



**COVID PCR Collection Requisition
Self-Referral - English**

Please allow 48-72 hours following collection for results

PLEASE PRINT LEGIBLY & COMPLETE ALL FIELDS

MISSING OR INCOMPLETE INFORMATION WILL PREVENT SCHEDULING

Patient's Name: Last		First	Middle	Birthdate	Gender
Address			City, State, Zip		
Phone		Alternate Phone		Email Address	
Billing: <input type="checkbox"/> Self-pay <input type="checkbox"/> Insurance			Patient is: <input type="checkbox"/> Child <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Other (specify)		
Insurance: Attach copy of card (both sides) OR complete the following					
Subscriber: Last, First, MI			Primary: carrier & policy number		
Employer			Secondary: carrier & policy number		
Location:	Blue Valley 6750 W 135th Street Overland Park, KS 66223 Northeast side behind building in parking lot (follow blue sign directions)	East 20300 E Valley View Pkwy Independence, MO 64057 Front of building in circle drive (follow blue sign directions)	North 501 NW Barry Rd Kansas City, MO 64155 South side behind building in parking lot (follow blue sign directions)	Broadway 3101 Broadway Street KC, MO 64111 PL2 in parking garage (enter from Broadway or 31st street)	