



**Expediting Your  
Molecular Laboratory Results With our  
24-48 Hour Turnaround Time**



Welcome to



**ATOWN LABS**

Our Guide For  
Collecting &  
Sending Specimens  
To ATOWN LABS

### Contact Information

Territory Manager.....  
Phone Number.....  
Email.....

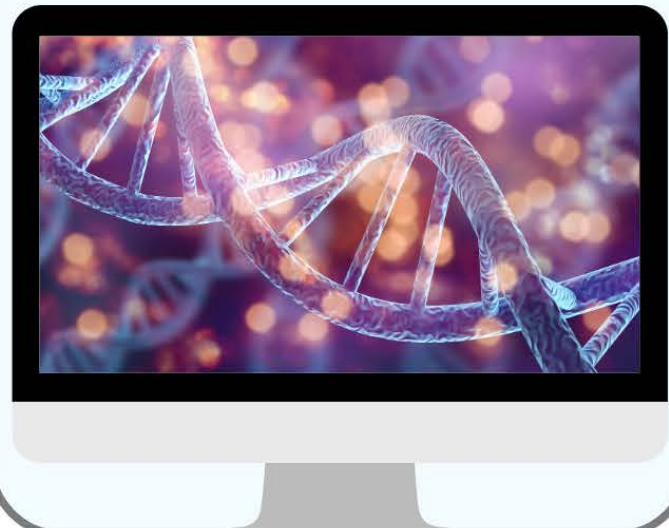
Account Manager.....  
Phone Number.....  
Email.....

Lab (805) 464-2641  
Fax (805) 465-6648  
admin@atownlabs.com  
Supply Orders: admin@atownlabs.com  
Website: www.atownlabs.com

Web-portal User Name.....  
Password.....

Fill out Each  
Patient Requisition  
Form Precisely

1

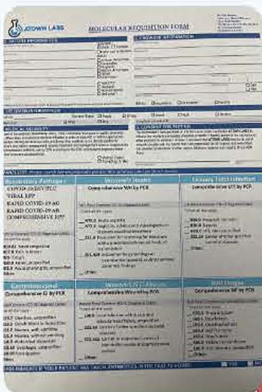




Place Patient Identification Sticker On Cup & Collect Patient Specimen

2

Place Specimen In Biohazard Bag & Seal Then Insert Patient Requisition & Insurance Forms In Back Pocket



Insert Plastic UPS Laboratory Bag Inside Shipping Box

3

Place Up To 10 Specimens In Each UPS Laboratory Pack Once It Is Filled With Specimens Then Seal UPS Box



Attach The UPS Shipping Label To UPS Box

4

Leave UPS Box At Designated Pick Up Area Or Bring To Your Local UPS Drop Box Or UPS Office



# WHAT IS DETECTED PATHOGENIC BACTERIA, FUNGI, VIRUSES AND PARASITES ON PATIENT SAMPLES

## Women's Health BVV Plus

Burning, itching, an unpleasant odor, and unusual discharge are all symptoms which may indicate the presence of bacterial vaginosis or yeast caused vaginitis.

Our advanced molecular testing provides fast, definitive results leading to effective treatments for BV and VC infections.

### Bacterial

Bacteroides fragilis  
Mycoplasma hominis  
Mobiluncus curtisii  
Mobiluncus mulieris  
Ureaplasma urealyticum  
Prevotella bivia  
Enterococcus faecalis  
Candida species  
Staphylococcus aureus  
Reflex to MRSA  
Streptococcus agalactiae (GBS)  
Escherichia coli  
Trichomonas vaginalis

## Respiratory Pathogens Respiratory Disease

Molecular genetic testing is gaining popularity for the detection of respiratory pathogens. Identifying slow growing pathogens can be difficult using traditional culturing. Symptoms to Consider

- Acute Bronchitis
- Common cold
- Acute pharyngitis
- Acute tonsillitis
- Cough and fever
- Wheezing
- Pneumonia
- Viral infection
- Other nasal and sinus diseases

### Bacteria

Mycoplasma pneumoniae  
Chlamydia pneumoniae  
Streptococcus pneumoniae  
Klebsiella pneumoniae  
Legionella  
Haemophilus influenzae B  
Staphylococcus aureus  
Reflex to MRSA  
Salmonella Spp  
Moraxella catarrhalis  
Bordetella Spp  
Haemophilus influenzae

### Viruses

Coronavirus HKU1  
Coronavirus NL63  
Coronavirus 229E  
Coronavirus OC43  
Human Metapneumovirus A/B  
Human Rhinovirus  
Human Enterovirus  
Influenza A, B, C  
Influenza A/H1-2009  
Parainfluenza Virus 1,2, 3,4  
Respiratory Syncytial Virus A/B  
Adenovirus  
Bocavirus

### Fungi

Fungal Targets Pneumocystis Jirovecii

## Sexually Transmitted Infections STI Panels

Urine STI Panel & Swab STI Panel

- Identifies pathogens which are difficult to culture
- Yields greater than 95% analytical sensitivity and specificity

### Urine STI Panel

Mycoplasma hominis  
Ureaplasma urealyticum  
Mycoplasma genitalium  
Leukorrhea Panel:  
Trichomonas vaginalis  
Neisseria gonorrhoeae  
Chlamydia trachomatis

### Swab STI Panel

Trichomonas vaginalis  
Chlamydia trachomatis  
Neisseria gonorrhoeae  
Mycoplasma genitalium  
Mycoplasma hominis  
Ureaplasma urealyticum

### Genital Ulcer Panel:

Herpes simplex 1&2  
Haemophilus ducreyi  
Treponema pallidum

# WHAT IS DETECTED PATHOGENIC BACTERIA, FUNGI, VIRUSES AND PARASITES ON PATIENT SAMPLES

## Urinary Tract Infection

- Drug resistant marker results available prior to antibiotic sensitivity results
- Traditional antibiotic sensitivity results accompany UTI results

## Pathogens Detected

UTI ID Panel  
 Escherichia coli  
 Citobacter freundii  
 Staphylococcus aureus  
 Staphylococcus saprophyticus  
 Enterococcus faecalis  
 Ureaplasma urealyticum  
 Mycoplasma hominis  
 Candida species  
 Proteus mirabilis  
 Klebsiella pneumoniae  
 Morganella morganii  
 Serratia marcescens  
 Klebsiella oxytoca  
 Enterobacter cloacae  
 Providence stuartii  
 Pseudomonas aeruginosa  
 Streptococcus agalactiae

-----  
 "Resistance markers" (via PCR)

## Wound Panel Symptoms to Consider

- Increased swelling, tenderness, or pain
- Cloudy drainage, yellow or green pus
- Expanding redness or red streaking
- Fever

## Pathogens Detected

Acinetobacter baumannii  
 Bacteroides spp.  
 Citobacter freundii  
 Enterobacter aerogenes  
 Enterobacter cloacae  
 Enterococcus faecalis  
 Enterococcus faecium  
 Escherichia coli  
 Morganella morganii  
 Proteus mirabilis  
 Proteus vulgaris  
 Pseudomonas aeruginosa  
 Staphylococcus aureus  
 "Resistance Markers"  
 Klebsiella oxytoca  
 Streptococcus pyogenes  
 (Group A)  
 Klebsiella pneumonia

## Gastrointestinal Panel

When it comes to gastrointestinal problems, viruses are often the most prevalent, and least tested for, cause. Traditional testing for bacteria, while commonly done, is often positive in only 5% or less of cases. Molecular genetic testing offers exceptional sensitivity and excellent specificity for bacteria, viruses, and even parasites.

## Symptoms to Consider

- Abdominal pain or left quadrant pain
- Abnormal loss of weight
- Blood in stool
- Colitis, enteritis, and gastroenteritis
- Functional diarrhea or diarrhea of infectious origin
- Nausea with vomiting
- Fever
- Viral enteritis and non-infectious gastroenteritis

## Bacteria

Campylobacter spp.  
 Clostridium difficile  
 Verotoxin positive E. coli  
 Enteroinvasive E. coli  
 Enteropathogenic E. coli  
 Enteroaggregative E. coli  
 Enterotoxigenic E. coli  
 Enterohemorrhagic E. coli  
 Salmonella spp.  
 Shigella spp.  
 Yersinia enterocolitica

## Viruses

Norovirus G1, G2  
 Adenovirus  
 Astrovirus  
 Rotavirus  
 Sapovirus

## Parasites

Entamoeba histolytica  
 Cryptosporidium spp.  
 Giardia lamblia



# WHAT IS DETECTED PATHOGENIC BACTERIA, FUNGI, VIRUSES AND PARASITES ON PATIENT SAMPLES

## High Risk HPV

HPV, the human papillomavirus, is a sexually transmitted infection (STI). There are many types of HPV, some of which cause no symptoms. High-risk HPV infections may result in changes to the cells of the cervix, and these changes can, over time, lead to cervical cancer. Our high-risk HPV tests, using molecular method testing, are commonly performed for women whose Pap test has shown abnormal cervical cells, to check for HPV in women over 30, or as a follow up for women who have completed treatment for a high-risk HPV infection.

### Pathogens

HPV 16

HPV 18

Other High Risk HPV

## Eye, Ear, Nose, Throat Symptoms to Consider

- Increased swelling, tenderness, or pain in the eye, ears, nose, throat
- Cloudy drainage, yellow or green pus
- Expanding redness or red streaking
- Fever

### Pathogens Detected

Acinetobacter baumannii

Bacteroides spp.

Citobacter freundii

Enterobacter aerogenes

Enterobacter cloacae

Enterococcus faecalis

Enterococcus faecium

Escherichia coli

Morganella morganii

Proteus mirabilis

Proteus vulgaris

Pseudomonas aeruginosa

Staphylococcus aureus

“Resistance Markers”

Klebsiella oxytoca

Streptococcus pyogenes

(Group A)

Klebsiella pneumonia

# Requisition & Billing Information

**Atown Labs** strives to efficiently process your patients' specimens. Please ensure that all patient demographic and insurance information is sent with a completed requisition.

**Billing Information** that is not received with a patient specimen prevents Atown Labs from filling a patient claim, prompting our billing department to contact your office for missing information.

**Completed Requisition Example** shows exactly what information needs to be filled out. Please attach a copy of the patient's insurance card (front & back) with each requisition form.

**Checkmark Lab** for Atown Labs on each requisition form. The only exception is if you have entered into a Client Bill agreement with Atown Labs and want to bill for a specimen.

**ICD-10 Code** must be provided on every requisition and must reflect the patient's chart. If the patient has a Federal Insurance, there will need to be a primary and a secondary diagnosis code. For further information on ICD-10, please view any of these references:

## ICD-10 Website

[www.cms.gov/medicare/coding/icd10/ikdex.html](http://www.cms.gov/medicare/coding/icd10/ikdex.html)

## Provider Road Mapping

[www.roadto10.org/](http://www.roadto10.org/)

## Mapping

<https://www.cms.gov/medicare/coding/icd10/2016-icd-10-cm-and-gems.html>



For Any Questions  
Please Contact

Billing Department  
Phone (805)464-2641  
Fax (805) 465-6648  
[rfann@atownlabs.com](mailto:rfann@atownlabs.com)

Fill Out Each  
Patient  
Requisition  
Form Precisely

1

Please Copy the  
Front of Patient's  
Driver License or  
State ID. Include  
a Copy of their  
Insurance Card  
Front & Back



Please Copy Front & Back of Patient's Insurance Card





## 1. PATIENT INFORMATION

Last Name / First Name / M.I. \_\_\_\_\_

Address / Apt \_\_\_\_\_

City / State / Zip / County \_\_\_\_\_

Phone \_\_\_\_\_

DOB SSN \_\_\_\_\_

Insurance Subscriber ID \_\_\_\_\_

Group # \_\_\_\_\_

GENDER  Male  
 Female  
 Prefer not to say

Race:  
 African American  
 Caucasian  
 Hispanic  
 Native American  
 Other  
 Unknown

Ethnicity:  
 Hispanic  
 Non-Hispanic  
 Unknown

*\* Please attach a photocopy (front & back) of the patient's insurance card(s) & driver's license.*

## 2. PROVIDER INFORMATION

Client Name / Account \_\_\_\_\_

Address / Ste \_\_\_\_\_

City / State / Zip / County \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Ordering Provider Collection Date \_\_\_\_\_

Specimen Collected By Collection Time  \_\_\_\_\_

State Collected \_\_\_\_\_ : \_\_\_\_\_ P\_M \_\_\_\_\_

Bill to:  Insurance  Uninsured  Facility

## 3.3. SPECIMEN INFORMATION

Source: \_\_\_\_\_ Sample Type:  Swab  Urine  Stool  Nail  Other: \_\_\_\_\_

Wound: \_\_\_\_\_  Wet  Dry

Location of wound: \_\_\_\_\_

## 3.4. MEDICAL NECESSITY

As part of my antibiotic stewardship policy, I find it medically necessary to rapidly determine and differentiate a viral and/or bacterial infection in order to treat with or without appropriate antibiotics. Having the most accurate and timely data available to me directly guides my treatment and patient management. Empiric treatment and management leads to inappropriate and unnecessary antibiotic use by 50% according to the CDC and delayed diagnosis which can lead to severe consequences.

- Verbal Order  
 Standing Order

Provider Signature \_\_\_\_\_

## 5. CONSENT FOR TESTING

The information I have provided on this form is accurate. I authorize **ATOWN LABS** to release the results to my treating physician or facility. I hereby authorize my insurance or other payment for services I receive. I am aware that **ATOWN LABS** may be an out of network provider with my insurer that I am responsible for all co-pays and deductibles not covered by insurance or other payers. Medicare patients may need to fill out ABN Form.

Patient Signature \_\_\_\_\_

Date \_\_\_\_\_

## 6. PANEL LIST: Please check the appropriate panels that address your patient's needs.

<h3>Respiratory Pathogen</h3> <p><input type="checkbox"/> COVID-19/RSV/FLU  <input type="checkbox"/> VIRAL RPP  <input type="checkbox"/> RAPID COVID-19 AG  <input type="checkbox"/> RAPID COVID-19 AB  <input type="checkbox"/> COMPREHENSIVE RPP</p> <p><i>RPP Panel Common ICD-10 Diagnosis Codes:</i>  <i>*Check all that apply.</i>      ___ R09.81 Nasal congestion      ___ R07.0 Pain in throat      ___ R05 Cough      ___ R50.9 Fever, unspecified      ___ J02.9 Acute pharyngitis, unspecified      ___ Other:</p>	<h3>Women's Health and STI</h3> <p><input type="checkbox"/> Comprehensive WH by PCR      STI Panel      Hepatitis B and C Virus by PCR</p> <p><i>WH Panel Common ICD-10 Diagnosis Codes:</i>  <i>*Check all that apply.</i>      ___ N76.0 Acute vaginitis      ___ N77.1 Vaginitis, vulvitis and vulvovaginitis in diseases classified elsewhere      ___ Z11.3 Encounter for screening for infections with a predominantly sexual mode of transmission      ___ Z01.419 Encounter for gynecological examination (general, routine) without abnormal findings      ___ Other:</p>	<h3>Urinary Tract Infection</h3> <p><input type="checkbox"/> Comprehensive UTI by PCR</p> <p><i>UTI Panel Common ICD-10 Diagnosis Codes:</i>  <i>*Check all that apply.</i>      ___ R35.0 Frequent Urination      ___ R30.0 Dysuria      ___ N39.0 UTI, site unspecified      ___ Z22.39 Carrier of other specified bacterial diseases      ___ Other:</p>
<h3>Gastrointestinal</h3> <p><input type="checkbox"/> Comprehensive GI by PCR</p> <p><i>GI Panel Common ICD-10 Diagnosis Codes:</i>  <i>*Check all that apply.</i>      ___ R19.7 Diarrhea, unspecified      ___ R19.5 Occult blood in feces/stool      ___ R11.2 Nausea, with vomiting      ___ R11.0 Nausea, without vomiting      ___ R14.0 Abdominal distention      ___ R13.10 Dysphagia, unspecified      ___ K59.00 Constipation      ___ Other:</p>	<h3>Wound / ENT / Abscess</h3> <p><input type="checkbox"/> Comprehensive Wound by PCR      Source _____</p> <p><i>Wound Panel Common ICD-10 Diagnosis Codes:</i>  <i>*Check all that apply.</i>      ___ L08.9 Local infection of the skin and subcutaneous tissue, unspecified      ___ Z22.39 Carrier of other specified bacterial diseases      ___ Z22.322 Carrier or suspected carrier of Methicillin-resistant Staphylococcus aureus      ___ Other:</p>	<h3>Nail Fungus</h3> <p><input type="checkbox"/> Comprehensive NF by PCR</p> <p><i>Nail Panel Common ICD-10 Diagnosis Codes:</i>  <i>*Check all that apply.</i>      ___ B35.1 Tinea unguium      ___ L60.1 Onycholysis      ___ L60.2 Onychogryphosis      ___ L60.3 Nail dystrophy      ___ L60.4 Beau's lines      ___ L60.5 Yellow nail syndrome      ___ L60.9 Nail disorder, unspecified      ___ Other:</p>

## 7. PLEASE INDICATE IF YOUR PATIENT HAS TAKEN ANTIBIOTICS IN THE PAST 72 HOURS: YES NO



**PANEL TARGETS (Maximum of 25 Targets per panel)**

Respiratory Pathogen	Women's Health	Urinary Tract Infection	Wound /ENT
<b>SARS-Cov-2 RT-PCR Genes: N/S/ORF1AB</b> Coronavirus SARS-CoV-2 Coronavirus SARS-CoV-2 w/ Reflex to RPP SARS-CoV-2 Variant <b>SARS-CoV-2 Bio BCC19 (Rapid) Genes: N&amp;E</b> <b>SARS-CoV-2 Ag (Rapid)</b> <b>Comprehensive RPP w/ PCR</b> <b>VIRAL TARGETS</b> <b>Influenza</b> Influenza A Influenza A/H1-2009 Influenza A/H3 Influenza B Influenza C <b>Common Cold</b> Adenovirus 1/2 Coronavirus (HKU1/NL63/229E/OC43/MERS/SARS) Human Enterovirus Bocavirus Parechovirus RSV A/B Human metapneumovirus A/B <b>BACTERIAL TARGETS</b> <b>Pneumonia</b> Mycoplasma pneumoniae Chlamydia pneumoniae Streptococcus pneumoniae Klebsiella pneumoniae Haemophilus influenzae A/B Legionella pneumophila Coxiella burnetii Moraxella catarrhalis Bordetella spp. (Pertussis/bronchiseptica/parapertussis) Bordetella holmesii Streptococcus pyogenes Staphylococcus aureus w/ MRSA Antibiotic Sensitivity Markers <b>FUNGAL TARGETS</b> Pneumocystis jirovecii <b>Comprehensive Strep Differentiation</b> Group A Strep Group B Strep Group C & G Strep	<b>Comprehensive WH by PCR</b> <b>BACTERIAL VAGINOSIS</b> Mobiluncus curtisii & mulieris Megaspheera type 1 & 2 Ureaplasma urealyticum Prevotella bivia Gardnerella vaginalis Bacterial vaginosis-Associated bacterium 2 Atopobium vaginae Mycoplasma hominis L.crispatus/gasserii/iners/jensenii <b>AEROBIC VAGINITIS</b> Staphylococcus aureus w/ MRSA Streptococcus agalactiae (Group B) Escherichia coli Enterococcus faecalis <b>CANDIDA SPECIES</b> <b>STI PANEL</b> Mycoplasma hominis Ureaplasma urealyticum Mycoplasma genitalium <b>LEUKORRHEA PANEL</b> Trichomonas vaginalis Neisseria gonorrhoeae Chlamydia trachomatis <b>GENITAL ULCER PANEL</b> Herpes simplex 1 & 2 Haemophilus ducreyi Treponema pallidum <b>Human Papillomavirus (HPV)</b> <b>35th Week Strep B</b> Streptococcus agalactiae (Group B)	<b>Comprehensive UTI by PCR</b> <b>UTI ID PANEL</b> Escherichia coli Staphylococcus aureus Staphylococcus saprophyticus Enterococcus faecalis Mycoplasma hominis Candida tropicalis Candida glabrata Candida albicans Candida kruesii Candida lusitanae Candida parapsilosis Proteus mirabilis Klebsiella pneumoniae Morganella morganii Serratia marcescens Klebsiella oxytoca Enterobacter cloacae Providencia stuartii Pseudomonas aeruginosa Streptococcus agalactiae <b>Antibiotic Sensitivity Markers</b> AmpC Carapenem (KPC, OXA-48, VIM, NDM, IMP-7) ESBL (TEM, CTX-M group 2, SHV) Macrolide (ermA, ermB, mefA) Methicillin (meca, femA) Vancomycin (vanA1, vanA2, vanB) Quinolone/Fluoroquinolone (QnrA, QnrB) <b>URINE STI PANEL</b> Mycoplasma hominis Ureaplasma urealyticum Mycoplasma genitalium <b>Leukorrhea</b> Trichomonas vaginalis Neisseria gonorrhoeae Chlamydia trachomatis	<b>Comprehensive Wound by PCR</b> <b>BACTERIAL</b> Enterobacter cloacae Enterococcus faecalis Enterococcus faecium Escherichia coli Klebsiella oxytoca Klebsiella pneumoniae Morganella morganii Proteus mirabilis Pseudomonas aeruginosa Serratia marcescens Acinetobacter baumannii Bacteroides fragilis Bartonella henselae Bartonella quintana Streptococcus pyogenes (Group A) Streptococcus agalactiae (Group B) Streptococcus dysgalactiae (Group C) Methicillin Sensitive: Staphylococcus aureus (MSSA) Staphylococcus epidermidis (MSSE) Methicillin Resistant: Staphylococcus aureus (MRSA) Staphylococcus epidermidis (MRSE) <b>MYCOBACTERIAL</b> Mycobacterium fortuitum <b>VIRAL</b> Herpes Simplex 1 Herpes Simplex 2 Herpes Simplex 3 (Varicella Zoster) <b>FUNGAL</b> Candida albicans Candida glabrata Candida parapsilosis Candida dubliniensis Candida tropicalis Candida krusei Trichophyton rubrum Trichophyton mentagrophytes Aspergillus fumigatus Aspergillus spp. <b>Antibiotic Resistance</b> Vancomycin resistance (VanA/VanB) Carapenem resistance (KPC, NDM-1)

Gastrointestinal	Nail Fungus
<b>Comprehensive GI by PCR</b> <b>ENTERIC PATHOGENS</b> <b>BACTERIAL</b> Campylobacter Clostridium difficile Toxin A/B Escherichia coli O157 Enterotoxigenic E. coli (ETEC) LT/ST Shiga-like Toxin producing E. coli (STEC) stx1/stx2/Salmonella/Shigella Helicobacter pylori <b>VIRAL</b> Norovirus GI/GII Rotavirus A <b>PARASITES</b> Giardia lamblia <b>FUNGAL</b> Cryptosporidium <b>OTHERS</b> Lactoferrin Calprotectin	<b>Comprehensive NF by PCR</b> Acremonium spp. Candida albicans Candida glabrata Candida krusei Candida parapsilosis Trichophyton rubrum Trichophyton mentagrophytes Aspergillus fumigatus Candida dubliniensis Candida tropicalis Aspergillus spp. Dermatophyte Classification Fusarium spp. Scopulariopsis spp. <b>Antibiotic Resistance Markers</b>

**8.STATE REQUIRED QUESTIONS FOR COVID-19 TRACKING (Select)**

Employed in Healthcare?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
First Test? If "No", then Date of First Test (MM/DD/YY):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date _____
Hospitalized?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
ICU?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
If "Yes" to Symptomatic, then Date of Symptom Onset (MM/DD/YY):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
Pregnant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date: _____
Resident in a congregate care setting (including nursing homes, residential care for people with intellectual and developmental disabilities, psychiatric treatment facilities, group homes, board and care homes, homeless shelter, foster care or other setting)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
Symptomatic as defined by CDC?			<input type="checkbox"/> Unknown



# Molecular Testing

**Atown labs** Testing services include:

## COVID-19 TESTING

We utilize test kits with EUA approved tests that complies with California regulations and other States.

## INFECTIOUS DISEASE TESTING

ATOWN LABS utilizes advanced molecular testing using RT-PCR technology for some tests and others use LC-MS technology for better outcomes and quality of life. We cover a full array of pathogen testing based on our fully validated Lab developed tests that include:

### RESPIRATORY PANEL

RPP VIRAL  
RPP BACTERIAL WITH ABR  
RPP BACTERIAL W/O ABR  
COVID19 BY RT-PCR

### MEN'S HEALTH

TESTOSTERONE  
UTI PANEL WITH ABR  
UTI PANEL WITHOUT ABR  
THYROID PANEL  
VITAMIN PANEL  
PROSTATE HEALTH  
SEXUAL HEALTH PANEL (STD PANEL)  
GASTROINTESTINAL PATHOGENS

### WOMEN'S HEALTH

ESTROGEN  
THYROID PANEL  
VITAMIN PANEL  
WOMEN'S HEALTH PANEL (STD PANEL)  
GASTROINTESTINAL PATHOGENS  
UTI PANEL WITH ABR  
UTI PANEL WITHOUT ABR

### WOUND/ EYE, EAR, NOSE & THROAT PANEL

WOUND/ABSCESS PATHOGEN PANEL  
WOUND PANEL WITH ABR  
EENT PANEL WITH ABR  
BACTERIAL  
VIRAL  
MYCOBACTERIAL  
FUNGAL WITH ABR/ WITHOUT ABR

### NAIL PANEL

NAIL PATHOGENS (FUNGAL)  
NAIL PATHOGENS (COMPREHENSIVE)





To Order Labs or View Results Visit Our Website [www.atownlabs.com](http://www.atownlabs.com)

## HOW TO VIEW RESULTS

1. From our website [www.atownlabs.com](http://www.atownlabs.com) click on **Lab Orders & Results**
2. Login with your username and password
3. If this is a recent order, click on **Inbox** at the top of the web page or, if this is an earlier order, click **Result Inquiry**
4. Then search by **Last Name** on your company phone or desktop computer



1

Lab Orders & Results

2

Web Portal Login



3

Enter Web Portal

4

Search by Last Name

A smartphone screenshot of the search results page. At the top, it says "ATOWN LABS Please enter one of the following search". Below are several search criteria with input fields: "Last Name", "First Name", "D.O.B", "Unit/Physician" (with a dropdown menu showing "ALL"), "Order date", "Collection Date", "Starting Date" (with a calendar icon), and "Ending Date" (with a calendar icon). At the bottom, there is a red link: "Check here for more search options".



ATOWN LABS  
 9471 EL CAMINO REAL  
 ATASCADERO, CA 93422  
 DIRECTOR: CARL JOHNSON, MD  
 Ph: (805) 464-2641 Fx: (805) 465-6648

Name: TEST,PATIENT D.O.B: 01/01/2005 Sex: M Age: 18 Fasting: NO Collector: RGO	OrderDate: 01/24/23 05:08PM DrawDate : 01/24/23 05:08PM RecvDate : 01/24/23 05:08PM Completed: 01/24/23 05:09PM	Acc# : 10545 Ordered By: TEST DOCTOR Location: OUTPATIENT Priority: ROUTINE Comment:
--	--	--

Test Name	RESULT		REFERANCE RANGE	UNITS	TECH
	IN RANGE	OUT OF RANGE			

*MOLECULAR* COVID-19 BY RT-PCR	NEGATIVE	<50	Ct	RGO
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The iAMP COVID-19 Detection Kit Letter of Authorization, along with the authorized Fact Sheet for Healthcare Providers, the authorized Fact Sheet for Patients, and authorized labeling are available on the FDA website:  
<https://www.fda.gov/medical-devices/emergency-situations-medical-devices/emergency-use-authorizations#covid19ivd>.

Physician: TEST DOCTOR Address: 123 TEST DRIVE Suite/Room: STE 345 City, State: ATASCADERO, CA Zip: 93422 Phone: 888-888-8888 Fax: 888-888-8888	Patient: TEST,PATIENT Address: 6543 CRESTLINE STREET City, State: ALBANIA, NY Zip: 89567 Phone: 908.345.4567 EMAIL: TESTPATIENT@GMAIL.COM PRINTED: 01/24/2023 05:09PM
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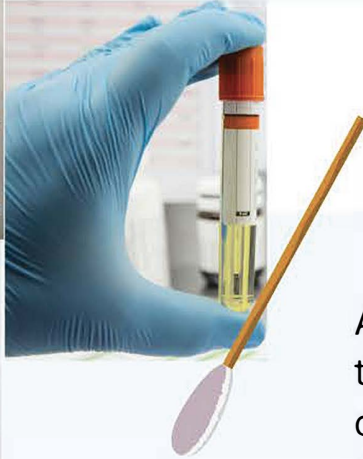


# Order Lab Supplies

Visit Our Website  
for On-Line Supply Ordering

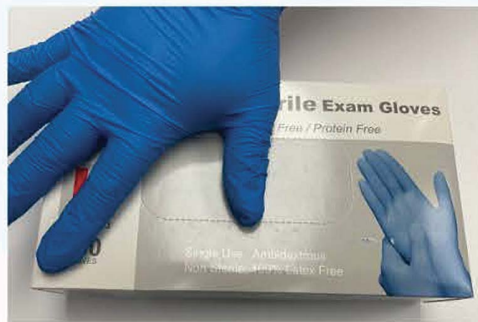
[www.atownlabs.com/drugtesting/supplyorderform](http://www.atownlabs.com/drugtesting/supplyorderform)

Or Request Supplies by Sending Us Your Completed Supply Order Form to [supplies@atownlabs.com](mailto:supplies@atownlabs.com) or fax (805) 465-6648



Atown Labs Supplies All of the Necessary Items to Send Us Your Patient Specimens. You can order standard Supplies like Requisition Forms, Specimen Cups, Saliva Collection Devices, Biohazard Bags, UPS Laboratory Paks, UPS Shipping Boxes and Shipping Labels.

In Addition, We Also Supply Urine Tubes, Exam Gloves and Disinfectant Wipes.



If You Have an Implementation Kit, We Also Provide Sample Labels, Printer Ink and Printer Paper.



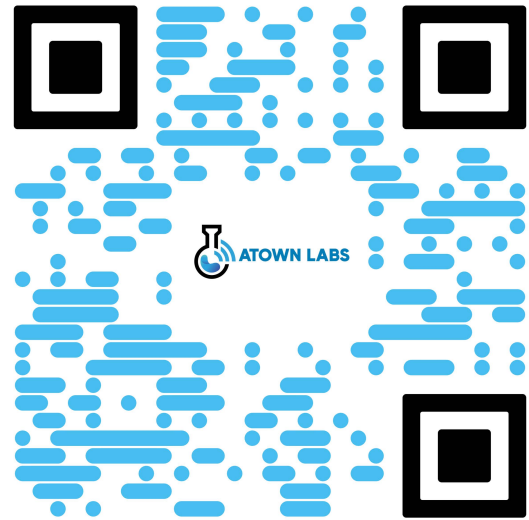
Online payment  
Custom Amount



Scan to Pay

Online payments are for invoices received from our facility. Remember to indicate your invoice number on the memo to receive full credit. Call us for questions.

Below is our appointment tab, we recommend scheduling an appointment in order for us to serve you better. We have very short wait times between scheduled patients.



Scan to book appointments



Visit our website if you wish to know more about our services. Our fast Turnaround time and expeditious process is what our patients like about us. Insurance coverage question is no longer a question! Come with your valid insurance card and we will let you know if you're covered or not. If in doubt, just ask about patient eligibility check for free.



Visit our Website





9471 El Camino Real  
Atascadero, CA 93422  
(805) 465-6648  
[www.atownlabs.com](http://www.atownlabs.com)

