



4001 West 15th Street, 335
 Plano, Texas 75093
 office: 972.596.5225
 fax: 972.595.2684

DATE: _____

FACILITY: () QUEST ACCT # 47110 () LAB CORP ACCT # 42265693-1

OTHER: _____


PATIENT: _____ DOB: _____

BARIATRIC LAB TEST(S):
 (Postoperative Test)

CBC	Pre albumin
CMP	Ferritin
Folate (serum)	B1 (whole blood)= Thiamine
B12	Zinc
Iron (total) TIBC	Total vit D, 25-Hydroxy
% Saturation	
Vitamin A	

DX(S): Z98.84 BARIATRIC SURGERY STATUS,

PATIENT INSTRUCTIONS: Fasting prior to tests. You are encouraged to drink water.
 Please have test results faxed to 972-596-2684. Post Operative labs should be done at the 3,
 6 and 12 months and yearly there after.

PHYSICIAN: 

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 NPI# 1306009659