

ST. LUKE'S UNIVERSITY HEALTH NETWORK**REQUISITION FORM****EMPLOYEE WELLNESS INITIATIVE 2019**

Take this form to a St. Luke's Health Network Outpatient Lab Specimen Collection Site

STOP! Do you need to get labs drawn?

Only those who did not complete the *Caring Starts With You* program steps in 2018 are able to participate in the 2019 program. Please check your *Caring Starts With You* portal account to verify whether you need to participate in 2019. If you already have 6 green circles, you do NOT need to participate. To access your *Caring Starts With You* portal account, click the link at MyNet/EmployeeWellness or visit sluhn.wellness.geisinger.org

Fasting is no longer required for this testing.

NAME _____
Last, First

BIRTHDATE _____
mm/dd/yyyy

GENDER: M _____ F _____

Ordering Provider: EMPLOYEE WELLNESS, PROVIDER (16295)

Diagnosis Code: Z00.8 Encounter for other general examination

-Choose 188073 Health examination in population survey from addt'l list

Registrar: Use Epic Corporate Billing Code-C027 Employee Wellness

√	LAB90	Hemoglobin, Glycosylated
√	LAB18	Lipid Panel

Specimen Collection Date/Time: _____

Please PRINT your Primary Care provider or other providers who should receive a copy of these results:
