

PELOSI MEDICAL CENTER

Marco A. Pelosi III, MD

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Quest Act # 48048801

LabCorp Act # 29202125

PATIENT NAME: _____

DOB: _____

DATE: _____

WOMEN					
PMC Office Use Only			Test	ICD10	Order
Pr	Po	Thy			
x	x	x	Testosterone, Total	E28.39	
x	x	x	FSH	E28.39	
x	x	x	Estradiol	E28.39	
x		x	TSH	E02, R53.83	
x		x	Free T3	E02, R53.83	
x		x	Total T4	E02, R53.83	
x		x	TPO Thyroid Peroxidase	E02, R53.83	
x			CBC w/Diff	R53.81	
x			Complete Metabolic Panel	K76.89	
x			Vitamin D, 25-Hydroxy	E55.9	
x			Vitamin B12	D51.3	
x			Lipid Panel (Fasting)	E78.2	
		x	Ferritin	D50.9	
			Hemoglobin A1C	R73.09	

MEN					
PMC Office Use Only			Test	ICD10	Order
Pr	Po	Thy			
x	x	x	Testosterone, Free & Total	N52.8	
x	x	x	Estradiol	E29.1	
x	x	x	CBC w/Diff	R53.81	
x		x	TSH	E02, R53.83	
x		x	Free T3	E02, R53.83	
x		x	Total T4	E02, R53.83	
x		x	TPO Thyroid Peroxidase	E02, R53.83	
x			PSA, Total	N42.89	
x			Complete Metabolic Panel	K76.89	
x			Vitamin D, 25-Hydroxy	E55.9	
x			Vitamin B12	D51.3	
x			Lipid Panel (Fasting)	E78.2	
		x	Ferritin	D50.9	
			Hemoglobin A1C	R73.09	

Dr. Marco A. Pelosi III, MD signature: _____

IF LIPID PANEL IS ORDERED: No food for 8 hours prior to the blood draw; OK to drink 10-20 ounces of water.