

2010 AAFP Proficiency Testing Order Form

Please print all requested information on the order form and mail or fax to:
 AAFP-PT, 11400 Tomahawk Creek Parkway, Leawood, KS 66211-2672
 Fax: (913) 906-6079, Phone (800) 274-7911
 Order before December 1, 2009 to guarantee specimen availability.

SHIP DATES: MARCH 1, JUNE 7, OCTOBER 4
 Products ordered may contain pathogenic materials. AAFP-PT is not liable or responsible for the handling, storage, use and disposal of the product upon receipt by your office.

ORDER INFORMATION

Distribution Company Name _____

Sales Rep Name _____

Phone Number _____ Fax Number _____

E-mail _____

Distributor P.O.# _____

Notes: _____

Authorized Signature _____

AAFP-PT # _____

Practice Name _____

Number of Physicians in Practice _____

Number of Family Physicians in Practice _____

Medical Director (please print as listed on CLIA certificate) _____

Street Address _____

City, State, Zip _____

Attention _____

Phone Number _____ Fax Number _____

E-mail _____

REGULATORY INFORMATION

CLIA ID# _____ D _____

COLA # _____

Other Accrediting Agency # _____

State Agency (or region, if applicable) # _____

Note: All Texas labs must indicate CMS Region _____

r JCAHO Affiliated

HEMATOLOGY

r 603	Blood Cell Identification	.....	\$42
r 604	Reticulocyte Count	.....	\$195
r 605	CoaguChek Protime (Waived)	.....	\$120
r 610	Regular Hematology	.....	\$201
r 611	QBC Hematology	.....	\$252
r 613	Auto Diff I	.....	\$216
r 614	Auto Diff II	.....	\$216
r 745	Auto Diff 5 (5-part Diff)	.....	\$285
r 746	Auto Diff 6 (5-part Diff)	.....	\$285
r 747	Auto Diff 7 (5-part Diff)	.....	\$285
r 752	Auto Diff 8 (5-part Diff)	.....	\$285
r 650	Blood Bank	.....	\$360
r 680	Coagulation – Plasma	.....	\$135
r 730	Sed Rate (ESR)	.....	\$ 120
r 734	ITC Microcoag System	.....	\$120
r 736	ABO/Rh Only	.....	\$234
r 738	CoaguChek Protime (5)	.....	\$207
r 739	Sickle Cell Screen	.....	\$132
r 740	D-Dimer	.....	\$132
r 744	ITC Hemachron Protime (Citrated WB)	.....	\$225
r 748	I-Stat Protime	.....	\$216
r 764	CoaguChek XS Plus (2)	.....	\$129
r 765	CoaguChek XS Plus	.....	\$210

IMMUNOLOGY / VIROLOGY

r 643	ANA	.....	\$135
r 644	H. pylori	.....	\$129
r 653	Rheumatoid Factor	.....	\$132
r 654	Lyme Serology	.....	\$174
r 655	Immunoproteins	.....	\$189
r 671	Total IgE	.....	\$126
r 673	Rubella	.....	\$135
r 674	Diagnostic Allergy	.....	\$285
r 675	Infectious Mono	.....	\$135
r 678	Serum hCG	.....	\$135
r 679	Syphilis Serology	.....	\$150
r 683	ASO/CRP	.....	\$192
r 684	CRP (2)	.....	\$129
r 750	Viral Markers	.....	\$339
r 751	Infectious Mono/EBV	.....	\$186
r 753	Infectious Mono (Waived)	.....	\$69
r 754	Infectious Mono/RF Combo	.....	\$204
r 755	HIV Antigen	.....	\$345
r 756	Viral Antibodies	.....	\$141
r 757	Special Immunology	.....	\$135
r 758	Mycoplasma Antibody	.....	\$120
r 759	Complete Immunology	.....	\$363
r 760	ANA (Elisa)	.....	\$135
r 761	hs CRP	.....	\$108
r 762	HIV Antibody (Waived Methods)	.....	\$150
r 765	Allergen Testing	.....	\$132
r 766	Anti-HIV	.....	\$339
r 767	Hepatitis Markers	.....	\$339

MICROBIOLOGY

r 661	Urine Colony Count	.....	\$168
r 668	Gram Stain	.....	\$138
r 691	Strep Antigen (5 Challenges)	.....	\$153
r 665	Strep Antigen (2 Challenges)	.....	\$84
r 699	Strep Antigen (1 Challenge)	.....	\$75
r 770	Viral Antigen Detection	.....	\$285
r 771	Affirm VP Package	.....	\$345
r 772	Dermatophyte Culture/Screen	.....	\$213
r 773	Candida Detection Package	.....	\$267
r 774	GenProbe GC/Chlamydia	.....	\$342
r 794	GC & Chlamydia Ag Det. (5)	.....	\$300
r 795	GC & Chlamydia Ag Det. (2)	.....	\$108
r 775	Urine Culture	.....	\$243
r 776	Throat Culture	.....	\$243
r 777	GC Culture	.....	\$243
r 778	Urine and Throat Cultures	.....	\$243
r 779	Urine and Genital Cultures	.....	\$243
r 780	Throat and Genital Cultures	.....	\$243
r 781	Urine, Throat and Genital Cultures	.....	\$243
r 782	Complete Bacteriology	.....	\$264
r 783	Group A Strep/Add-On (2)	.....	\$30
r 796	GC Culture/Add-on (2)	.....	\$108

(*796 can only be ordered in conjunction with other culture Modules)

r 784	Pres ID/Colony Count – Urine	\$264
r 785	Pres ID/Colony Ct – Urine/ Strep Combo	\$264
r 786	Parasitology	\$198
r 787	Giardia Antigen Detection	\$117
r 788	Acid Fast Smear	\$126
r 789	Bacterial Antigen Detection	\$279
r 790	Urine Susceptibility Add-On	\$24

(*790 can only be ordered in conjunction with Modules 661, 784-785)

r 792 Viral Antigen Detection (Waived)\$120

URINALYSIS / WAIVED / PPM

r 600	Cholestech LDX/CardioChek Package	.....	\$147
r 608	Hemecue Glucose/Hgb	.....	\$120
r 609	Waived/PPM Tests	.....	\$273
r 639	Complete Urinalysis Pkg.	.....	\$123
r 640	Urinalysis	.....	\$78
r 641	Clinical Microscopy	.....	\$144
r 642	Urinalysis/hCG	.....	\$81
r 791	Fecal Occult Blood Add-on	.....	\$24

(*791 can only be ordered in conjunction with Modules 639, 640 and 642)

CHEMISTRY

r 612	MultiChem 5	.....	\$237
r 616	MultiChem 10	.....	\$264
r 617	MultiChem 15	.....	\$291
r 618	MultiChem 20	.....	\$318
r 619	MultiChem 21+	.....	\$345
r 651	Fructosamine	.....	\$138
r 662	Neonatal Bilirubin	.....	\$180
r 663	Neonatal Bilirubin (2)	.....	\$108
r 664	Whole Blood Glucose (2)	.....	\$123
r 669	Whole Blood Glucose	.....	\$234
r 666	Clycohemoglobin, Affinion	.....	\$144
r 672	Glycohemoglobin	.....	\$144
r 685	Special Chemistry II	.....	\$150
r 686	Special Chemistry	.....	\$180
r 700	i-Stat [®] Chemistry	.....	\$222
r 721	i-Stat [®] Chemistry & Blood Gas Combo	.....	\$234
r 722	i-Stat [®] Chemistry (Waived)	.....	\$174
r 723	i-Stat [®] Blood Gases	.....	\$222
r 701	Troponin T	.....	\$204
r 702	Blood Gases	.....	\$312
r 703	Urine Drug Screen	.....	\$174
r 705	Urine Microalbumin & Creatinine	.....	\$120
r 708	Tumor Markers	.....	\$372
r 709	Blood Lead	.....	\$450
r 711	BNP	.....	\$240
r 740	D-Dimer	.....	\$132
r 712	Apolipoproteins	.....	\$129
r 714	Complete Cardiac Markers	.....	\$399
r 715	Basic Cardiac Markers	.....	\$195
r 716	Blood Lead (Waived)	.....	\$156
r 717	Abaxis Piccolo [®] (Waived)	.....	\$177
r 718	Abaxis Piccolo [®] (Non-Waived)	.....	\$252
r 719	Quantitative HCG (Serum)	.....	\$132
r 720	Cardiac Markers I (2)	.....	\$138

SUPPLIES / SUBSCRIPTIONS

r 503	COLA's Lab Facts	.....	\$75
r 504	COLA's Laboratory Director	.....	\$450
r 516	AAFP-PT Storage Binder	.....	\$15
r 725	POL Microscopy Atlas	.....	\$89.95 members / \$105 nonmembers

MODULE TOTAL \$ _____

ANNUAL REGISTRATION FEE

r ONLINE SUBSCRIBER \$ 75.00

r FAX SUBSCRIBER \$ 80.00
 (Note fees are nonrefundable)

TOTAL DUE \$ _____

Retain a photocopy of this form for your records.