaginae	<input type="checkbox"/> Chlamydia trachomatis	<input type="checkbox"/> Mycoplasma hominis	<b>Antibiotic Resistance Genes:</b> dfr (A1, A5), sul (1, 2) <sup>7</sup> ermB, C; mefA <sup>5</sup> tet B, tet M <sup>10</sup>
<input type="checkbox"/> BVAB 2, 3 (bacterial vaginosis-associated bacteria 2, 3); Mobiluncus spp.	<input type="checkbox"/> Gardnerella vaginalis	<input type="checkbox"/> Neisseria gonorrhoeae	
<input type="checkbox"/> Candida albicans, parapsilosis, tropicalis	<input type="checkbox"/> Herpes simplex virus 1	<input type="checkbox"/> Trichomonas vaginalis	
<input type="checkbox"/> Candida glabrata	<input type="checkbox"/> Herpes simplex virus 2	<input type="checkbox"/> Ureaplasma urealyticum	
<input type="checkbox"/> Candida krusei	<input type="checkbox"/> Megasphaera (types 1, 2)	<input type="checkbox"/> Ureaplasma parvum	
	<input type="checkbox"/> Mycoplasma genitalium		

**Add-on Only – Select for add-on testing:**  High Risk HPV types 16, 18, 45

<b>■ CGT (ASYMPTOMATIC)</b>			
Sample Type:	<input type="checkbox"/> Urine (voided) <input type="checkbox"/> Urine (catheter) <input type="checkbox"/> Urethral Swab <input type="checkbox"/> Cervical/Vaginal/Cervicovaginal/Endometrial <input type="checkbox"/> Vulva/Labia/Vestibule/Perineal	<input type="checkbox"/> Oropharynx/Throat/Oral <input type="checkbox"/> Penile <input type="checkbox"/> Genital Skin <input type="checkbox"/> Rectal/Anal	
<input type="checkbox"/> Chlamydia trachomatis	<input type="checkbox"/> Neisseria gonorrhoeae	<input type="checkbox"/> Trichomonas vaginalis	

<sup>1</sup> Group B Strep  
<sup>2</sup> Group A Strep  
<sup>3</sup> Syphilis  
<sup>4</sup> Vancomycin

<sup>5</sup> Macrolide, Lincosamide, Streptogramin  
<sup>6</sup> Class A beta-lactamase  
<sup>7</sup> Trimethoprim/Sulfamethoxazole  
<sup>8</sup> Methicillin

<sup>9</sup> Fluoroquinolone  
<sup>10</sup> Tetracycline  
<sup>11</sup> Class B metallo-beta-lactamase  
<sup>12</sup> AmpC beta-lactamase

<sup>13</sup> Class D oxacillinase  
<sup>14</sup> Chancroid  
<sup>15</sup> Human Herpesvirus 3, VZV

# Minor Report Correction Sexual Health Add-On Test Order Form



Customer Care: 866-287-3218

Fax: 940-295-1483

www.HealthTrackRx.com

## ■ GENITAL LESION Sample Type: Genital ulcer/lesion Cervical/Vaginal/Cervicovaginal/Endometrial Rectal/Anal Oropharynx/Throat/Oral

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Chlamydia trachomatis             | <input type="checkbox"/> Mpox (Monkeypox)                     | <input type="checkbox"/> <b>Antibiotic Resistance Genes:</b><br>dfr (A1, A5), sul (1, 2) <sup>7</sup><br>ermB, C; mefA <sup>5</sup><br>tet B, tet M <sup>10</sup> |
| <input type="checkbox"/> Haemophilus ducreyi <sup>14</sup> | <input type="checkbox"/> Treponema pallidum <sup>3</sup>      |   |
| <input type="checkbox"/> Herpes simplex virus 1            | <input type="checkbox"/> Varicella zoster virus <sup>15</sup> |   |
| <input type="checkbox"/> Herpes simplex virus 2            |   |   |

## ■ PELVIC INFLAMMATORY DISEASE Sample Type: Cervical/Vaginal/Cervicovaginal/Endometrial

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Actinomyces israelii  | <input type="checkbox"/> Neisseria gonorrhoeae           | <input type="checkbox"/> <b>Antibiotic Resistance Genes:</b><br>dfr (A1, A5), sul (1, 2) <sup>7</sup><br>ermB, C; mefA <sup>5</sup><br>tet B, tet M <sup>10</sup> |
| <input type="checkbox"/> Chlamydia trachomatis | <input type="checkbox"/> Treponema pallidum <sup>3</sup> |   |
| <input type="checkbox"/> Mycoplasma genitalium |  |   |
| <input type="checkbox"/> Mycoplasma hominis    |  |   |

## ■ PROCTITIS Sample Type: Rectal/Anal

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Chlamydia trachomatis  | <input type="checkbox"/> Neisseria gonorrhoeae           | <input type="checkbox"/> <b>Antibiotic Resistance Genes:</b><br>dfr (A1, A5), sul (1, 2) <sup>7</sup><br>ermB, C; mefA <sup>5</sup><br>tet B, tet M <sup>10</sup> |
| <input type="checkbox"/> Herpes simplex virus 1 | <input type="checkbox"/> Treponema pallidum <sup>3</sup> |   |
| <input type="checkbox"/> Herpes simplex virus 2 |  |   |
| <input type="checkbox"/> Mpox (Monkeypox)       |  |   |

<sup>1</sup> Group B Strep

<sup>2</sup> Group A Strep

<sup>3</sup> Syphilis

<sup>4</sup> Vancomycin

<sup>5</sup> Macrolide, Lincosamide, Streptogramin

<sup>6</sup> Class A beta-lactamase

<sup>7</sup> Trimethoprim/Sulfamethoxazole

<sup>8</sup> Methicillin

<sup>9</sup> Fluoroquinolone

<sup>10</sup> Tetracycline

<sup>11</sup> Class B metallo-beta-lactamase

<sup>12</sup> AmpC beta-lactamase

<sup>13</sup> Class D oxacillinase

<sup>14</sup> Chancroid

<sup>15</sup> Human Herpesvirus 3, VZV

Updated Diagnosis Code(s): \_\_\_\_\_

Ordering Provider Name (printed): \_\_\_\_\_

Ordering Provider Name (signed): \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*Signature of the ordering provider is REQUIRED for updating test orders**

SUBMIT TO CUSTOMER FULFILLMENT AT:

FAX TO: (940) 295-1483 or via EMAIL: customer@healthtrackrx.com