

# Minor Report Correction Wound & Nail 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

**CHRONIC WOUND / ULCER** Sample Type:  Wound Location

<input type="checkbox"/> Acinetobacter baumannii	<input type="checkbox"/> Epidermophyton floccosum	<input type="checkbox"/> Pseudomonas aeruginosa	<input type="checkbox"/> Varicella zoster virus <sup>3</sup>
<input type="checkbox"/> Aspergillus flavus, fumigatus, niger, terreus	<input type="checkbox"/> Escherichia coli	<input type="checkbox"/> Salmonella enterica	<input type="checkbox"/> Vibrio cholerae, parahaemolyticus, vulnificus
<input type="checkbox"/> Bacteroides fragilis, vulgatus	<input type="checkbox"/> Fusarium oxysporum, solani	<input type="checkbox"/> Serratia marcescens	<input type="checkbox"/> <b>Antibiotic Resistance Genes (listed below)</b>
<input type="checkbox"/> Candida albicans, glabrata, parapsilosis, tropicalis	<input type="checkbox"/> Haemophilus influenzae	<input type="checkbox"/> Staphylococcus aureus	
<input type="checkbox"/> Citrobacter freundii	<input type="checkbox"/> Herpes simplex virus 1	<input type="checkbox"/> Staphylococcus epidermidis, haemolyticus, lugdunensis, saprophyticus	
<input type="checkbox"/> Clostridium perfringens, novyi, septicum	<input type="checkbox"/> Herpes simplex virus 2	<input type="checkbox"/> Streptococcus agalactiae <sup>1</sup>	
<input type="checkbox"/> Corynebacterium jeikeium, striatum, tuberculostearicum	<input type="checkbox"/> Klebsiella pneumoniae, oxytoca	<input type="checkbox"/> Streptococcus pneumoniae	
<input type="checkbox"/> Cutibacterium (Propionibacterium) acnes	<input type="checkbox"/> Malassezia furfur, restricta, sympodialis, globosa	<input type="checkbox"/> Streptococcus pyogenes <sup>2</sup>	
<input type="checkbox"/> Enterobacter cloacae complex, Klebsiella, (Enterobacter) aerogenes	<input type="checkbox"/> Microsporium audouinii, canis, gypseum	<input type="checkbox"/> Trichophyton mentagrophytes/ interdigitale, rubrum, soudanense, terrestre, tonsurans, verrucosum, violaceum	
<input type="checkbox"/> Enterococcus faecalis, faecium	<input type="checkbox"/> Mycoplasma genitalium, hominis	<input type="checkbox"/> Trichosporon mucoides, asahii	
	<input type="checkbox"/> Peptostreptococcus anaerobius, asaccharolyticus, magnus, prevotii		
	<input type="checkbox"/> Proteus mirabilis, vulgaris		

**Add-on Only – Select for add-on testing:**  Mpox (Monkeypox)  Candida auris

<input type="checkbox"/> <b>Antibiotic Resistance Genes</b>	SHV, KPC Groups <sup>5</sup> VanA, VanB <sup>4</sup> ermB, C; mefA <sup>5</sup>	dfr (A1, A5), sul (1, 2) <sup>7</sup> mecA <sup>8</sup>	qnrA1, qnrA2, qnrB2 <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>
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**ACUTE WOUND** Sample Type:  Wound Location

<input type="checkbox"/> Acinetobacter baumannii	<input type="checkbox"/> Enterococcus faecalis, faecium	<input type="checkbox"/> Serratia marcescens	<input type="checkbox"/> Mpox (Monkeypox)
<input type="checkbox"/> Bacteroides fragilis, vulgatus	<input type="checkbox"/> Escherichia coli	<input type="checkbox"/> Staphylococcus aureus	<input type="checkbox"/> Herpes simplex virus 1
<input type="checkbox"/> Citrobacter freundii	<input type="checkbox"/> Klebsiella pneumoniae, oxytoca	<input type="checkbox"/> Streptococcus agalactiae <sup>1</sup>	<input type="checkbox"/> Herpes simplex virus 2
<input type="checkbox"/> Clostridium perfringens, novyi, septicum	<input type="checkbox"/> Proteus mirabilis, vulgaris	<input type="checkbox"/> Streptococcus pyogenes <sup>2</sup>	<input type="checkbox"/> Varicella zoster virus
<input type="checkbox"/> Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes	<input type="checkbox"/> Pseudomonas aeruginosa	<input type="checkbox"/> Vibrio cholerae, parahaemolyticus, vulnificus	<input type="checkbox"/> <b>Antibiotic Resistance Genes (listed below)</b>
<input type="checkbox"/> <b>Antibiotic Resistance Genes</b>	SHV, KPC Groups <sup>5</sup> VanA, VanB <sup>4</sup> ermB, C; mefA <sup>5</sup>	dfr (A1, A5), sul (1, 2) <sup>7</sup> mecA <sup>8</sup>	qnrA1, qnrA2, qnrB2 <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>

**TINEA** Sample Type:  Wound Location

<input type="checkbox"/> Candida albicans, glabrata, parapsilosis, tropicalis	<input type="checkbox"/> Microsporium audouinii, canis, gypseum
<input type="checkbox"/> Epidermophyton floccosum	<input type="checkbox"/> Trichophyton mentagrophytes/ interdigitale, rubrum, soudanense, terrestre, tonsurans, verrucosum, violaceum
<input type="checkbox"/> Malassezia furfur, restricta, sympodialis, globosa	

<sup>1</sup> Group B Strep      <sup>6</sup> Class A beta-lactamase      <sup>11</sup> Class B metallo-beta-lactamase  
<sup>2</sup> Group A Strep      <sup>7</sup> Trimethoprim/Sulfamethoxazole      <sup>12</sup> AmpC beta-lactamase  
<sup>3</sup> Human Herpesvirus 3, VZV      <sup>8</sup> Methicillin      <sup>13</sup> Class D oxacillinase  
<sup>4</sup> Vancomycin      <sup>9</sup> Fluoroquinolone  
<sup>5</sup> Macrolide, Lincosamide, Streptogramin      <sup>10</sup> Tetracycline

# Minor Report Correction Wound & Nail Add-On Test Order Form

## ■ ONYCHOMYCOSIS

Sample Type:  Nail, Toe  Nail, Finger

<input type="checkbox"/> Aspergillus flavus, fumigatus, niger, terreus	<input type="checkbox"/> Fusarium oxysporum, solani	<input type="checkbox"/> Trichophyton mentagrophytes/interdigitale, rubrum, soudanense, terrestre, tonsurans, verrucosum, violaceum	<input type="checkbox"/> <b>All Antibiotic Resistance Genes excluding: mecA and VanA, VanB.</b>
<input type="checkbox"/> Candida albicans, glabrata, parapsilosis, tropicalis	<input type="checkbox"/> Malassezia furfur, restricta, sympodialis, globosa	<input type="checkbox"/> Microsporum audouinii, canis, gypseum	
<input type="checkbox"/> Epidermophyton floccosum	<input type="checkbox"/> Pseudomonas aeruginosa	<input type="checkbox"/> Trichosporon mucoides, asahii	
<input type="checkbox"/> <b>Antibiotic Resistance Genes</b> ermB, C; mefA <sup>1</sup> SHV, KPC Groups <sup>2</sup>	dfr (A1, A5), sul (1, 2) <sup>3</sup> qnrA1, qnrA2, qnrB <sup>4</sup> tet B, tet M <sup>5</sup>	IMP, NDM, VIM Groups <sup>6</sup> ACT, MIR, FOX, ACC Groups <sup>7</sup> OXA-48,-51 <sup>8</sup>	CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups <sup>2</sup>

<sup>1</sup> Macrolide, Lincosamide, Streptogramin <sup>6</sup> Class B metallo-beta-lactamase

<sup>2</sup> Class A beta-lactamase <sup>7</sup> AmpC beta-lactamase

<sup>3</sup> Trimethoprim/Sulfamethoxazole <sup>8</sup> Class D oxacillinase

<sup>4</sup> Fluoroquinolone

<sup>5</sup> Tetracycline

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