

Clinical Kit Order Form



Please fill out the form in its entirety.
Print completed form and fax to 301-916-0175.

Send Kits To:

Name:

Date:

Address 1:

Address 2:

City, State, Zip:

Phone:

Email:

Clongen Laboratories, LLC
211 Perry Parkway, Suite 6
Gaithersburg MD 20877 USA
Phone: 301-916-0173
Toll-Free: 1-877-CLONGEN (256-6436)
Fax: 301-916-0175
www.clongen.com

Whole Blood Kits (PCR Tests)

Number of Whole Blood Kits:

Each Whole Blood Kit contains:

- 1 Purple-top (EDTA) Tube
- 1 Clinical Laboratory Test Request Form
- 1 Styrofoam shell for Shipping
- 1 Biohazard Bag (red)
- 1 FedEx Clinical Pak
- 1 Shipping Instructions Packet
- 1 Prepaid FedEx Label (Optional) - Patient can ship at their expense if they prefer

Urine, Sputum, Other Bodily Fluids Tissue/Biopsy Kits (PCR Tests)

Number of Tissue Kits:

Number of Containers Per Kit:

Each Tissue Kit contains:

- # of Sterile Red/Blue Top Containers Requested
- 1 Clinical Laboratory Test Request Form
- 1 Biohazard Bag per Container
- 1 FedEx Clinical Pak
- 1 Shipping Instructions Packet
- 1 Prepaid FedEx Label (Optional) - Patient can ship at their expense if they prefer

Important Ordering Information:

If the total testing order is less than \$400, a \$50.00 kit shipping fee will be added to the patient's bill.

Additional kit configurations are available. Call us at 301-916-0173 and we can arrange a custom order.

WHEN SUBMITTING SAMPLES, LABEL ALL SAMPLE CONTAINERS WITH PATIENT'S FULL NAME. WE WILL NOT PROCESS UNIDENTIFIED SAMPLES, NO EXCEPTIONS.

A doctor's order is **required** for all tests. Upon receiving the kit, ensure that your doctor fills out the "Ordered By" and Test Request portions of the Clinical Laboratory Test Request Form.

We **do not** accept insurance; the patient must pay up front. We issue a fully itemized and coded receipt that the patient can submit to their insurance company for reimbursement.

We Look Forward To Working With You!