

Discovery diabetes pharmacy clinic: Diabetes pathology laboratory request form



Requesting pharmacy

Pharmacy BHF number

Requesting practice number of diabetes educator (not pharmacy practice number)

Doctor's practice number

1. Patient details

Title Initials

First name(s)

Surname

ID or passport number

Gender M F Date of birth

Telephone (H) Telephone (W)

Cellphone

Email

Medical aid Membership number

I certify that the above information is correct and give consent for selected tests to be done.

Patient / guardian signature Date

Hospital/patient number Specimen Fasting Random

Collection date Collection time :

Collected by

Special request Routine Urgent Stat

2. Person responsible for the account

Title Initials

First name(s)

Surname

Preferred language Gender M F

Date of birth ID or passport number

Employer

Telephone (H) Telephone (W)

Cellphone

Email

Postal address (Post collected from post box, suite or private bag)

PO Box Private Bag Box number

Suite Postnet Suite Number

Suburb

Code

I certify that the above information is correct. The scheme is not liable for tests outside of these listed on this form. I undertake to pay all outstanding amounts not covered by the Scheme.

Signature diabetes educator

Date

Initials and surname

Responsible pharmacist's signature

Date

Initials and surname

Please note:

- Point of Care pathology services done at the pharmacy, are used for monitoring purposes and only payable when these tests are requested and referred by the treating doctor and indicated on the claim.
- For diagnostic purposes, Discovery Health require pathology laboratory tests
- Please tick the appropriate blocks

Diabetes monitoring programme tests

| Code | Description (please tick the relevant box) |
|------|---|
| 4026 | <input type="checkbox"/> LDL cholesterol (chemical determination) |
| 4027 | <input type="checkbox"/> Cholesterol total |
| 4028 | <input type="checkbox"/> HDL cholesterol |
| 4032 | <input type="checkbox"/> Serum creatinine |
| 4057 | <input type="checkbox"/> Glucose: fasting |
| 4064 | <input type="checkbox"/> HbA1c |
| 4147 | <input type="checkbox"/> Triglyceride |
| 4171 | <input type="checkbox"/> U&E: Sodium + potassium + chloride + C02 + ura |
| 4221 | <input type="checkbox"/> Urine creatinine |
| 4223 | <input type="checkbox"/> Creatinine clearance |
| 4261 | <input type="checkbox"/> Micro Albumin: Quantitative |
| 4262 | <input type="checkbox"/> Micro Albumin: Qualitative |

The pharmacy pathology benefit covers only the tests itemised above.

Clinical information

ICD-10 codes 1. 2. 3. 4.