

### Sample Collection:

- Confirm identity of the patient by checking an acceptable photo ID
- Both cheeks firmly swabbed for 1 minute each side
- Break both swabs at the perforated mark and place the swab ends inside the white paper envelope.
- Patient's full name **and** DOB have been legibly written on white paper envelope
- Samples are hand collected/delivered -OR- Samples are returned in prepaid white mailer envelope.

### Requisition Form:

- Accession Number from the barcode on the collection envelope has been transcribed onto the Requisition Form
- Physician **and** Patient information has been filled out in its entirety
- Physician **and** Patient have signed the requisition form
- At least 3 ICD-10 codes have been provided, with the Primary Code in its proper box. Please do not strictly use the codes provided on the Requisition Form, these are just examples of acceptable diagnosis codes.
- Proper insurance documentation has been supplied. Double check numbers for accuracy.
- For Medicaid and Medicare:** A copy of the social security card is required for billing purposes.
- For Medicare:** A signed Advance Beneficiary Notice (ABN) must be filled out and signed by the patient. Must also be submitted with the requisition form.
- The Requisition Forms are electronically fillable. It is not necessary to print them.
- Requisition forms to be emailed to [info@dynamicdnalabs.com](mailto:info@dynamicdnalabs.com)