



LabCorp Patient Service Center Notification and Instruction Form

Your LabCorp account representative will designate a primary patient service center (PSC) during the initial account set-up process. When using a LabCorp PSC other than your primary PSC, please follow these instructions to support the stringent requirements for donor collections.

1. Contact the donor and determine which LabCorp PSC they will visit Monday–Friday before noon (do not visit on a Saturday). PSC locations can be found using the ‘Find a Lab’ tool on the LabCorp website at **www.LabCorp.com**.
2. Account must complete the **LabCorp Patient Service Center Notification and Instruction Form** and fax/email to ViroMed at **336-436-1812** or **Viomed_AcctMgmt@labcorp.com** at least **two full business days** in advance of PSC visit.
3. **Donor must go to the PSC indicated on the PSC Notification form faxed to ViroMed.** ViroMed requires at least **two full business days’ notice** if the donor would like to visit an alternate PSC.
4. Account must complete a Test Request Form (TRF) or electronic order.
 - a. **If the donor is being collected for FDA-regulated donor testing and additional laboratory testing, please provide the donor with two TRFs (ViroMed FDA TRF and LabCorp TRF).**
 - b. **Account must provide the completed TRF(s) and Anonymous Donor Verification Form (if applicable) to the PSC and donor. If using LabCorp Link (Beacon), the donor should receive the requisition number(s) or printed requisition(s).**
 - c. **Account may also send a copy along with PSC Notification Form for ViroMed to have on file**
5. Account must call donor prior to collection to verify receipt of TRF and Anonymous Donor Verification Form (if applicable) or notify donor that the appropriate forms are at the PSC and to review the donor collection instructions below.

Donor Collection Instructions

- Collection must occur at the previously specified PSC location. If the location needs to be changed, ViroMed must be notified at least **two full business days** in advance.
- Donor may use the ‘Schedule an Appointment’ tool at www.LabCorp.com to make an appointment at the designated PSC (Please make appointments before noon on Monday-Friday only). Walk-ins are served on a first-come, first-served basis, so donor should arrive at the PSC before noon to allow enough time for the collection and FedEx pick up.
- Donor must arrive at the PSC with the TRF(s) or electronic order number(s), identification and Anonymous Donor Verification Form (if applicable).
- Collection will include a blood draw and urine collection. **Do not urinate for a least one hour prior to specimen collection.**
- Upon arrival, indicate that you are there for a **“ViroMed Donor Collection.”**
- Call ViroMed at 800-582-0077 for assistance.

LabCorp Patient Service Center (PSC) Notification and Instruction Form

Account must complete all of the following fields and fax/email form to ViroMed at least two full business days (Monday-Friday) prior to donor visit to PSC.

Fax Number: 336-436-1812 / E-mail ViroMed: ViroMed_AcctMgmt@LabCorp.com

1. **Account Name:** _____
2. **LabCorp Account Number:** _____
3. **Account Contact:** _____
4. **Account Phone Number:** _____
5. **Account E-mail Address:** _____
6. **Donor Name/ID Number (EXACTLY as it appears on test request form):***

*Note: If this is an anonymous donor, complete the Anonymous Donor Verification Form on next page to note a donor's legal name for photo identification purposes. Include a copy of the Anonymous Donor Verification Form with the test request form(s).

7. **PSC Information:**
 - a. **Street Address:** _____
 - b. **City, State, Zip:** _____
 - c. **Phone Number:** _____
 - d. **Fax Number:** _____
8. **Date of PSC Visit (Monday-Friday only):** _____

LabCorp Patient Service Center (PSC) Anonymous Donor Verification Form

For donors assigned an anonymous donor name by the client office, the client office should perform a verification of legal name and valid photo ID. Complete the fields below and attach this completed form to the TRF.

If the donor patient is an anonymous donor, this form must be completed for verification that the person appearing for specimen collection has valid photo identification that matches with the expected anonymous Donor Name/ID Number. Information on this form is to be used for verifying photo identification only and will not be included on any laboratory specimen records.

Include a copy of this verification form with the test request form(s) that is provided to the PSC prior to collection.

Account Name: _____

LabCorp Account Number: _____

I am confirming that for purposes of photo identification during check-in at the LabCorp PSC appointment:

Donor Name/ID Number _____ is confirmed to be the same person as:

_____, _____
(Legal Last Name) (Legal First Name)

Account Authorized Signature

Date

Attention PSC Technicians

This information is for photo identification purposes ONLY and should NOT be used for any laboratory specimen records or specimen labeling.

Use the Donor Name/ID Number as indicated on the test request form for all laboratory specimen records and specimen labeling.