

MedRight Scheduling Systems
provide a variety of useful operational
reports for both the laboratory and client!

Scheduled Test Requisitions - Plain paper requisition forms identify the tests to be drawn on a specific patient with optional Medicare Advanced Beneficiary Notice. Nursing Home requisitions are sorted by nursing station and room number to facilitate easy location of patients. Home Care requisitions are generated for all patients on a phlebotomist's travel route. Also available are concise Draw List formats to minimize paper usage. Optional low-cost barcoded Laboratory Information System keystrokes eliminate manual keying. Barcode specimen labels to communicate with instruments.

Requisition Summary Report - This concise report shows all patients and test orders for a specified day or range of dates. Designed as a companion report for patient requisitions, it can be used to notify the nursing station of upcoming tests. Optional space at the bottom of each page allows for 'last minute' physician orders. Use as a convenient phlebotomy draw log, eliminating messy and time consuming handwritten logs.

Testing Summary Report - A 'single page' report for each patient shows their demographic information and a concise list of all tests scheduled during a range of dates.

Expiring Test Orders Letter and Report - This invaluable feature shows all patients with test orders due to expire within a specified range of dates. The convenient letter format simplifies notification of physicians and reinstatement of orders.

Patient Setup Sheet - A 'single page' report for each patient shows the demographic and test order information. Can be placed in patient charts for easy reference and to serve as a vehicle for communicating updates.

Patient Labels - Patient labels for use on generic client requisitions or specimen collection tubes.

Patient Requisitions - For stat and one-time orders, these requisitions contain only the patient's demographic and billing information. In addition, the laboratory may customize them to print the client's most frequently ordered tests. A convenient reminder notice is automatically inserted into the requisitions to allow easy reordering of requisitions of a specific patient.

Client Requisitions - An alternative to use of Patient Requisitions for stat and one-time orders, these requisitions contain only the client's name, address, and customized tests.

CPT4/ICD9 Cross Reference Report - Lists all valid ICD9 codes accepted by the system along with the Medicare medical necessity CPT4 codes. Or sort by CPT4 code and list all ICD9 codes acceptable to Medicare.

Patient Insurance Report - A convenient reference report provides each patient's insurance information in a concise format.

Patient List - A list of patients for a single client or all clients.

Client List - A list of all clients in the system.

Test List - A list of all tests in the system.

Route List (Home Care Scheduling only) - A list of all phlebotomy routes in the system.

MedRight reports can be generated
for any period of time - past or future!
Print as often as required!

Special customized reports are
available to meet your specific needs!

01/01/2007
10:11

Scheduled Test Requisition

MedRight

MedRight Medical Laboratory
23 Mechanic St
Springville, NY 14141

Client # 10000
BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985

SCHEDULED DATE 01/09/2007

Divis SNF **Wing** EAST
Floor 3 **Room** 309B

Patient FORSTER, JEFFREY D
#123-45-6789

Medicare 123456789A

UPIN ABC123

PPS / / - / /

DOB 01/03/1903

Medicaid 1234AB487878912

Gender MALE

Private TRAVELERS

SS#

Policy 3A434A

Group 90339-39

Physician MARTHA JONES

Phys ID Category

Relation 1 (SELF)

Copy To THOMAS JOHNSON
444 W MAIN STREET
BUFFALO, NY 12222

Insured FORSTER, JEFFREY

Lab Comment PATIENT PREFERS LEFT ARM. REQUEST ASSISTANCE
Report Comment

COLLECTION DATE _____ **COLLECTION TIME** _____ am pm

Drawn	Test Code	Test Name	Diagnosis
_____	CBC	CBC WITH DIFF <i>Fast: N Note: 1 LAV TOP</i>	001.1 145.6 285.56 V78.1
_____	CHEM	CHEMISTRY PANEL <i>Fast: Y Note: 1 SST</i>	001.1 059.2 145.6 V78.1
_____	UA	URINALYSIS <i>Fast: N</i>	001.1 059.2 145.6 285.56 V78.1

Complete clinical and billing information!
Print Advanced Beneficiary Notice for Medicare patients!
Diagnosis codes specific to tests printed on requisition!
Print draw requirements or test notes for phlebotomist!
Customize draw fee tests to your laboratory!
Barcode LIS scripts to eliminate manual keying!
Barcode specimen labels to communicate with instruments!

01/01/2007
1100 am

Requisition Summary

MedRight

MedRight Medical Laboratory
23 Mechanic St
Springville, NY 14141

Client # 10000
BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985

SCHEDULED DATE 01/09/2007

Divis SNF **Wing** EAST
Floor 3

Room	Patient/Comments	Tests	Fast	Every	Ending	Signature
309B	FORSTER, JEFFREY (#123-45-6789) PATIENT PREFERS LEFT ARM. REQUEST ASSISTANCE					
	CBC	CBC WITH DIFF	N	1 M	12/02/2007	_____
	CHEM	CHEMISTRY PANEL	Y	2 M	12/02/2007	_____
	UA	URINALYSIS	N	1 M	10/07/2007	_____
312A	JOHNSON, EMILY (#452-54-4455)					
	CBC	CBC WITH DIFF	N	1W	01/31/2008	_____

Provide advance notice of testing to be performed!
Show daily testing and patient fasting needs!
Use as easy-to-read draw log - no messy handwritten logs!
Optional area to record last minute test orders!

One-Time & Stat Test Orders

01/01/2007
10:11

Patient Testing Summary

MedRight

MedRight Medical Laboratory
23 Mechanic St
Springville, NY 14141

Client # 10000

BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985

Divis SNF Wing EAST
Floor 3

Room	Patient/Comments Tests	Scheduled
309B	FORSTER, JEFFREY (#123-45-6789) CBC CBC WITH DIFFERENTIAL CHEM CHEMISTRY PANEL UA URINALYSIS UA URINALYSIS CBC CBC WITH DIFFERENTIAL	 01/09/2007 01/09/2007 01/09/2007 08/09/2007 08/23/2007
312A	JOHNSON, EMILY (#452-54-4455) CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL CBC CBC WITH DIFFERENTIAL	 01/09/2007 07/19/2007 07/26/2007 08/03/2007 08/09/2007 08/16/2007 08/23/2007 08/30/2007

List every scheduled test for a patient!

Option to include testing frequency!

Print for past or future!

Strengthen client's QA/CQI - identify lab reports which
should be in patient's chart!

Client # 10000BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985**Divis SNF Wing EAST**
Floor 3

Dear Doctor:

Standing orders on the patients listed below will expire between 01/01/2007 and 01/31/2007.
To continue these orders, please update this information and return this form to the laboratory.

Room	Patient	Ending	Every	
145D	FORSTER, JEFFREY D (#123-45-6789)			
	CBC CBC WITH DIFF	01/01/2007	q 2M	q_____ ICD9
_____	CHEM CHEMISTRY PANEL	01/01/2007	q 2M	q_____ ICD9

**Convenient letter to client identifies all patients
 with expiring orders grouped by physician!
 Easy for physician to reinstate orders or add new tests!
 Report form option also available!**

01/01/2007
10:11

Patient Setup Sheet

MedRight

MedRight Medical Laboratory
23 Mechanic St
Springville, NY 14141

Client # 10000
BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985

Divis SNF **Wing** EAST
Floor 3 **Room** 309B

Patient FORSTER, JEFFREY D
#123-45-6789

Medicare 123456789A
UPIN ABC123
PPS // - //
Medicaid 1234AB487878912
Private TRAVELERS
Policy 3A434A
Group 90339-39
Phys ID Category
Relation 1
Insured FORSTER, JEFFREY

DOB 01/03/1903
Gender MALE
SS#

Physician MARTHA JONES

Copy To THOMAS JOHNSON
444 W MAIN STREET
BUFFALO, NY 12222

Reminder Month 2 ANNUAL PHYSICAL

Lab Comment PATIENT PREFERS LEFT ARM. REQUEST ASSISTANCE
Report Comment

<u>Test Code</u>	<u>Name</u>	<u>Fast</u>	<u>Every</u>	<u>Week</u>	<u>Day</u>	<u>Start</u>	<u>End</u>
CBC	CBC WITH DIFF <u>ICD9</u> 005.9 047.80 V98.7	N	6 W		THU	07/17/2007	12/15/2007
CHEM	CHEMISTRY PANEL <u>ICD9</u> 001.6 250.20 025.5 V78.91	Y	2 M	2nd	THU	07/17/2007	12/15/2007
UA	URINALYSIS <u>ICD9</u> 085.2 047.80 001.5	N	1 M	2nd	WED	07/02/2007	12/02/2007

Easy-to-read data entry / update form!
ICD9 codes to support each test order!
Allow client to verify accuracy of patient information!
Automatically print for patients who have been updated!

PROCTOR, MARY
Pat# 123456789 DOB 01/03/1903 F
Doctor MARTHA JONES
Div Wng EAST Flr 3 Rm 309B
Clt# 10000

PROCTOR, MARY
Pat# 123456789 DOB 01/03/1903 F
Doctor MARTHA JONES
Div Wng EAST Flr 3 Rm 309B
Clt# 10000

PROCTOR, MARY
Pat# 123456789 DOB 01/03/1903 F
Doctor MARTHA JONES
Div Wng EAST Flr 3 Rm 309B
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Doctor MARTHA JONES
Div Wng EAST Flr 3 Rm 309B
Clt# 10000

PROCTOR, MARY
Pat# 123456789 DOB 01/03/1903 F
Doctor MARTHA JONES
Div Wng EAST Flr 3 Rm 309B
Clt# 10000

PROCTOR, MARY
Pat# 123456789 DOB 01/03/1903 F
Doctor MARTHA JONES
Div Wng EAST Flr 3 Rm 309B
Clt# 10000

Convenient patient labels!

Use with unscheduled client requisitions for STAT orders or for identification of specimen containers!

01/01/2007
10:11

Patient Test Requisition

MedRight

MedRight Medical Laboratory
23 Mechanic St
Springville, NY 14141

Client # 10000
BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985

Divis SNF **Wing** EAST
Floor 3 **Room** 309B

Patient FORSTER, JEFFREY D
#123-45-6789

Medicare 123456789A
UPIN ABC123
PPS / / - / /
Medicaid 1234AB487878912
Private TRAVELERS
Policy 3A434A
Group 90339-39
Phys ID Category
Relation 1 (SELF)
Insured FORSTER, JEFFREY

DOB 01/03/1903
Gender MALE
SS#

Physician MARTHA JONES

Copy To THOMAS JOHNSON
444 W MAIN STREET
BUFFALO, NY 12222

Diagnosis

Lab Comment PATIENT PREFERS LEFT ARM. REQUEST ASSISTANCE
Report Comment

COLLECTION DATE_____ **COLLECTION TIME**_____am pm

Drawn	Test Code	Test Name	Fasting	Test Note
_____	CBC	CBC WITH DIFF	N	1 LAV TOP
_____	CHEM	CHEMISTRY PANEL	Y	1 SST
_____	UA	URINALYSIS	N	

For STAT, 1-time, or last minute orders!
Preprinted with patient's demographic and billing information!
List up to 26 of the client's most frequently ordered tests!
Customize draw fee tests to your laboratory!
Even include a 'reorder' form for client convenience!

01/01/2007
10:11

Client Test Requisition

MedRight

MedRight Medical Laboratory
23 Mechanic St
Springville, NY 14141

Client # 10000
BEST CARE NURSING HOME
10570 BERTOLD RD
SPRINGVILLE, NY 14141
(716) 759-6985

Divis **Wing**
Floor **Room**

Patient

DOB
Gender
SS#

Medicare
UPIN
PPS
Medicaid
Private
Policy
Group
Phys ID Category
Relation
Insured

Physician

Copy To

Diagnosis

Comments

COLLECTION DATE_____ **COLLECTION TIME**____am pm

Drawn	Test Code	Test Name	Fasting	Test Note
_____	CBC	CBC WITH DIFF	N	1 LAV TOP
_____	CHEM	CHEMISTRY PANEL	Y	1 SST
_____	UA	URINALYSIS	N	

**An alternative to patient customized requisitions for
STAT, 1-time, or last minute orders!
List up to 26 of the client's most frequently ordered tests!
Customize draw fee tests to your laboratory!**

01/01/2007
10:11

Patient Reminder List

MedRight

BEST CARE NURSING HOME (#10000)

FEBRUARY

Patient #	Name/Note	Divis	Wing	Floor	Room
123456789	FORSTER, JEFFREY ANNUAL PHYSICAL	EAST	3	309B	
123432423	HARRIS, MARY ANNUAL PHYSICAL	WEST	2	222A	

Reminder List of important events for Patients!
Display on screen or print!

CPT4	ICD9												
85007	250.00	250.02	250.10	250.11	250.12	250.20	250.21	250.22	250.23	250.31	250.33	250.40	250.41
	250.42	250.43	250.51	250.52									
85008	250.00	250.02	250.10	250.11	250.12	250.20	250.21	250.43	250.51	250.52			
85009	250.00	250.02	250.10	250.11	250.12	250.20	250.21	250.22	250.23	250.31	250.33	250.40	250.41
	250.42												

Medicare medical necessity requirements!
Sort by CPT4 code or by ICD9 code!
Quick reference list!
Display on screen or print!

01/01/2007
10:11

Patient List

BEST CARE NURSING HOME (#10000)

MedRight

Patient #	Name	Divis	Wing	Floor	Room	Orders
123456789	FORSTER, JEFFREY Physician: THOMSON, MARTHA		EAST	3	309B	ACT
123432423	HARRIS, MARY Physician: SMITH,JOHN		WEST	2	222A	EXP

Reference List may be selected with flexible parameters!
Shows order status of patients: Active, Expired, or None!
Display on screen or print!

01/01/2007
10:11

Client List

MedRight

Client #	Name/Address/Comment	Telephone	Fax		
10000	BEST CARE NURSING HOME 10570 BERTOLD RD SPRINGVILLE, CALL ALL PT RESULTS	(716) 592-2397			
	Tests	CHEM	CBC	UA	PT

Quick reference list!
Display on screen or print!

Physician List

Physician Information

Client

SMITH, JOHN	UPIN 122456
THOMSON, MARTHA	UPIN 98632

10000

Quick reference list!
Display on screen or print!

Test List

Test Code	Name/Note	Fasting	Group	Dept
CBC	CBC WITH DIFF 1 LAV TOP CPT4 85013	N		
CHEM	CHEMISTRY PANEL 1 RED TOP CPT4 85007 85008	Y		
LYTES	ELECTROLYTES SODIUM, POTASSIUM, CHLORIDE, CO2 CPT4 85007	Y		

Quick reference list!
Display on screen or print!