



Lab Web Portal

AR Lab Network

NOTICE

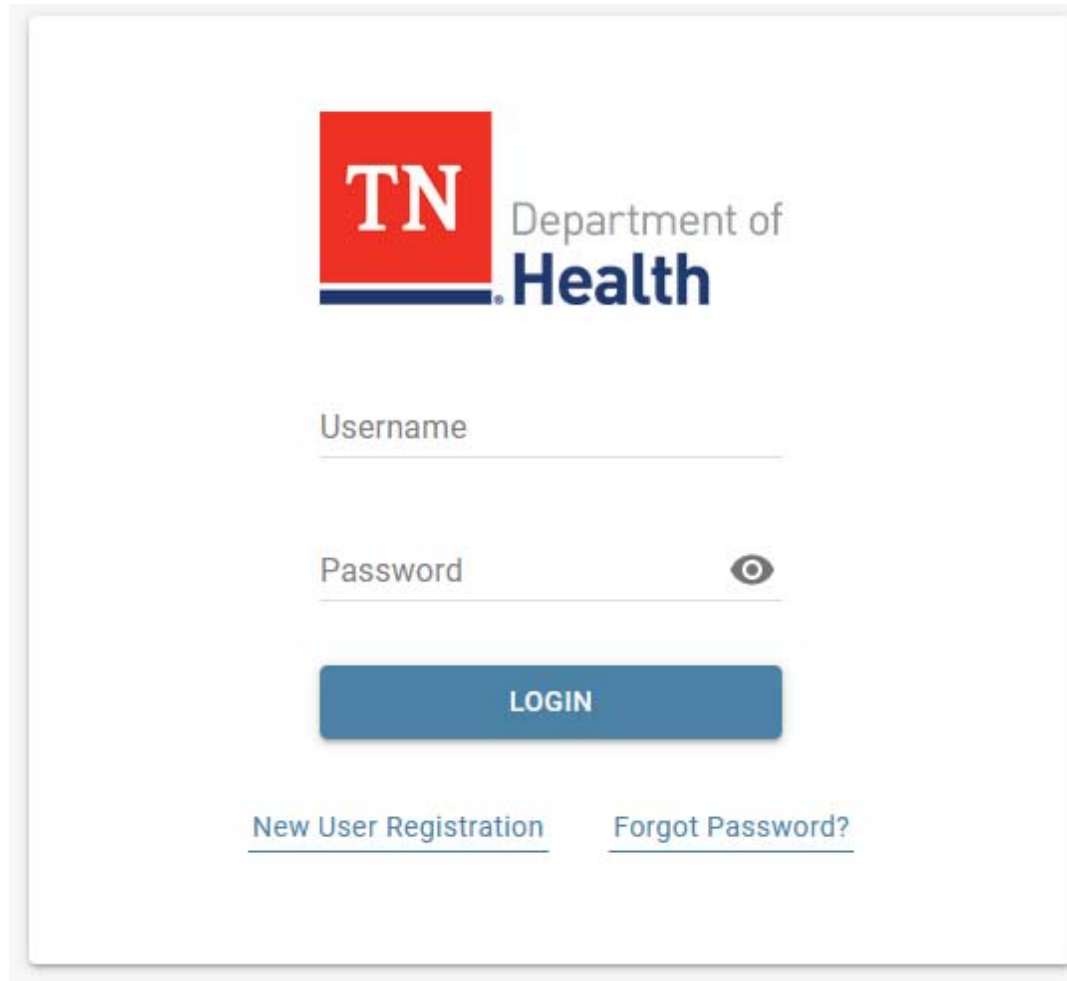
**NO PATIENT DATA WAS USED IN THIS
PRESENTATION.**

**ALL “PATIENT” INFORMATION HAS BEEN
FABRICATED FOR TRAINING PURPOSES.**



**Welcome to the
Lab Web Portal (LWP)**


Accessing the Lab Web Portal



The screenshot shows a login interface for the TN Department of Health. At the top is the logo, which consists of a red square with the white letters 'TN' and the text 'Department of Health' to its right. Below the logo are two input fields: 'Username' and 'Password'. The 'Password' field has a toggle icon (an eye) to its right. Below these fields is a blue button with the text 'LOGIN'. At the bottom of the form are two links: 'New User Registration' and 'Forgot Password?'. The entire form is enclosed in a light gray border.

TN Department of Health

Username

Password 

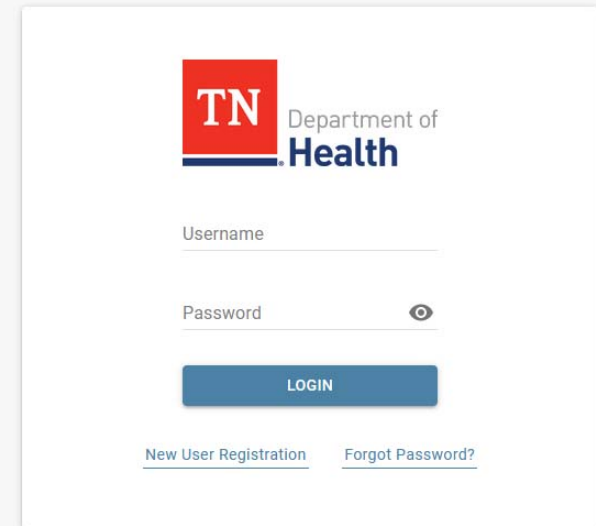
LOGIN

[New User Registration](#) [Forgot Password?](#)

<https://lwp-web.aimsplatform.com/tn2/#/auth/login>

Portal Login Page

- Login Existing Account
- New User Registration
- Reset Password
- Order Support
 - View Lab Contacts
 - Information on where to submit specimens
- Technical Support
 - Technical Support Contacts

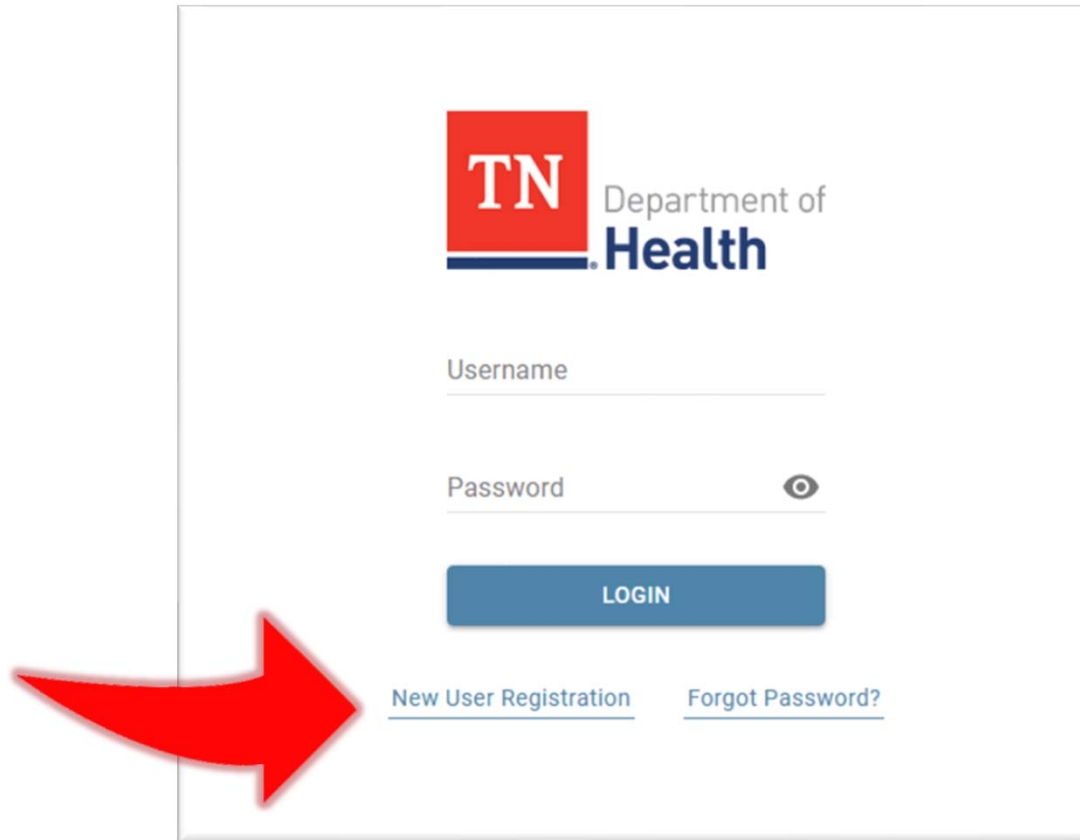


The screenshot shows the login interface for the TN Department of Health portal. At the top is the logo, which consists of a red square with 'TN' in white, followed by the text 'Department of Health' in blue. Below the logo are two input fields: 'Username' and 'Password'. The 'Password' field has a small eye icon to its right. A blue 'LOGIN' button is positioned below the password field. At the bottom of the form, there are two links: 'New User Registration' and 'Forgot Password?'. The entire form is set against a light gray background.

©2007 - 2020 iConnect Consulting, Inc. Order Support Technical Support 13 Oct 2020 19:07 8.2.0.1179

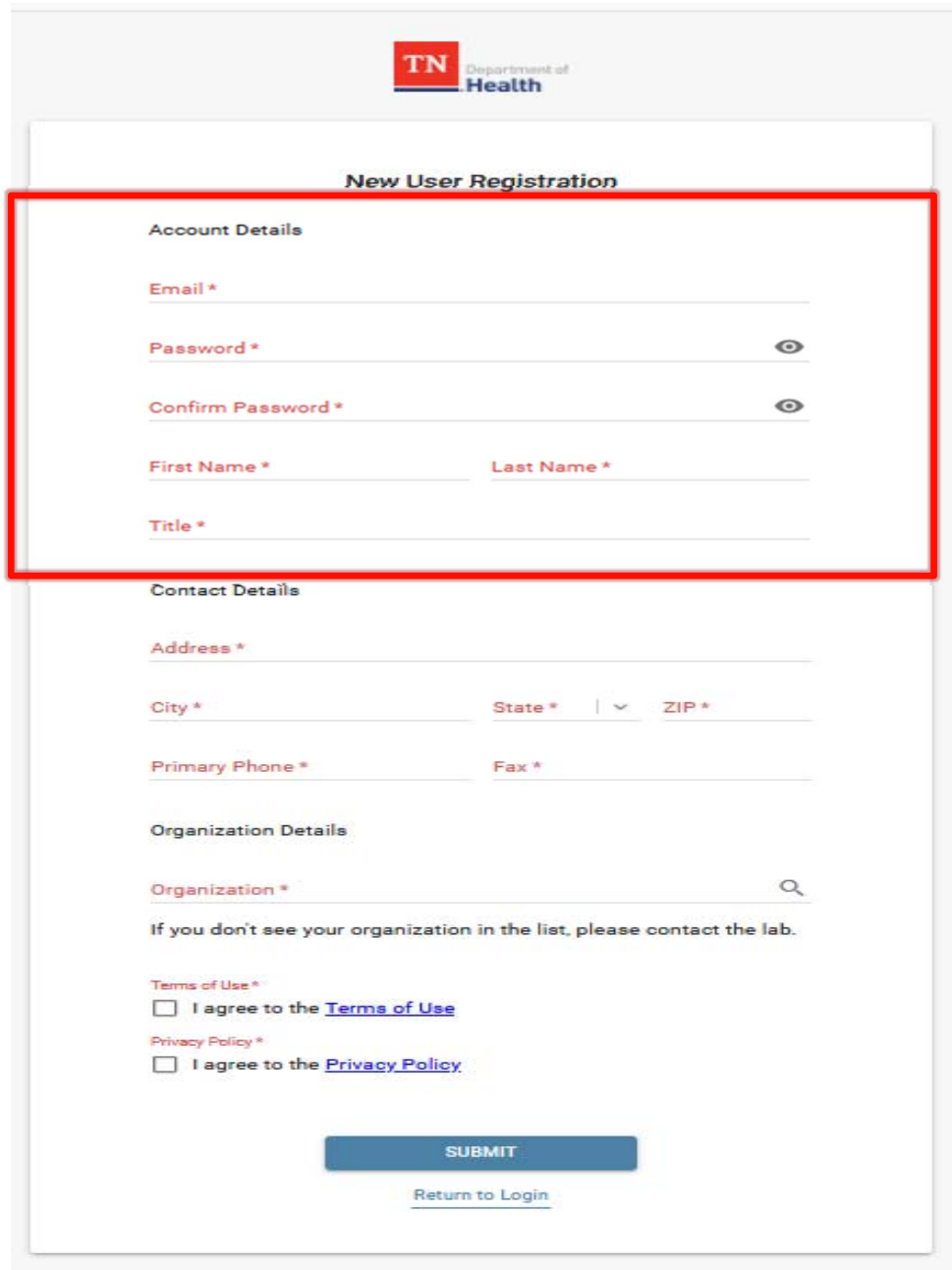
New User Registration

- Click “New User Registration”



The screenshot shows the login interface for the TN Department of Health. At the top is the logo, which consists of a red square with the white letters 'TN' and the text 'Department of Health' to its right. Below the logo are two input fields: 'Username' and 'Password'. The 'Password' field has a small eye icon to its right. Below these fields is a blue button labeled 'LOGIN'. At the bottom of the form are two links: 'New User Registration' and 'Forgot Password?'. A large red arrow points from the left towards the 'New User Registration' link.


New User Registration




The screenshot shows the 'New User Registration' form for the TN Department of Health. The form is divided into three main sections: 'Account Details', 'Contact Details', and 'Organization Details'. The 'Account Details' section is highlighted with a red rectangular box. It contains the following fields: 'Email *', 'Password *' (with a toggle icon), 'Confirm Password *' (with a toggle icon), 'First Name *', 'Last Name *', and 'Title *'. Below this, the 'Contact Details' section includes 'Address *', 'City *', 'State *' (a dropdown menu), 'ZIP *', 'Primary Phone *', and 'Fax *'. The 'Organization Details' section includes an 'Organization *' field with a search icon. At the bottom, there are checkboxes for 'Terms of Use *' and 'Privacy Policy *', each followed by a link to the respective document. A blue 'SUBMIT' button and a 'Return to Login' link are at the very bottom.

Account Details

Email *

Password * 


Confirm Password * 

First Name * Last Name *

Title *


Contact Details

Address *

City * State *  ZIP *

Primary Phone * Fax *

Organization Details

Organization * 

If you don't see your organization in the list, please contact the lab.

Terms of Use * ☐ I agree to the [Terms of Use](#)

Privacy Policy * ☐ I agree to the [Privacy Policy](#)

SUBMIT

[Return to Login](#)

Account Details

- Email address (username)
- Password
- Confirm Password
- Name (First and Last)
- Title


New User Registration


TN Department of Health

New User Registration

Account Details

Email *

Password * 

Confirm Password * 

First Name * Last Name *

Title *


Contact Details

Address *

City * State * | ZIP *

Primary Phone * Fax *

Organization Details

Organization * 

If you don't see your organization in the list, please contact the lab.

Terms of Use * ☐ I agree to the [Terms of Use](#)

Privacy Policy * ☐ I agree to the [Privacy Policy](#)

SUBMIT

[Return to Login](#)

Contact Details

- Facility Address
- Primary phone
- Fax number

New User Registration

TN Department of Health

New User Registration

Account Details

Email *

Password *

Confirm Password *

First Name * Last Name *

Title *

Contact Details

Address *

City * State * | v ZIP *

Primary Phone * Fax *

Organization Details

Organization *

If you don't see your organization in the list, please contact the lab.

☐ I agree to the [Terms of Use](#)

Privacy Policy *

☐ I agree to the [Privacy Policy](#)

SUBMIT

[Return to Login](#)

Organization Details

- Begin typing the name of your facility in the “Organization” field
- Facilities in the portal will be listed
 - Select your facility from the list
 - Multiple facilities?
 - Contact Technical Support

New User Registration

TN Department of Health

New User Registration

Account Details

Email *

Password *

Confirm Password *

First Name * Last Name *

Title *

Contact Details

Address *

City * State * ZIP *

Primary Phone * Fax *

Organization Details

Organization *

If you don't see your organization in the list, please contact the lab.

Terms of Use *

☐ I agree to the [Terms of Use](#)

Privacy Policy *

☐ I agree to the [Privacy Policy](#)

SUBMIT

[Return to Login](#)

Review “Term of Use” and “Privacy Policy”

- Check the boxes to agree
- Agreement is required to request access

New User Registration

TN Department of Health

New User Registration

Account Details

Email *

Password *

Confirm Password *

First Name * Last Name *

Title *

Contact Details

Address *

City * State * ZIP *

Primary Phone * Fax *

Organization Details

Organization *

If you don't see your organization in the list, please contact the lab.

Terms of Use *
☐ I agree to the [Terms of Use](#)

Privacy Policy *
☐ I agree to the [Privacy Policy](#)

SUBMIT

[Return to Login](#)

Click Submit to complete the registration process

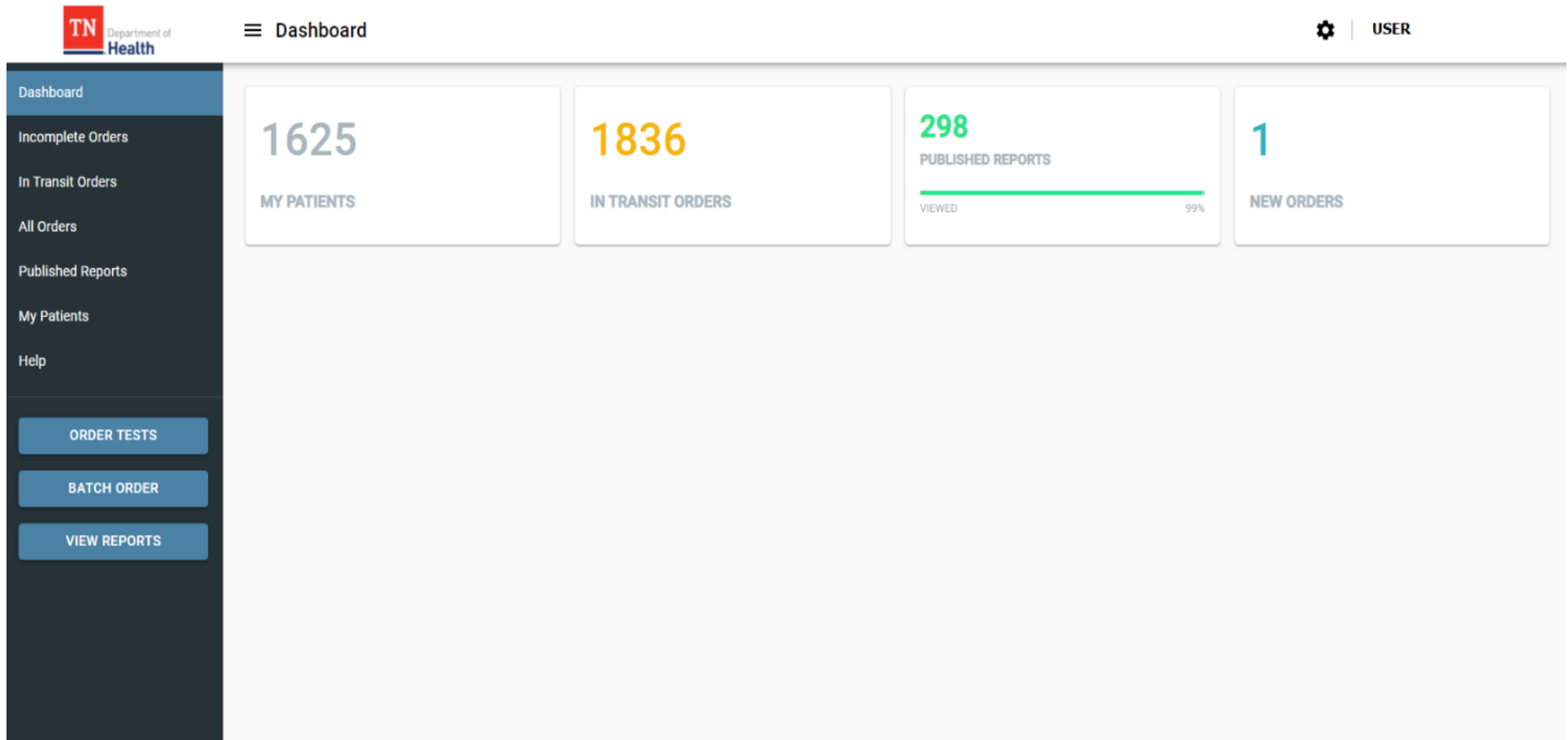
- New user request will be sent to the portal admin for approval
- All user requests will be verified with facility supervisory staff
- Users will be notified by email upon approval



Navigating the Lab Web Portal

Dashboard

- Landing page after log in
- Control center of the LWP



Dashboard -Tiles

- Displays counters and key performance indicators
 - Top Number = total number for user organization
 - Progress bar = viewed vs not viewed reports
- Click on the tile to open relevant data grids

The screenshot shows the TN Department of Health dashboard. The top navigation bar includes the TN logo, 'Department of Health', a hamburger menu, 'Dashboard', a gear icon, and 'USER NAME'. The left sidebar lists navigation options: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, Help, ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The main content area displays four tiles: 'MY PATIENTS' with a value of 1627, 'IN TRANSIT ORDERS' with a value of 1839, 'PUBLISHED REPORTS' with a value of 298 and a progress bar at 100%, and 'NEW ORDERS' with a value of 1. A red box highlights these tiles, and a red arrow points to a gear icon in the top right corner of the tiles area, with the text 'Editable: Click on the gear icon to edit'.

Editable:
Click on the
gear icon
to edit

User Drop-Down Menu - Profile

The image shows two screenshots from the TN Department of Health system. The top screenshot is the 'Dashboard' page, which features a sidebar with navigation links (Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, Help) and a main area with four summary cards: 'MY PATIENTS' (1627), 'IN TRANSIT ORDERS' (1839), 'PUBLISHED REPORTS' (298), and 'NEW ORDERS' (1). A 'USER NAME' dropdown menu is visible in the top right corner, with a red arrow pointing to it. The bottom screenshot is the 'Profile' page, which has a sidebar with the same navigation links and a main area with three tabs: 'PERSONAL INFO' (highlighted with a red box), 'MANAGE NOTIFICATIONS', and 'CHANGE PASSWORD'. The 'PERSONAL INFO' tab displays a form with fields for First Name, Last Name, Title, Email Address, Address, City, State, ZIP, Primary Phone, and Primary Fax. Below these fields is a section for 'Organizations' with a list of departments. At the bottom right of the profile page are 'CANCEL' and 'SAVE' buttons.

Dashboard Summary:

Category	Count
MY PATIENTS	1627
IN TRANSIT ORDERS	1839
PUBLISHED REPORTS	298
NEW ORDERS	1

Profile Page - PERSONAL INFO Tab:

Field	Value
First Name	Stephanie
Last Name	Poindexter
Title	Training Coordinator
Email Address	stephanie.poindexter@tn.gov
Address	630 Hart Lane
City	Nashville
State	TN
ZIP	37216
Primary Phone	6152626338
Primary Fax	6152626393
Role	LWP_Physician

Organizations:

- Tennessee Dept. of Health Division of Lab Services (tdhls.nas)
- Maury County Health Department (06001)
- Williamson County Health Department (09403)
- Williamson County Health Department (09401)
- Wilson County Health Department (09501)

Buttons: ORDER TESTS, BATCH ORDER, VIEW REPORTS, CANCEL, SAVE

- Click on your username to access the drop-down menu to edit your personal information
- Click the “Change Password” tab to change your password

User Drop-Down Menu – Manage Notifications

The image displays two screenshots of the TN Department of Health user interface. The top screenshot shows the 'Dashboard' with various statistics and a user profile dropdown menu in the top right corner. The bottom screenshot shows the 'Profile' page with the 'MANAGE NOTIFICATIONS' option highlighted in the top navigation bar and the 'ADD NOTIFICATION' button in the bottom right corner.

Top Screenshot: Dashboard

- Logo: TN Department of Health
- Page Title: Dashboard
- Statistics:
 - 1627 MY PATIENTS
 - 1839 IN TRANSIT ORDERS
 - 298 PUBLISHED REPORTS
 - 1 NEW ORDERS
- User Profile Dropdown Menu:
 - Profile
 - Batch order
 - News
 - Help
 - Log out

Bottom Screenshot: Profile

- Page Title: Profile
- User Name: USER NAME
- Navigation Bar:
 - PERSONAL INFO
 - MANAGE NOTIFICATIONS**
 - CHANGE PASSWORD
- Table Headers:
 - #
 - Event
 - Type
 - Frequency
 - Enabled
 - Delete
- Buttons:
 - ORDER TESTS
 - BATCH ORDER
 - VIEW REPORTS
 - ADD NOTIFICATION

Add personal preferences for Portal notification events by clicking “Add Notification”

User Drop-Down Menu – Manage Notifications

The screenshot shows the TN Department of Health user interface. At the top, there's a dashboard with statistics: 1627 MY PATIENTS, 1839 IN TRANSIT ORDERS, 298 PUBLISHED REPORTS, and 1 NEW ORDERS. A red arrow points from the top right user profile menu to the 'Manage Notifications' tab. The 'Manage Notifications' tab is active, showing a table with one notification: 'New Report is available' via Email, set to 'Immediately' frequency, and 'no' enabled status. A red box highlights the 'Enabled' checkbox, and another red box highlights the 'SAVE' button. The 'ADD NOTIFICATION' button is also visible.

#	Event	Type	Frequency	Enabled	Delete
1	New Report is available	Email	Immediately	no	

☒ Enabled

ADD NOTIFICATION

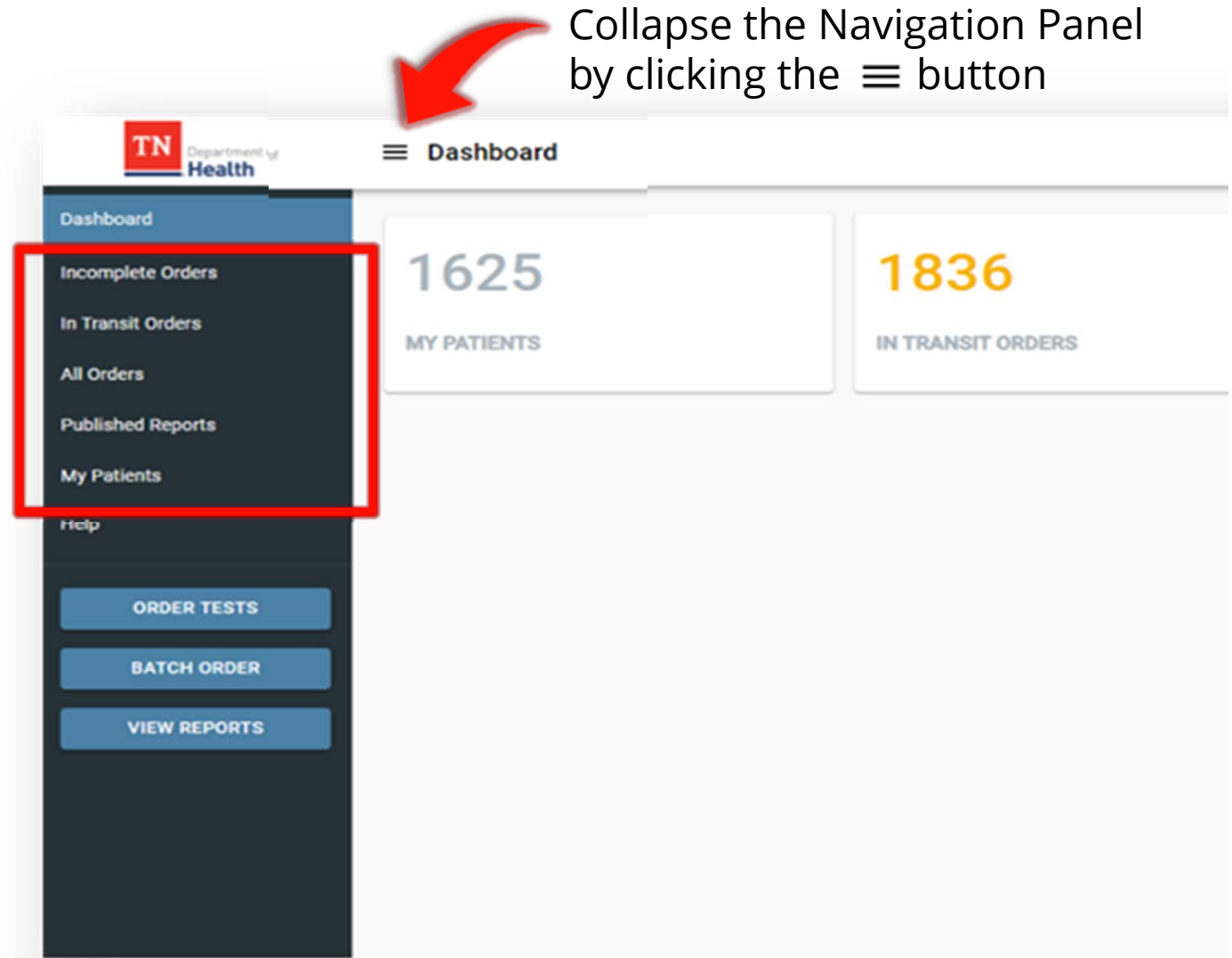
SAVE

- Click “Enabled” to be notified when a new report is available
 - Choose to be notified immediately or once per day
 - Save the settings
- To delete a notification, click the icon next to the notification

Dashboard - Navigation Panel

Data Grids

- Incomplete Orders
- In Transit Orders
- All Orders
- Published Reports
- My Patients

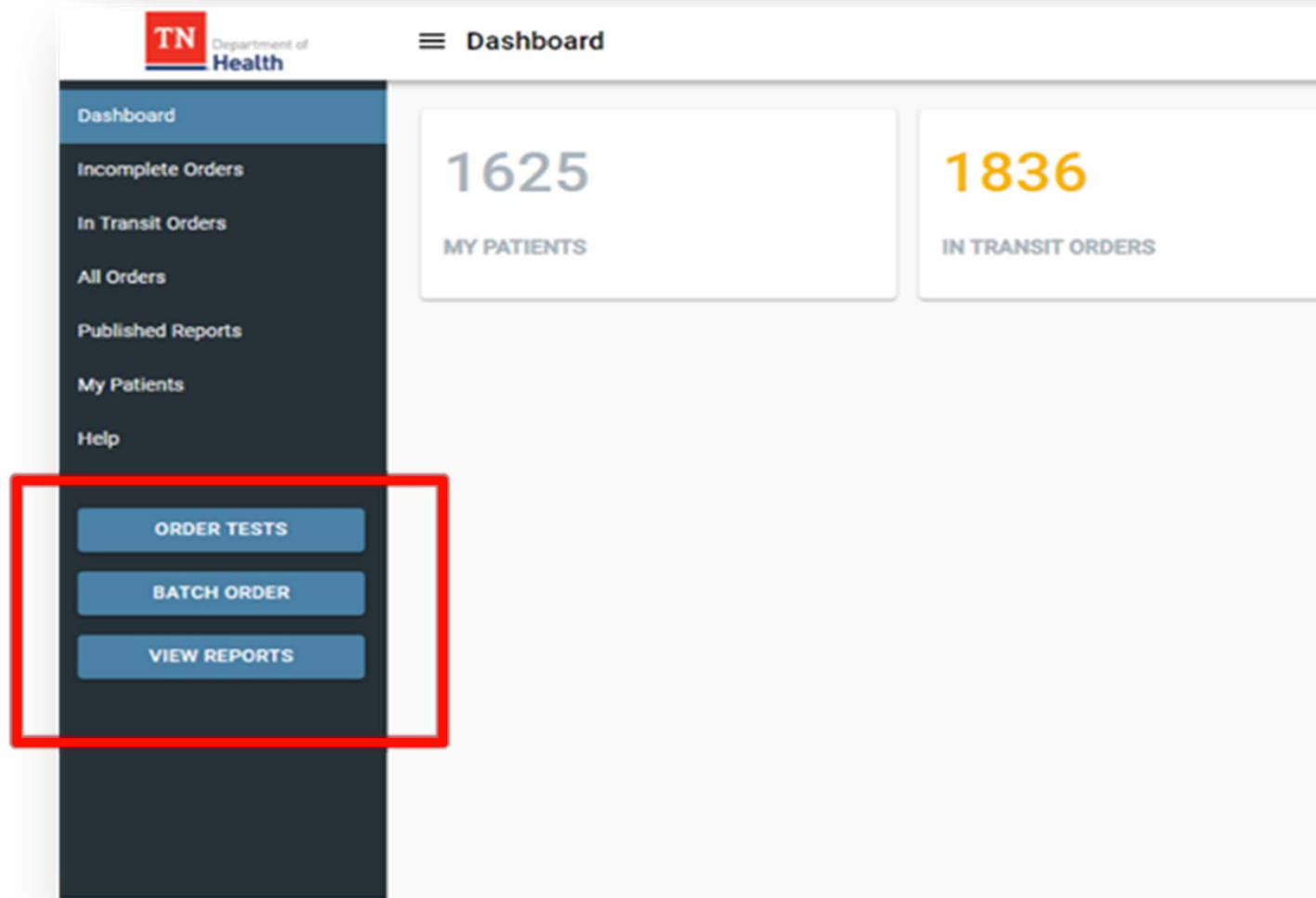


NOTE: Not all users will have access to all options

Dashboard – Navigation Panel

Call-To-Action Buttons

- Order Tests
- Batch Orders
- View Reports



NOTE: Not all users will have access to all options

Help Portal



≡ Help

USER NAME

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

Resources

[CONTACT US](#)

Frequently Asked Questions

Quick Search

How do I submit a test order?



How do I track my test order?



How to view published lab report?



How to view submitted order?



How do I setup to receive emails when I have new reports published?



ORDER TESTS

BATCH ORDER

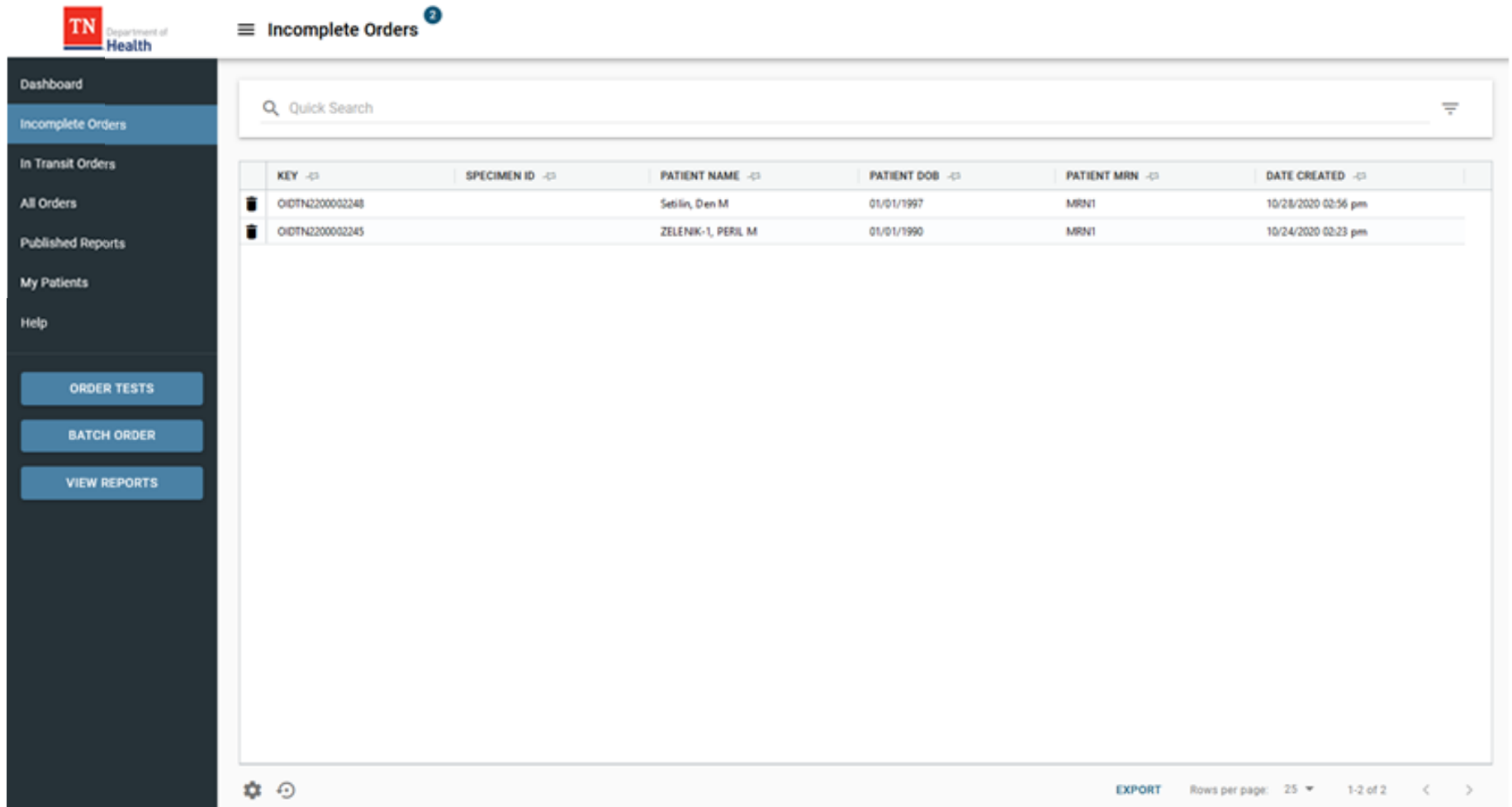
VIEW REPORTS



Using the Data Grids

Incomplete Orders

- Lists orders that have been started but not yet submitted




The screenshot displays the 'Incomplete Orders' page in the TN Department of Health system. The sidebar on the left contains a navigation menu with the following items: Dashboard, Incomplete Orders (highlighted with a red arrow), In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below the menu are three buttons: ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The main content area features a 'Quick Search' bar and a table of incomplete orders. The table has six columns: KEY, SPECIMEN ID, PATIENT NAME, PATIENT DOB, PATIENT MRN, and DATE CREATED. Two rows of data are visible. At the bottom of the page, there is an 'EXPORT' button, a 'Rows per page' dropdown set to 25, and a pagination indicator showing '1-2 of 2'.


KEY	SPECIMEN ID	PATIENT NAME	PATIENT DOB	PATIENT MRN	DATE CREATED
OIDT142200002248		Setlin, Den M	01/01/1997	MRN1	10/28/2020 02:56 pm
OIDT142200002245		ZELENIK-1, PERIL M	01/01/1990	MRN1	10/24/2020 02:23 pm


- Toggle the Column Settings: Key (Online Order ID), Patient name, Patient DOB, Patient MRN, and/or Date Created

In Transit

- Lists orders that have been submitted, but not yet received by the lab





 In Transit Orders 1839

USER NAME

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help



ORDER TESTS

BATCH ORDER

VIEW REPORTS

Quick Search

	PORTAL ID	PATIENT NAME	PATIENT DOB	PATIENT MRN	DATE COLLECTED	DATE SUBMITTED	SPECIMEN TYPE	FACILITY NAME	BATCH KEY	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002251	AARALL, EMARINTE	01/01/1970		11/05/2020 08:25 am	11/05/2020 08:26 am	Nasopharyngeal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002250	GRAHAM, LYNN	05/26/1967	ABCD1234	11/01/2020 10:45 am	11/02/2020 11:26 am	Nasopharyngeal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002249	TEST, TEST	01/01/1991		10/29/2020 12:30 pm	10/29/2020 01:13 pm	Nasopharyngeal and oropharyngeal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002241	Setilin, Den M	01/01/1997	MRN1	10/23/2020 03:21 pm	10/28/2020 02:49 pm	Whole Blood	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002247	LEPIK-1, FN M	01/01/1990	MRN1	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002246	LEPIK-2, FN M	01/01/1990	MRN1	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002240	Setilin, Den M	01/01/1997	MRN1	10/23/2020 03:21 pm	10/23/2020 03:25 pm	Whole Blood	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002239	TEST, COVID A	01/01/2010	987654321	10/19/2020 09:17 am	10/19/2020 11:53 am	Nasopharyngeal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002238	TEST-TN-LN, FN M	06/09/1998	100	09/30/2020 12:45 pm	09/30/2020 12:49 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002237	AARALL, ARIU	01/01/1970		09/29/2020 05:14 am	09/30/2020 12:19 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002236	Test-An, Anna M	04/09/1995	1	09/30/2020 02:25 am	09/30/2020 02:28 am	Serum	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002234	CALLEN, COBERT	09/25/2020		09/25/2020 05:12 pm	09/25/2020 05:12 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000043	TEST-LIN, LEN M	03/08/1995	MRN-100	09/15/2020 11:50 am	09/25/2020 05:10 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200001796	TEST-TN-LN, FN M	06/09/1998	100	09/23/2020 07:14 am	09/25/2020 05:09 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002233	AARALL, ARIU	01/01/1970		09/23/2020 03:02 pm	09/25/2020 03:06 pm	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002229	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:42 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002228	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002227	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002226	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002225	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002224	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002223	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002222	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002221	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200002220	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Nasal swab	Tennessee Dept. of Health Division of Lab Services

EXPORT Rows per page: 25 1-25 of 1839

All Orders

- All orders submitted by user organization, regardless of status

TN Department of Health

All Orders 2244

USER NAME

Quick Search

				PORTAL ID	SPECIMEN ID	PATIENT NAME	PATIENT DOB	PATIENT MRN	DATE COLLECTED	DATE SUBMITTED	FACILITY NAME	SPECIMEN
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002251	N20003099-01	AARALL, EMARINTE	01/01/1970		11/05/2020 08:25 am	11/05/2020 08:26 am	Tennessee Dept. of Health Division of Lab Services	Nasop
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002250	N20003086-01	GRAHAM, LYNN	05/26/1967	ABCD 1234	11/01/2020 10:45 am	11/02/2020 11:26 am	Tennessee Dept. of Health Division of Lab Services	Nasop
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002249	K20V003083-01	TEST, TEST	01/01/1991		10/29/2020 12:30 pm	10/29/2020 01:13 pm	Tennessee Dept. of Health Division of Lab Services	Nasop
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002247	N20003070-01	LEPIK-1, FN M	01/01/1990	MRN1	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002246	N20003069-01	LEPIK-2, FN M	01/01/1990	MRN1	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002244	K20V003068-01	ZELENIK-1, PERIL M	01/01/1990	MRN1	10/24/2020 02:20 pm	10/24/2020 02:23 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002243	K20V003066-01	ZELENIK-1, PERIL M	01/01/1990	MRN1	10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002242	K20V003065-01	ZELENIK-1, PERIL M	01/01/1990	MRN1	10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002241		Setilin, Den M	01/01/1997	MRN1	10/23/2020 03:21 pm	10/28/2020 02:49 pm	Tennessee Dept. of Health Division of Lab Services	Whole
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002240		Setilin, Den M	01/01/1997	MRN1	10/23/2020 03:21 pm	10/23/2020 03:25 pm	Tennessee Dept. of Health Division of Lab Services	Whole
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002239	N20003029-01	TEST, COVID A	01/01/2010	987654321	10/19/2020 09:17 am	10/19/2020 11:53 am	Tennessee Dept. of Health Division of Lab Services	Nasop
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002238	K20V003000-01	TEST-TN-LN, FN M	06/09/1998	100	09/30/2020 12:45 pm	09/30/2020 12:49 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002237	K20V002999-01	AARALL, ARIIL	01/01/1970		09/29/2020 05:14 am	09/30/2020 12:19 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002236		Test-An, Anna M	04/09/1995	1	09/30/2020 02:25 am	09/30/2020 02:28 am	Tennessee Dept. of Health Division of Lab Services	Serum
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002235		Test-An, Anna M	04/09/1995	1	09/30/2020 02:06 am	09/30/2020 02:28 am	Tennessee Dept. of Health Division of Lab Services	Plasm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002234	N20002998-01	CALLEN, COBERT	09/25/2020		09/25/2020 05:12 pm	09/25/2020 05:12 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002233	K20V002983-01	AARALL, ARIIL	01/01/1970		09/23/2020 03:02 pm	09/25/2020 03:06 pm	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002232	N20002982-01	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002231	N20002981-01	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002230	N20002980-01	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002229	N20002979-01	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	QIDTN2200002228	N20002978-01	TEST, RSA	01/01/1970		09/15/2020 03:46 pm	09/25/2020 09:41 am	Tennessee Dept. of Health Division of Lab Services	Nasal

EXPORT Rows per page: 25 1-25 of 2244

Published Reports

- Shows all orders with published reports per user organization.
 - Orders with unread (not viewed) reports are shown in **bold**

TN Department of Health

Published Reports ²⁹⁸

USER NAME


Quick Search

		PORTAL ID	SPECIMEN ID	LIMS ACCESSION ID	PATIENT NAME	PATIENT DOB	FACILITY NAME	PATIENT MRN	DATE COLLECTED	DATE RECEIVED
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000389	N20001136-01	N20001136	ALAR, DENNI	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000388	N20001135-01	N20001135	ALANE, DAYMI	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000387	N20001134-01	N20001134	AITESE, DAVEYNI	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000386	N20001133-01	N20001133	AGRAE, DAUS	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000385	N20001132-01	N20001132	ADJUS, DASON	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000384	N20001131-01	N20001131	ADERIEL, DARRIL	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000383	N20001130-01	N20001130	ADDIN, DARIT	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000382	N20001129-01	N20001129	ADARE, DARIC	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000381	N20001128-01	N20001128	ADARI, DARA	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000380	N20001127-01	N20001127	ADALI, DANUIS	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 11:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000369	N20001116-01	N20001116	FANAU, AVALA	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000368	N20001115-01	N20001115	FANA, AUSERI	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000367	N20001114-01	N20001114	FAMIAL, AURIN	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000366	N20001113-01	N20001113	FAMELA, ASONIRI	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000365	N20001112-01	N20001112	FALAL, ARUZ	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000364	N20001111-01	N20001111	FALANI, ASELA	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000363	N20001110-01	N20001110	FACAN, ARRA	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000362	N20001109-01	N20001109	BYNTA, AROSAR	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000361	N20001108-01	N20001108	BUEN, ARON	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000360	N20001107-01	N20001107	BRIR, FARAR	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000321	N20001068-01	N20001068	ALISA, BAZAR	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am
<input type="checkbox"/>	<input checked="" type="checkbox"/>	QIDTN2200000320	N20001067-01	N20001067	ALINA, BAYNAR	01/01/1970	Tennessee Dept. of Health Division of Lab Services		09/15/2020 03:46 pm	09/21/2020 08:52 am

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My Patients

- Shows your patients' list



Patients

USER NAME


Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

Quick Search


	LAST NAME	FIRST NAME	DATE OF BIRTH	FACILITY NAME	ADDRESS	CITY	STATE	ZIP CODE
<input type="checkbox"/>	AARALL	ARILI	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	AARALL	BALT	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	AARALL	BALT	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	AARALL	CADRYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	AARALL	EMARINTE	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	AARALL	EMARINTE	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	AARALL	EMARINTE	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	ARILYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	BALYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	BALYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	CAIL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	EMEDEA	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	EMEDEA	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ABIALA	EMEDEA	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	ALDAS	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	BANDAN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	BANDAN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	CALARI	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	EMINIAL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	EMINIAL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACANOS	EMINIAL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040
<input type="checkbox"/>	ACARNAR	AROSAR	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville	TN	37040

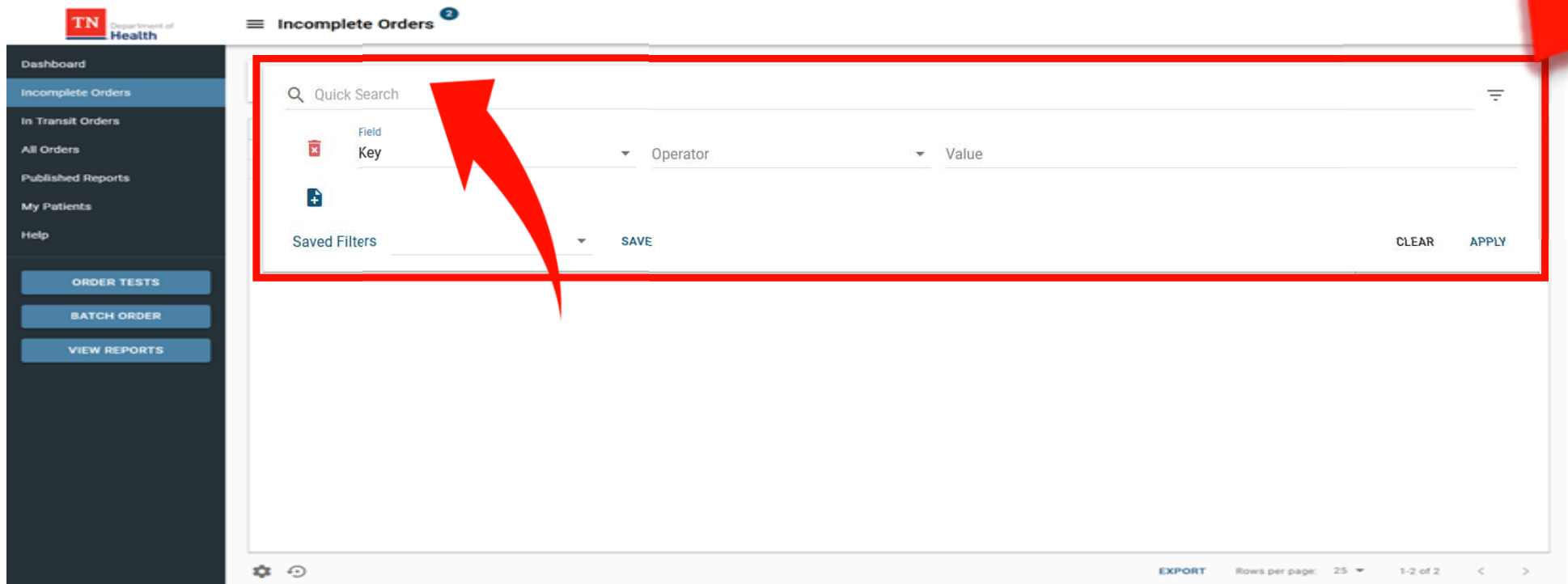
EXPORT

Rows per page: 25

1-25 of 1627

Dashboard - Quick Search

- Click the  button to open filter panel to add additional/advanced search options
 - Date Created, Key (Online Order ID), Patient Name, Patient DOB, Patient MRN, Specimen ID
 - Available for the different data grids



The screenshot shows the 'Incomplete Orders' dashboard with a sidebar on the left containing links to Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. The main content area features a 'Quick Search' filter panel. This panel has a search bar at the top right. Below it is a table with columns 'Field', 'Operator', and 'Value'. The 'Field' column has a dropdown menu currently set to 'Key'. At the bottom of the panel, there is a 'Saved Filters' dropdown, a 'SAVE' button, and 'CLEAR' and 'APPLY' buttons on the right. A red arrow points to the 'Field' dropdown, and another red arrow points to the 'SAVE' button. A large red arrow on the right side of the image points towards the filter panel.

- Use the **SAVE** button to save filters for repeated searches

Data Grid Navigation

- Click on the column header to sort the data grid
 - Hold shift and click headers to sort by multiple columns

The screenshot displays the 'Incomplete Orders' section of the TN Department of Health system. A sidebar on the left contains navigation links: Dashboard, Incomplete Orders (selected), In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are buttons for ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The main area features a data grid with columns: KEY, SPECIMEN ID, PATIENT NAME, PATIENT DOB, PATIENT MRN, and DATE CREATED. Two rows of data are visible. Annotations with red arrows point to various UI elements: 'Quick Search' points to the search bar at the top right; 'Refresh Settings' points to the gear icon at the bottom left; 'Toggle Column Settings' points to the column selection icon at the bottom left; and 'Export List' points to the 'EXPORT' button at the bottom right. The bottom right corner of the grid shows 'Rows per page: 25' and '1-2 of 2'.

KEY	SPECIMEN ID	PATIENT NAME	PATIENT DOB	PATIENT MRN	DATE CREATED
O1DTN200002248		Setlin, Den M	01/01/1997	MRN1	10/28/2020 02:56 pm
O1DTN200002245		ZELENIK-1, PERIL M	01/01/1990	MRN1	10/24/2020 02:23 pm

Quick Search

Refresh Settings

Toggle Column Settings

EXPORT Rows per page: 25 1-2 of 2

Export List

Data Grid Navigation

Number of items that need attention

The screenshot shows the 'Incomplete Orders' page in the TN Department of Health system. A red arrow points to a blue badge with the number '2' next to the 'Incomplete Orders' header, indicating the number of items needing attention. The page features a sidebar with navigation links: Dashboard, Incomplete Orders (selected), In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are buttons for ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The main content area has a 'Quick Search' bar and a table with two columns: KEY and SPECIMEN ID. The table contains two rows of data. At the bottom, there is an 'EXPORT' button, a 'Rows per page' dropdown set to 25, and a page indicator '1-2 of 2' with navigation arrows. A red arrow points to the 'Rows per page' dropdown, and another red arrow points to the 'Page Navigation' area.

KEY	SPECIMEN ID	PATIENT NAME	PATIENT DOB	PATIENT MRN	DATE CREATED
OIDTN200002248		Setlin, Den M	01/01/1997	MRN1	10/28/2020 02:56 pm
OIDTN200002245		ZELENIK-1, PERIL M	01/01/1990	MRN1	10/24/2020 02:23 pm


Rows per
Page

Page
Navigation

Page
Number

Data Grid Navigation

- Click on  icon to pin a column the left side of the grid



Department of Health

2244

≡ All Orders

Quick Search

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

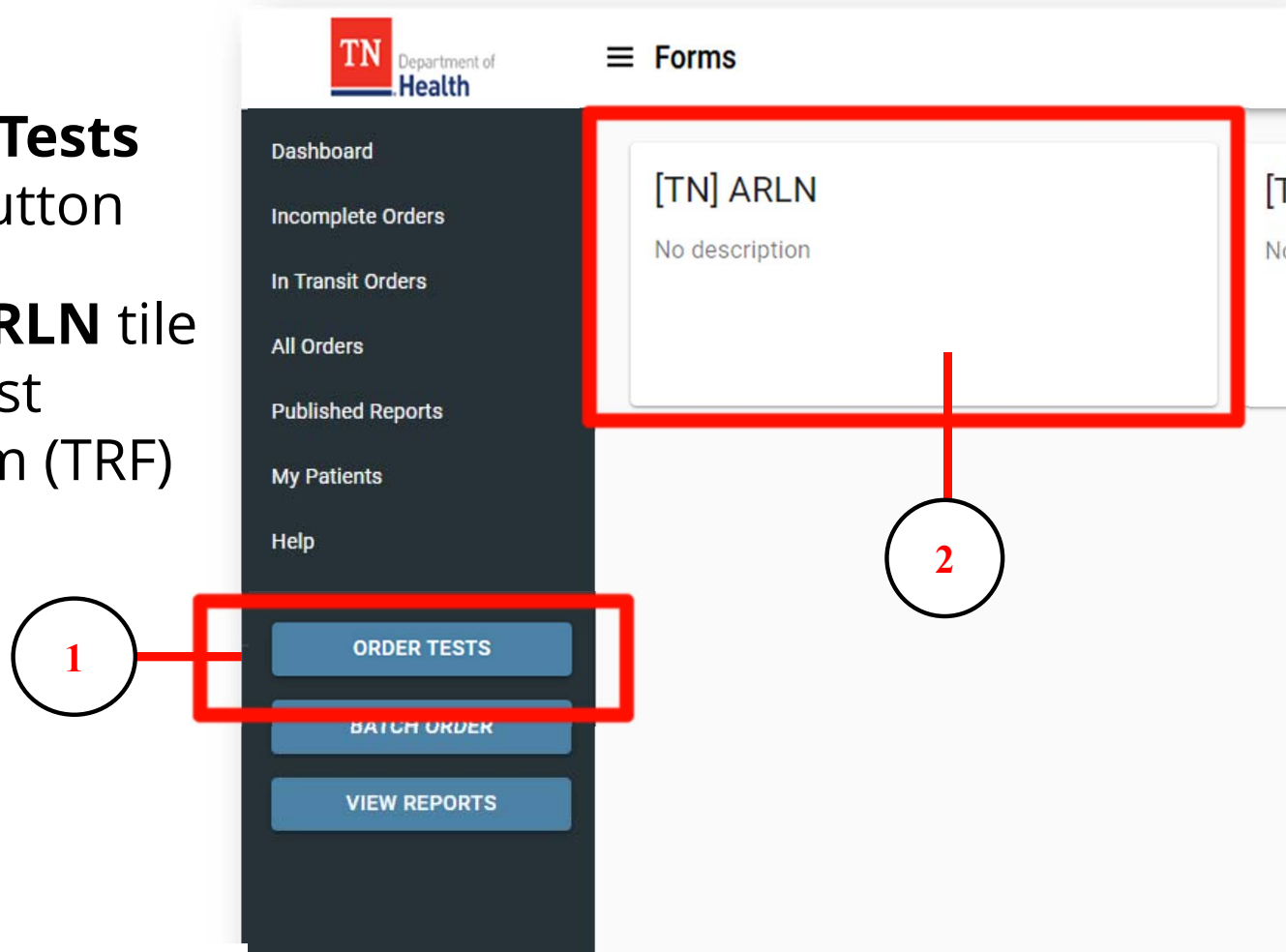
				PORTAL ID	SPECIMEN ID	PATIENT NAME	PA					SPECIMEN ID	PORTAL ID	PATIENT NAME
<input type="checkbox"/>				OIDTN2200002236		Test-An, Anna M	04					N20V000134-01	OIDTN2200000034	NCOV19_TEST_DG_05 Z
<input type="checkbox"/>				OIDTN2200002241		Setilijn, Den M	01					N20V000133-01	OIDTN2200000033	NCOV19_TEST_DG_04 Z
<input type="checkbox"/>				OIDTN2200002240		Setilijn, Den M	01					N20V000132-01	OIDTN2200000032	NCOV19_TEST_DG_03 Z
<input type="checkbox"/>				OIDTN2200001795		Test-TN-LN, FN M	06					N20V000131-01	OIDTN2200000031	NCOV19_TEST_DG_02 Z
<input type="checkbox"/>				OIDTN2200002235		Test-An, Anna M	04					N20V000130-01	OIDTN2200000030	NCOV19_TEST_DG_01 Z
<input type="checkbox"/>				OIDTN2200000042	K20V000770-01	TEST-LIN, LEN M	03					N20V000129-01	OIDTN2200000029	OMG_WHATEVER Z
<input type="checkbox"/>				OIDTN2200000038	K20V000777-01	ROWILLIAMS, CHLOE Z	10					N20V000123-01	OIDTN2200000028	NCOV-19_TEST_028 Z
<input type="checkbox"/>				OIDTN2200001797	K20V002542-01	TEST-TN-B-1, FN M	02					N20V000122-01	OIDTN2200000027	NCOV-19_TEST_027 Z
<input type="checkbox"/>				OIDTN2200002076	K20V002823-01	TEST-TN-B-1, FN M	02					N20V000121-01	OIDTN2200000026	NCOV-19_TEST_026 Z
<input type="checkbox"/>				OIDTN2200002077	K20V002824-01	TEST-TN-B-2, FN M	02					N20V000120-01	OIDTN2200000025	NCOV-19_TEST_025 Z
<input type="checkbox"/>				OIDTN2200002078	K20V002825-01	TEST-TN-B-3, FN M	02					N20V000119-01	OIDTN2200000024	NCOV19_TEST_024 Z
<input type="checkbox"/>				OIDTN2200002079	K20V002826-01	TEST-TN-B-4, FN M	02					N20V000118-01	OIDTN2200000023	NCOV19_TEST_023 Z
<input type="checkbox"/>				OIDTN2200002080	K20V002827-01	TEST-TN-B-5, FN M	02					N20V000117-01	OIDTN2200000022	NCOV19_TEST_022 Z
<input type="checkbox"/>				OIDTN2200002081	K20V002828-01	TEST-TN-B-1, FN M	02					N20V000116-01	OIDTN2200000021	NCOV19_TEST_021 Z
<input type="checkbox"/>				OIDTN2200002082	K20V002829-01	TEST-TN-B-2, FN M	02					N20V000115-01	OIDTN2200000020	NCOV19_TEST_020 Z
<input type="checkbox"/>				OIDTN2200002083	K20V002830-01	TEST-TN-B-3, FN M	02					N20V000110-01	OIDTN2200000019	NCOV19_TEST_014 Z
<input type="checkbox"/>				OIDTN2200002084	K20V002831-01	TEST-TN-B-4, FN M	02					N20V000109-01	OIDTN2200000018	NCOV19_TEST_



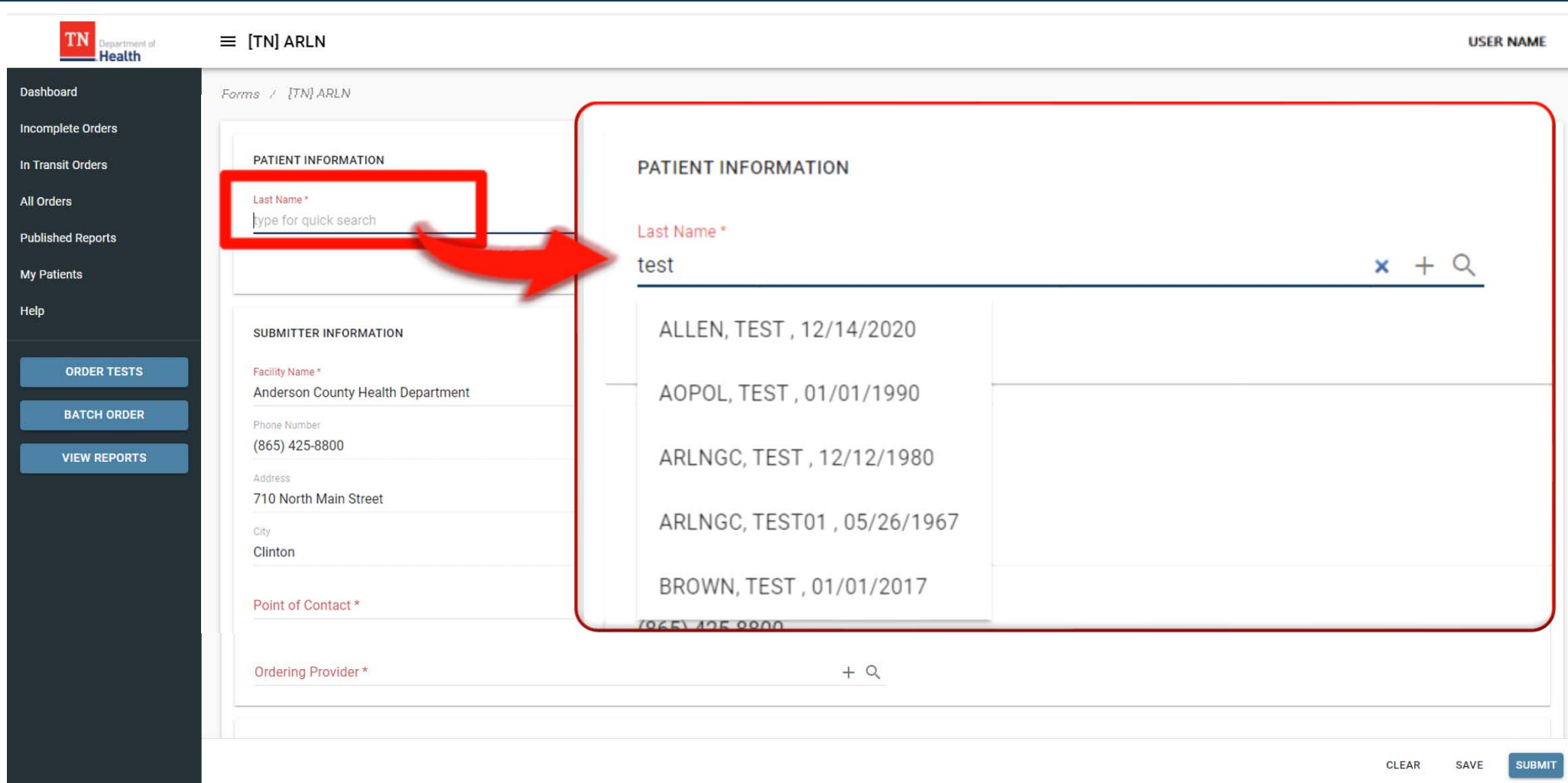
Ordering Tests

Ordering Tests

1. Click the **Order Tests** Call-to-Action button
2. Click the **[TN] ARLN** tile to access the Test Requisition Form (TRF)



Test Requisition Form (TRF) – Patient Information



TN Department of Health

[TN] ARLN

USER NAME

Forms / [TN] ARLN

PATIENT INFORMATION

Last Name *
type for quick search

SUBMITTER INFORMATION

Facility Name *
Anderson County Health Department

Phone Number
(865) 425-8800

Address
710 North Main Street

City
Clinton

Point of Contact *

Ordering Provider *

PATIENT INFORMATION

Last Name *
test

ALLEN, TEST , 12/14/2020

AOPOL, TEST , 01/01/1990

ARLNGC, TEST , 12/12/1980

ARLNGC, TEST01 , 05/26/1967

BROWN, TEST , 01/01/2017

(865) 425-8800

CLEAR SAVE SUBMIT

- Type the patient's last name in the **Last Name** field
 - Patients with that last name will populate in a drop-down menu
 - Confirm the patient's date of birth with your patient's information

Test Requisition Form (TRF) – Patient Information

TN Department of Health

[TN] ARLN

USER NAME

Forms / [TN] ARLN

PATIENT INFORMATION

Last Name *
type for quick search

SUBMITTER INFORMATION

Facility Name *
Anderson County Health Department

Phone Number
(865) 425-8800

Address
710 North Main Street

City
Clinton

Point of Contact *

Ordering Provider *

PATIENT INFORMATION

Last Name *
test

ALLEN, TEST, 12/14/2020

AOPOL, TEST, 01/01/1990

ARLNGC, TEST, 12/12/1980

ARLNGC, TEST01, 05/26/1967

BROWN, TEST, 01/01/2017

(865) 425-8800

CLEAR SAVE SUBMIT

- If the patient is listed, click on the patient to add the patient's information to the TRF
- For more detailed look up, click the 🔍 icon

Test Requisition Form (TRF) – Patient Information

The screenshot shows the 'Patient Information' form in the TRF system. A red arrow points from the 'Last Name' field (ALLEN) to the 'Edit patient' modal. The modal contains the following fields:

- Last Name * (ALLEN)
- First Name * (TEST)
- Middle Initial
- Date Of Birth * (12/14/2020)
- Phone Number * ((615) 837-5472)
- Address * (630 Hart Lane)
- City * (Nashville)
- State * (TN)
- County of Residence * (Bledsoe)
- Zip Code * (37216)
- Gender * (Female, Male, Unknown, Ambiguous, Not Applicable, Other)
- Pregnant * (Yes, No, Unknown)
- Race * (Asian, Black or African American, American Indian or Alaska Native, Other Race)

Buttons at the bottom of the modal: CLOSE, CLEAR, SAVE.

- Edit existing patient information by clicking the  icon in the **Last Name** field

TRF Required Patient Information/Demographics that are not an exact match for new patients should be considered a new patient record.

Do not update TRF Required historical patient information/demographics with new patient information.

Test Requisition Form (TRF) – Patient Information

TN

Department of Health

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

[TN] ARLN

USER NAME

Forms / [TN] ARLN

PATIENT INFORMATION

Last Name *

ALLEN

Date Of Birth

12/14/2020

Address

630 Hart Lane

City

Nashville

County of Residence

Bledsoe

Gender

Female

Pregnant

No

Race

White

Submitter Patient ID

SUBMITTER INFORMATION

Test Name

TEST

Middle Initial

Test Number

137-5472

State

Select a patient from the list below

Quick Search

LAST NAME	FIRST NAME	DATE OF BIRTH	GENDER	FACILITY NAME	ADDRESS
AARALL	ARILI	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
AARALL	BALT	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
AARALL	BALT	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
AARALL	CADRYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
AARALL	EMARINTE	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
AARALL	EMARINTE	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
AARALL	EMARINTE	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
ABIALA	ARILYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
ABIALA	BALYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
ABIALA	BALYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre

Rows per page: 25 1-25 of 1610

CLOSE ADD EDIT SELECT

- Detailed information for all patients, click the  icon

Test Requisition Form (TRF) – Patient Information

PATIENT INFORMATION

Last Name *

test

ALLEN, TEST , 12/14/2020

AOPOL, TEST , 01/01/1990

ARLNGC, TEST , 12/12/1980

ARLNGC, TEST01 , 05/26/1967

BROWN, TEST , 01/01/2017

7865\ 425 8800

FIRST NAME	DATE OF BIRTH	GENDER	FACILITY NAME	ADDRESS
ARILI	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
BALT	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
BALT	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
CADRYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
EMARINTE	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
EMARINTE	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
EMARINTE	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
ARILYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
BALYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre
BALYN	01/01/1970	Ambiguous	Tennessee Dept. of Health Division of Lab Services	123 4th Stre

Rows per page: 25 1-25 of 1610

CLOSE ADD

- Once you confirm a patient is not in the system, click **ADD** in the details box or by clicking the **+** icon on the TRF page to add a new patient

Test Requisition Form (TRF) – Patient Information

PATIENT INFORMATION

Last Name *
test

ALLEN, TEST , 12/14/2020
AOPOL, TEST , 01/01/1990
ARLNGC, TEST , 12/12/1980
ARLNGC, TEST01 , 05/26/1967
BROWN, TEST , 01/01/2017

(865) 425-8800

Add new patient

Last Name * First Name * Middle Initial
Date Of Birth * Phone Number *
Address *
City * State *
County of Residence * Zip Code *
Gender *
☐ Female ☐ Male ☐ Unknown ☐ Ambiguous ☐ Not Applicable ☐ Other
Race *
☐ Asian ☐ Black or African American ☐ American Indian or Alaska Native ☐ Other Race
☐ Native Hawaiian/Pacific Islander ☐ White
Ethnicity *
☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Unknown
Submitter Patient ID
CLOSE CLEAR **SUBMIT**

- Enter the patient information
 - Items in red are required
- Click **Submit** to add to the system and into the TRF form

Do not update TRF Required historical patient information/demographics with new patient information

Test Requisition Form (TRF) – Submitter Information

Dashboard

INCOMPLETE ORDERS

IN TRANSIT ORDERS

ALL ORDERS

PUBLISHED REPORTS

MY PATIENTS

HELP

ORDER TESTS

BATCH ORDER

VIEW REPORTS

SUBMITTER INFORMATION

Facility Name *
Tennessee Dept of Health Lab Services - Nashville

Phone Number
(615) 262-6300

Address
630 Hart Lane

City
Nashville

Point of Contact *

Ordering Provider *

SAMPLE COLLECTION FACILITY INFORMATION

Collection Facility Name *

SPECIMEN INFORMATION

Collection Date and Time *

Test *
☒ Candida auris Colonization ☐ CPO Colonization

Specimen Type *
☐ Axilla and groin swab ☐ Axilla and nares swab ☐ Axilla, groin, and nares swab ☐ Anal swab ☐ Rectal swab

Is this a Clinical Sample? *


Select a company from the list below

Quick Search

NAME	ADDRESS	CITY	STATE	ZIPCODE	PHONEMAI
Collection Site 153	476 Out of State Blvd	WI City	WI	00153	0000000
Collection Site 054	683 hart lane	nashville	TN	00054	0000000
Collection Site 057	686 hart lane	nashville	TN	00057	0000000
Shelby County Health Department	2466 Peres	Memphis	TN	38108	901-222
McNairy County Health Department	725 East Poplar	Selmer	TN	38375	731-645
Anderson County Health Department	710 North Main Street	Clinton	TN	37716	865-425
Williamson County Health Department - Franklin Clinic	1324 West Main Street	Franklin	TN	37064	615-794
Test Collection Facility062	652 Hart Lane	Nashville	71	37238	6158375
Shelby County Health Department	1000 Haynes Street	Memphis	TN	38114	901-222
Fayette County Health Department	90 Yum Yum Road	Somerville	TN	38068	901-465

Rows per page: 25 1-25 of 435

CLOSE **ADD** **EDIT** **SELECT**

- Your default facility will populate in the **Facility Name** field
- If you are affiliated with more than one facility:
 - Click the  icon next to the **Facility Name** field to list facilities affiliated with your user account
 - Click on the name of the facility and click **SELECT**

Test Requisition Form (TRF) – Submitter Information

The screenshot shows the 'SUBMITTER INFORMATION' section of the TRF. The form is titled 'SUBMITTER INFORMATION' and includes the following fields:

- Facility Name *: Tennessee Dept. of Health Division of Lab Services
- Phone Number: (615) 262-6300
- Fax Number: (empty)
- Address: 630 Hart Lane
- City: Nashville
- State: TN
- Zip Code: 37243
- Point of Contact *: Gibbs, Paula (highlighted with a red arrow)
- Ordering Provider *: (empty)

Below the Submitter Information section is the 'SAMPLE COLLECTION FACILITY INFORMATION' section, which includes a 'Collection Facility Name *' field. At the bottom of the form are buttons for 'CLEAR', 'SAVE', and 'SUBMIT'.

- Begin typing the name of the point of contact in the **Point of Contact** field.
- Click on the name of the contact from the list and click **SELECT**

Test Requisition Form (TRF) – Submitter Information

TN Department of Health [TN] ARLN

SUBMITTER INFORMATION

Facility Name*
Tennessee Dept of Health Lab Services - Nashville

Phone Number
(615) 262-6300

Fax Number
(615) 262-6393

Address
630 Hart Lane

City
Nashville

State
TN

Point of Contact *

Ordering Provider *

Select a contact from the list below

Quick Search

FIRST NAME	LAST NAME	PHONE NUMBER
Paula	Gibbs	615-262-6364
Richard	Steace	6152626300

Rows per page: 25 1-2 of 2

CLOSE SELECT

- Click the 🔍 icon next to see the list of contacts affiliated with your facility(s)
- Click on the name of the contact and click **SELECT**

Test Requisition Form (TRF) – Submitter Information

TN Department of Health

[TN] ARLN

USER NAME

SUBMITTER INFORMATION

Facility Name *
Tennessee Dept. of Health Division of Lab Services

Phone Number
(615) 262-6300

Fax Number

Address
630 Hart Lane

City
Nashville

State
TN

Zip Code
37243

Point of Contact *

Ordering Provider *

Cilena, Con

Foster, Banana

House, John

House, John

SPECIMEN INFORMATION

CLEAR SAVE SUBMIT

- Begin typing the name of the provider in the **Ordering Provider** field
 - If the ordering physician is listed, select the physician's name from the list
 - The provider's information will populate in the TRF
- Verify the provider's information on the form

Test Requisition Form (TRF) – Submitter Information

TN Department of Health

[TN] ARLN

USER NAME

SUBMITTER INFORMATION

Facility Name *
Tennessee Dept. of Health Division of Lab Services

Phone Number
(615) 262-6300

Fax Number

Address
630 Hart Lane

City
Nashville

State
TN

Point of Contact *

Ordering Provider *

SAMPLE COLLECTION FACILITY INFORMATION

Collection Facility Name *

SPECIMEN INFORMATION

Select a Physician from the list below

Quick Search

FIRST NAME	LAST NAME	NPI
Wook	TestDoc	1002003004
Liliana	Vessica	0987654321

Rows per page: 25 1-2 of 2

CLOSE ADD EDIT SELECT

- To search for an **Ordering Provider**
 - Click on the 🔍 icon, select the physician's name from the list
 - The provider's information will populate in the TRF
- Verify the provider's information on the form

Test Requisition Form (TRF) – Submitter Information

TN Department of Health

[TN] COVID 19

USER NAME

SUBMITTER INFORMATION

Facility Name *
Tennessee Dept. of Health Division of Lab Services

Phone Number
(615) 262-6300

Fax Number

Address
630 Hart Lane

City
Nashville

State
TN

Zip Code
37243

Point of Contact *

Ordering Provider *
House, John

Phone Number
(111) 222-3344

Fax Number


Email
123

Address
123

City
big city

State
TN

Zip Code
22322

- To edit the provider information, click the  icon after selecting the provider's name from the list

Test Requisition Form (TRF) – Submitter Information

The screenshot shows the 'SUBMITTER INFORMATION' section of the TRF. It includes fields for Facility Name (Tennessee Dept. of Health Division of Lab Services), Phone Number ((615) 262-6300), Fax Number, Address (630 Hart Lane), City (Nashville), State (TN), and Zip Code (37243). Below this is the 'Point of Contact' field and the 'Ordering Provider' field with a '+' icon. A red arrow points from the '+' icon to the 'Add New Physician' modal. The modal contains fields for Last Name, First Name, NPI, Email, Phone Number, Fax Number, Address, City, State, and Zip Code. It also has a 'Contact Type' dropdown set to 'Physician' and a 'Status' dropdown set to 'Active'. At the bottom of the modal are 'CLOSE', 'CLEAR', and 'SUBMIT' buttons.

Submitter Information:

- Facility Name *: Tennessee Dept. of Health Division of Lab Services
- Phone Number: (615) 262-6300
- Fax Number:
- Address: 630 Hart Lane
- City: Nashville
- State: TN
- Zip Code: 37243
- Point of Contact *:
- Ordering Provider *: +

Sample Collection Facility Information:

- Collection Facility Name *: +

Specimen Information:

Add New Physician:

- Last Name *:
- First Name *:
- NPI *:
- Email:
- Phone Number *:
- Fax Number:
- Address *:
- City *:
- State *:
- Zip Code *:
- Contact Type: Physician
- Status: Active
- CLOSE CLEAR SUBMIT

- If **Ordering Provider** is not listed, add the provider by clicking the + icon
- Add the provider's information and click **Submit**

Test Requisition Form (TRF) – Submitter Information

TN Department of Health

≡ [TN] ARLN

USER NAME

SUBMITTER INFORMATION

Facility Name *
Tennessee Dept of Health Lab Services - Nashville

Phone Number
(615) 262-6300

Fax Number
(615) 262-6393

Address
630 Hart Lane

City
Nashville

State
TN

Zip Code
37247

Knox County Health Department - West

Hawkins County Health Department

Sumner County Health Department - Gallatin Clinic

Davidson County Health Department - East

Smith County Health Department

Collection Facility Name *
s

SPECIMEN INFORMATION

Collection Date and Time *

- Begin typing the **Sample Collection Facility Name** in the **Sample Collection Facility Name** field
 - If the facility is listed, select the facility's name from the list
 - The facility's information will populate in the TRF

Test Requisition Form (TRF) – Submitter Information

TN Department of Health [TN] ARLN

SUBMITTER INFORMATION

Facility Name *
Tennessee Dept of Health Lab Services - Nashville

Phone Number
(615) 262-6300

Fax Number
(615) 262-6393

Address
630 Hart Lane

City
Nashville

State
TN

Point of Contact *

Ordering Provider *


SAMPLE COLLECTION FACILITY INFORMATION

Collection Facility Name *

SPECIMEN INFORMATION

- Click the  icon next to the **Sample Collection Facility Name** field to list sample collection facilities
- Click on the name of the facility and click **SELECT**

Select a company from the list below

 Quick Search

NAME	ADDRESS	CITY	STATE	ZIPCODE	PHONEMAIN
Knox County Health Department - West	1028 Old Cedar Bluff Road	Knoxville	TN	37923	865-215-5300
Tipton County Health Department	4700 Mueller Brass Road	Covington	TN	38019	901-476-0235
Hawkins County Health Department	247 Silverlake Road	Church Hill	TN	37642	423-357-5341
Sumner County Health Department - Gallatin Clinic	1005 Union School Road	Gallatin	TN	37066	615-206-1100
Davidson County Health Department - East	1015 East Trinity Lane	Nashville	TN	37216	615-862-7916
Smith County Health Department	251 Joy Alford Way	Carthage	TN	370303047	615-735-0242
Johnson County Health Department	715 West Main Street	Mountain City	TN	37683	423-727-9731
Tennessee Department of Health	630 Hart Lane	Nashville	TN	37243	
Blount County Justice Center	920 E Lamar Alexander Pkwy	Maryville	TN	37804	865-273-5245
Wilson County Health Department	927 East Baddour Parkway	Lebanon	TN	37087	615-444-5325
Crockett County Health Department	209 North Balls Street	Alamo	TN	38001	731-696-2505

Rows per page: 25 1-25 of 180

CLOSE ADD EDIT SELECT

Test Requisition Form (TRF) – Submitter Information



≡ [TN] ARLN

USER NAME

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

Forms / [TN] ARLN

PATIENT INFORMATION

SUBMITTER INFORMATION

SAMPLE COLLECTION FACILITY INFORMATION

Collection Facility Name *



Add facility

Facility Name *

Name and Title of Collection Facility Point of Contact

Email Address

Phone Number

Fax Number

Address

City

State *

Zip Code

County

Lab CLIA or MTS

☐ CLIA ☐ MTS ☐ Other

CLOSE CLEAR SUBMIT

- If **Sample Collection Facility** is not listed, add the facility by clicking the icon +
- Add the facility's information and click **Submit**



Test Requisition Form (TRF) – Specimen Information

The screenshot shows the 'SPECIMEN INFORMATION' section of the TRF. The 'Collection Date and Time *' field is highlighted with a red box. A red arrow points from this field to a date picker showing 'Nov 10 02:15 PM' with a calendar icon highlighted. Another red arrow points from the time picker to a clock face showing '10:15 PM' with the clock icon highlighted. A third red arrow points from the clock face to the 'SUBMIT' button at the bottom right of the form.

PATIENT INFORMATION

SUBMITTER INFORMATION

SAMPLE COLLECTION FACILITY INFORMATION

SPECIMEN INFORMATION

Collection Date and Time *

Test *

☒ Candida auris Colonization ☐ CPO Colonization

Specimen Type *

☐ Axilla and groin swab ☐ Axilla and nares swab ☐ Axilla, groin, and nares swab ☐ Anal swab ☐ Rectal swab ☐ Specimen

Is this a Clinical Sample? *

☒ Clinical Sample

Laboratory Name *

Nashville

Laboratory Address

630 Hart Lane, Nashville, TN 37216

Comments

CLEAR SUBMIT

- Type the **Collection Date** and **Time** -OR-
- Click on the calendar 📅 icon to select the date of collection
 - Click on the time at the top, then move the hands of the clock to chose the collection hour and minute
- Click **OK** to save the date/time and to return to the form

Test Requisition Form (TRF) – Specimen Information

TN Department of Health

[TN] ARLN

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

PATIENT INFORMATION

SUBMITTER INFORMATION

SAMPLE COLLECTION FACILITY INFORMATION

SPECIMEN INFORMATION

Collection Date and Time *

04/26/2021 04:03 pm

Test *

☒ Candida auris Colonization ☐ CPO Colonization

Specimen Type *

☒ Axilla and groin swab ☐ Axilla and nares swab ☐ Axilla, groin, and nares swab ☐ Anal swab ☐ Rectal swab ☐ Spe

Is this a Clinical Sample? *

☒ Clinical Sample

Laboratory Name *

Nashville

Laboratory Address

630 Hart Lane, Nashville, TN 37216

Comments

- Select the **Test** to be performed by clicking on the radio button
- Then click the radio button next to the **Specimen Type** collected

Test Requisition Form (TRF) – Specimen Information



[TN] ARLN

SAMPLE COLLECTION FACILITY INFORMATION

SPECIMEN INFORMATION

Collection Date and Time *

04/26/2021 04:03 pm



Test *

☐ Candida auris Colonization ☒ CPO Colonization

Specimen Type *

☒ Anal swab ☐ Rectal swab ☐ Specimen from wound ☐ Specimen from abscess ☐ Sputum ☐ Axilla and groin swab

☐ Stool swab ☐ Throat swab ☐ Tracheal aspirate ☐ Other

Is this a Clinical Sample? *

☒ Clinical Sample

Carbapenem Resistance Gene

☒ KPC ☒ VIM ☐ IMP ☐ NDM ☐ OXA ☐ Other (please specify)

Organism Species

Acinetobacter species



Laboratory Name *

Nashville

Laboratory Address

630 Hart Lane, Nashville, TN 37216

Comments

- Select the **“Carbapenem Resistance Gene”** type
- Choose **“Other”** if the gene is not listed
 - Specify the gene if **“Other”** is selected

Test Requisition Form (TRF) – Specimen Information



[TN] ARLN

SAMPLE COLLECTION FACILITY INFORMATION

SPECIMEN INFORMATION

Collection Date and Time *

04/26/2021 04:03 pm



Test *

☐ Candida auris Colonization ☒ CPO Colonization

Specimen Type *

☒ Anal swab ☐ Rectal swab ☐ Specimen from wound ☐ Specimen from abscess ☐ Sputum ☐ Axilla and groin swab
☐ Stool swab ☐ Throat swab ☐ Tracheal aspirate ☐ Other

Is this a Clinical Sample? *

☒ Clinical Sample

Carbapenem Resistance Gene

☒ KPC ☒ VIM ☐ IMP ☐ NDM ☐ OXA ☐ Other (please specify)

Organism Species

Acinetobacter species



Laboratory Name *

Nashville

Laboratory Address

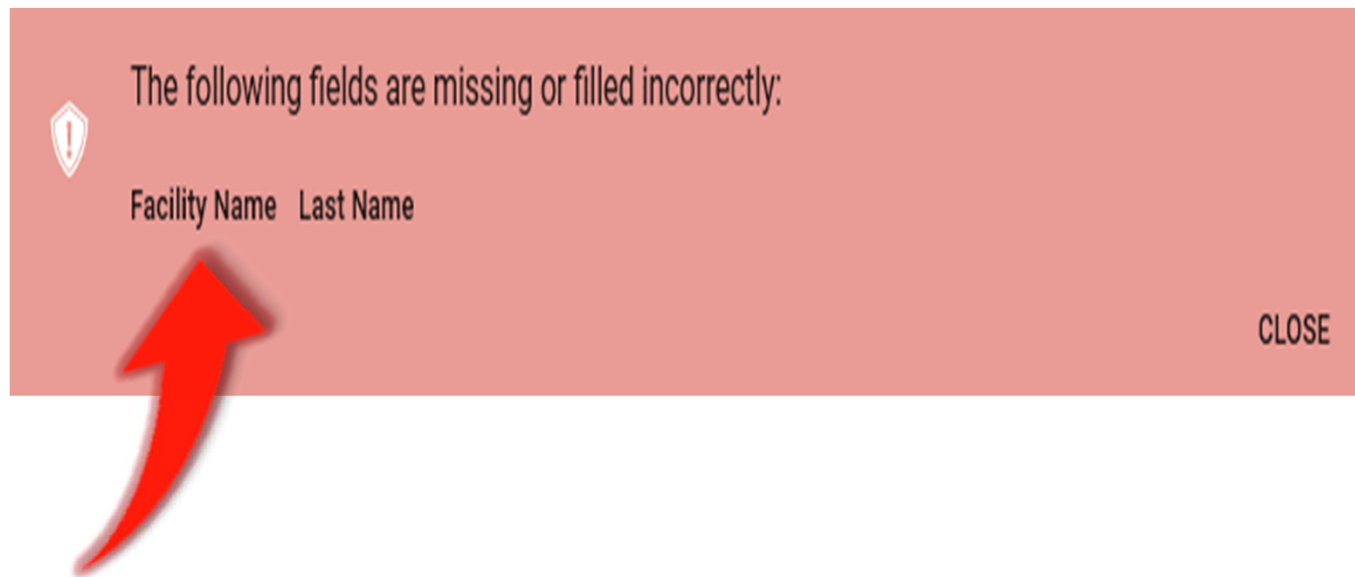
630 Hart Lane, Nashville, TN 37216

Comments

- Select the **“Organism Species”** by typing or using the down arrow

Test Requisition Form (TRF)- Submission

- If required fields are not populated or populated incorrectly, an error dialog box will appear to show the missing fields.



- Click on any field in the dialog box to be navigate to the field to correct the issue.

Test Requisition Form (TRF)-Submission

- Once the test order is ready to be submitted, the Certification of Test Order message will be displayed
- The user must click **AGREE** in order to move forward

Certification of Test Order

By submitting this order for testing, I hereby certify as follows:

- The ordering provider is an individual authorized under State law to order tests or receive test results, or both.
- I certify that the information submitted is true and correct to the best of my knowledge.

CANCEL **AGREE**

Test Order Confirmation

- Once the test order has been submitted, the confirmation message will be displayed
- The **Portal Order ID** identifies the test order in the system

Order Placed

Your test order **OIDIL200000012** has been successfully submitted. Please check All Specimens section of your Dashboard for status updates.

Click Print button below to view/print the completed submission form.

Click Copy Order button to apply current order information to the new order.

PRINT

COPY ORDER

CLOSE

Test Order Confirmation

- Click **PRINT** to print the Order Manifest (PDF)
- A printed copy of the Order Manifest must accompany the specimen to the laboratory

Order Placed

Your test order **OIDIL200000012** has been successfully submitted. Please check All Specimens section of your Dashboard for status updates.

Click Print button below to view/print the completed submission form.

Click Copy Order button to apply current order information to the new order.

PRINT

COPY ORDER

CLOSE

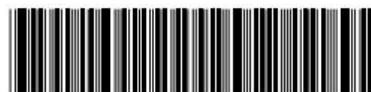
- The Order Manifest may be accessed at any time by clicking on the Portal Order ID in the **All Orders** data grid.

Order Manifest

A printed copy of the Order Manifest must accompany the specimen to the laboratory

630 Hart Lane
Nashville, TN 37216
(615) 262-6300

CPO Colonization Requisition
Date Submitted: 4/26/2021 4:23:33 PM CST
Submitted By: Shane Allen



Order ID: OIDTN2210003950

Patient Demographics	
Last Name: ALLEN	First Name: TEST
Date of Birth: 12/14/2020	Phone Number: 6158375472
Address: 630 Hart Lane	City: Nashville
State: TN	County: Bledsoe
Gender: Female	Pregnant: No
Race: White	Ethnicity: Not Hispanic or Latino
Submitter Patient ID:	
Submitter Information	
Facility Name: Tennessee Dept. of Health Division of Lab Services	
Phone Number: 615-262-6300	Fax Number:
Address: 630 Hart Lane	City: Nashville
State: TN	Zip Code: 37243
Point of Contact: Gibbs, Paula	Fax Number:
Phone Number: 615-262-6300	NPI: 1234567890
Ordering Provider: Acula, DR	Fax Number:
Phone Number: 6157431800	
Email:	
Address: 850 RS Gass Blvd	City: Nashville
State: TN	Zip Code: 37216
Collection facility	
Collection Facility: Collection Site 153	
Name and Title of Collection Facility Point of Contact: POC RN 153	Email Address: collecton@email.gov
Phone Number: 0000000153	Fax Number: 7894561234
Address: 476 Out of State Blvd	City: WI City
State: WI	County: Iron
Lab CLIA or MTS: Other	Zip Code: 00153
Other Number: SCP	
Specimen Information	
Collection Date And Time: 4/26/2021 4:03:55 PM CST	Test: CPO Colonization
Specimen Type: Anal swab	
Is this a Clinical Sample? Clinical Sample	
Carbapenem Resistance Gene: VIM, KPC	
Organism Species: Acinetobacter species	
Laboratory Name: Nashville	Laboratory Address: 630 Hart Lane, Nashville, TN 37216
Additional Comments/Information:	

630 Hart Lane
Nashville, TN 37216
(615) 262-6300

Candida auris Colonization Requisition
Date Submitted: 4/26/2021 4:24:21 PM CST
Submitted By: Shane Allen



Order ID: OIDTN2210003951

Patient Demographics	
Last Name: ALLEN	First Name: TEST
Date of Birth: 12/14/2020	Phone Number: 6158375472
Address: 630 Hart Lane	City: Nashville
State: TN	County: Bledsoe
Gender: Female	Pregnant: No
Race: White	Ethnicity: Not Hispanic or Latino
Submitter Patient ID:	
Submitter Information	
Facility Name: Tennessee Dept. of Health Division of Lab Services	
Phone Number: 615-262-6300	Fax Number:
Address: 630 Hart Lane	City: Nashville
State: TN	Zip Code: 37243
Point of Contact: Gibbs, Paula	Fax Number:
Phone Number: 615-262-6300	NPI: 1234567890
Ordering Provider: Acula, DR	Fax Number:
Phone Number: 6157431800	
Email:	
Address: 850 RS Gass Blvd	City: Nashville
State: TN	Zip Code: 37216
Collection facility	
Collection Facility: Collection Site 153	
Name and Title of Collection Facility Point of Contact: POC RN 153	Email Address: collecton@email.gov
Phone Number: 0000000153	Fax Number: 7894561234
Address: 476 Out of State Blvd	City: WI City
State: WI	County: Iron
Lab CLIA or MTS: Other	Zip Code: 00153
Other Number: SCP	
Specimen Information	
Collection Date And Time: 4/26/2021 4:03:55 PM CST	Test: Candida auris Colonization
Specimen Type: Axilla and groin swab	
Is this a Clinical Sample? Clinical Sample	
Laboratory Name: Nashville	Laboratory Address: 630 Hart Lane, Nashville, TN 37216
Additional Comments/Information:	

**Portal
Order
ID**



Test Order Confirmation

- Click **COPY ORDER** to add more orders for the same facility
 - All information from the current order (excluding patient and insurance information) will be copied

Order Placed

Your test order **OIDIL200000012** has been successfully submitted. Please check All Specimens section of your Dashboard for status updates.

Click Print button below to view/print the completed submission form.

Click Copy Order button to apply current order information to the new order.

PRINT

COPY ORDER

CLOSE

Test Order Confirmation

- Click **CLOSE** to display the TRF for the next patient
 - If no additional patients will be entered, navigate back to the dashboard to close the TRF

Order Placed

Your test order **OIDIL200000012** has been successfully submitted. Please check All Specimens section of your Dashboard for status updates.

Click Print button below to view/print the completed submission form.

Click Copy Order button to apply current order information to the new order.

PRINT

COPY ORDER

CLOSE

Saving Incomplete Test Orders

- Incomplete test orders may be saved to be completed and submitted later

Save order

Would you like to save this order?

CANCEL YES

- After saving, a confirmation order will be displayed with the Portal Order ID for that specimen
 - Incomplete orders will be accessible in the **Incomplete Orders** data grid

Order saved

Your test order has been saved as **OIDIL200000013** in Incomplete Orders.

CLOSE

Incomplete Orders

Number of Incomplete Orders

USER NAME

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

Quick Search

KEY	SPECIMEN ID	PATIENT NAME	PATIENT DOB	PATIENT MRN	DATE CREATED
O1DTN2200002248		Setilin, Den M	01/01/1997	MRN1	10/28/2020 02:56 pm
O1DTN2200002245		ZELENIK-1, PERIL M	01/01/1990	MRN1	10/24/2020 02:23 pm

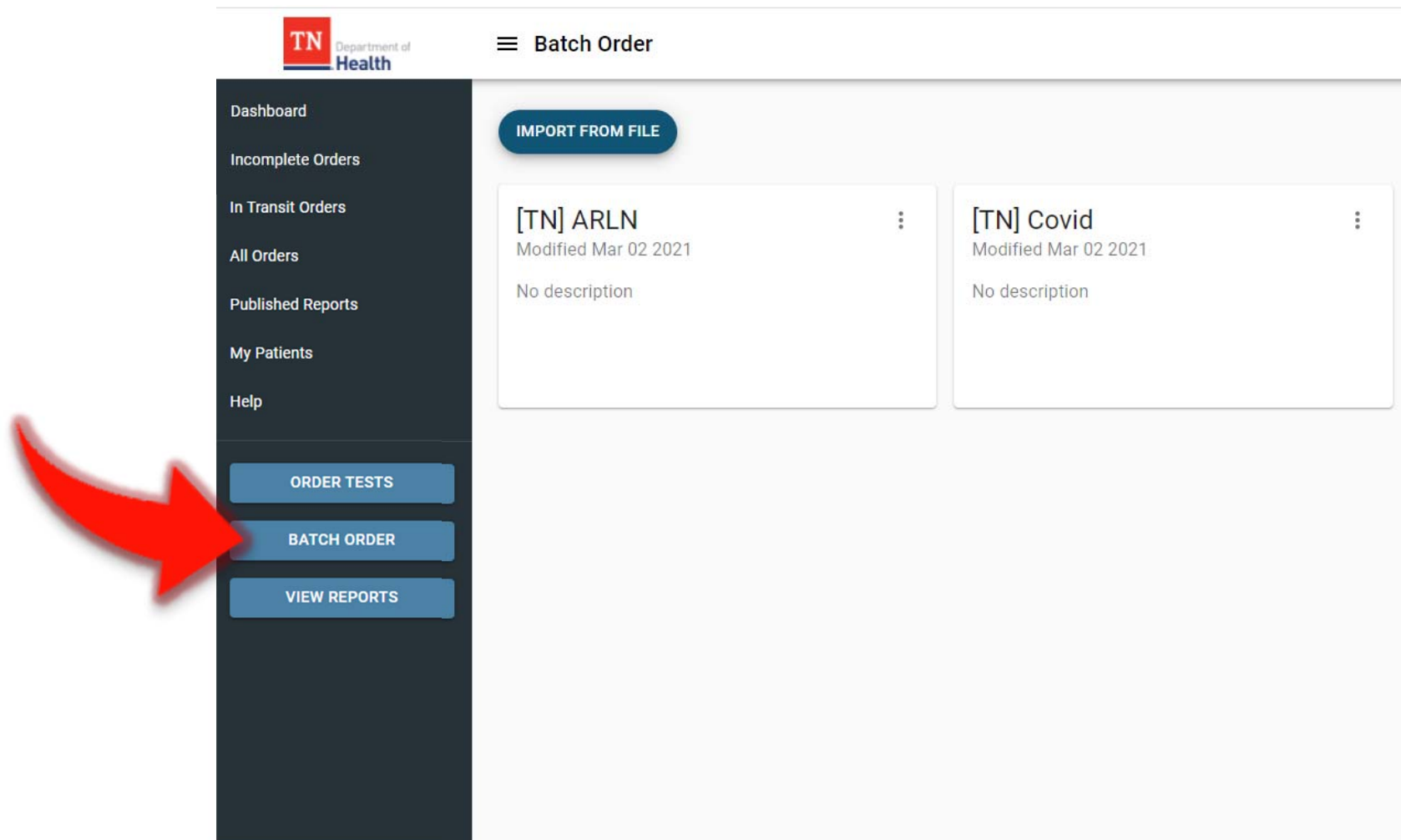
- To retrieve the saved order:
- Navigate to the **Incomplete Orders** navigation link
- Locate the order record and click on it.
- To discard saved order, click on the icon.



Batch Ordering

Batch Orders

- The Batch Order function allows users to upload multiple test orders at once



Batch Orders

- Download the **Import Template** required for the Batch Order **prior** to specimen collection and submission.
- This is important in order to correctly gather the required order fields and patient information.

The screenshot shows the 'Batch Order' page in the TN Department of Health system. On the left is a dark sidebar with navigation links: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are three buttons: 'ORDER TESTS', 'BATCH ORDER' (highlighted with a red box and labeled '1'), and 'VIEW REPORTS'. The main content area has a header with the TN logo and 'Department of Health', and a 'Batch Order' title. Below the title is an 'IMPORT FROM FILE' button. A tile for '[TN] ARLN' (Modified Mar 02 2021, No description) is shown. A red line labeled '2' points to the three-dot menu icon on the tile. A dropdown menu is open, showing 'Download Import Template' and 'Import from file'. A red line labeled '3' points to the 'Download Import Template' option.

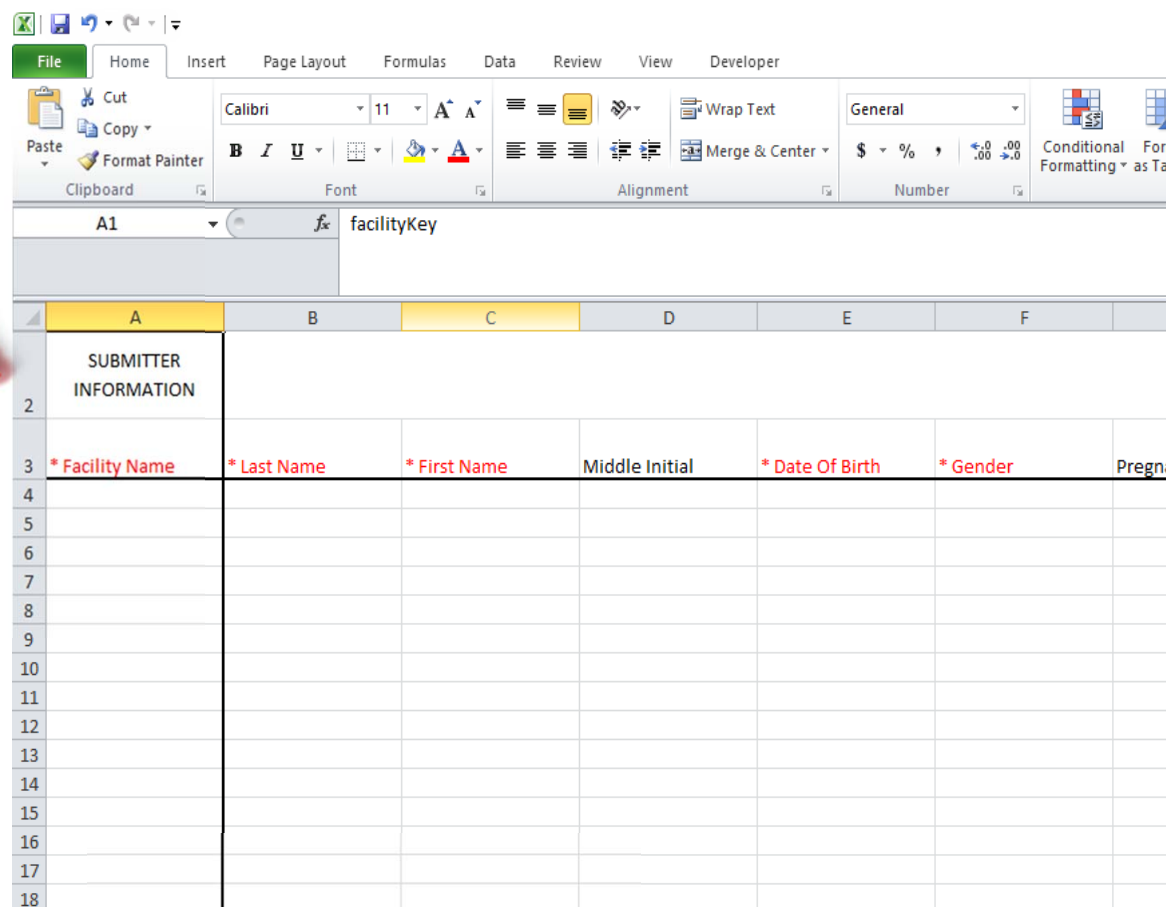
To Download the Excel Spreadsheet

1. Click **BATCH ORDER** button on the **Dashboard**.
2. Click the 3-button link on the upper corner of the tile.
3. Select **Download Import Template** from the two menu options.
4. Save the excel spreadsheet.
5. Open the saved Excel Spreadsheet and fill the required details in the fields.

Note: the dropdown menus for some of the required values.

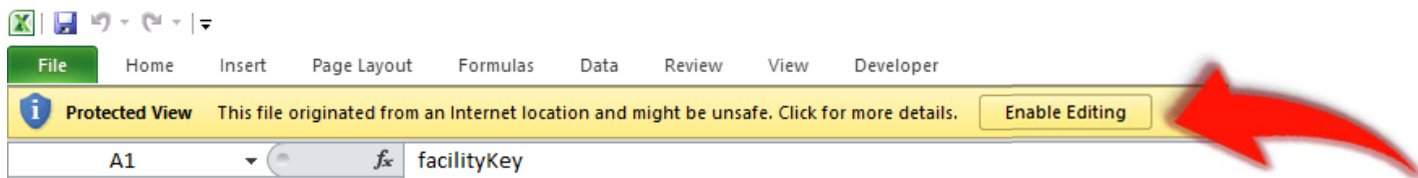
Batch Import Template

- Enter one line for each specimen that is being submitted.
- Requirements of the **Batch Import Template**:
 - All fields in **red** are required
 - ALWAYS download the template for every use




The screenshot shows the Excel interface with the ribbon set to 'Home'. The spreadsheet has a header row with columns A through F. Column A is labeled 'SUBMITTER INFORMATION'. Columns B through F have headers in red text: '* Facility Name', '* Last Name', '* First Name', 'Middle Initial', '* Date Of Birth', and '* Gender'. The formula bar shows 'facilityKey'.

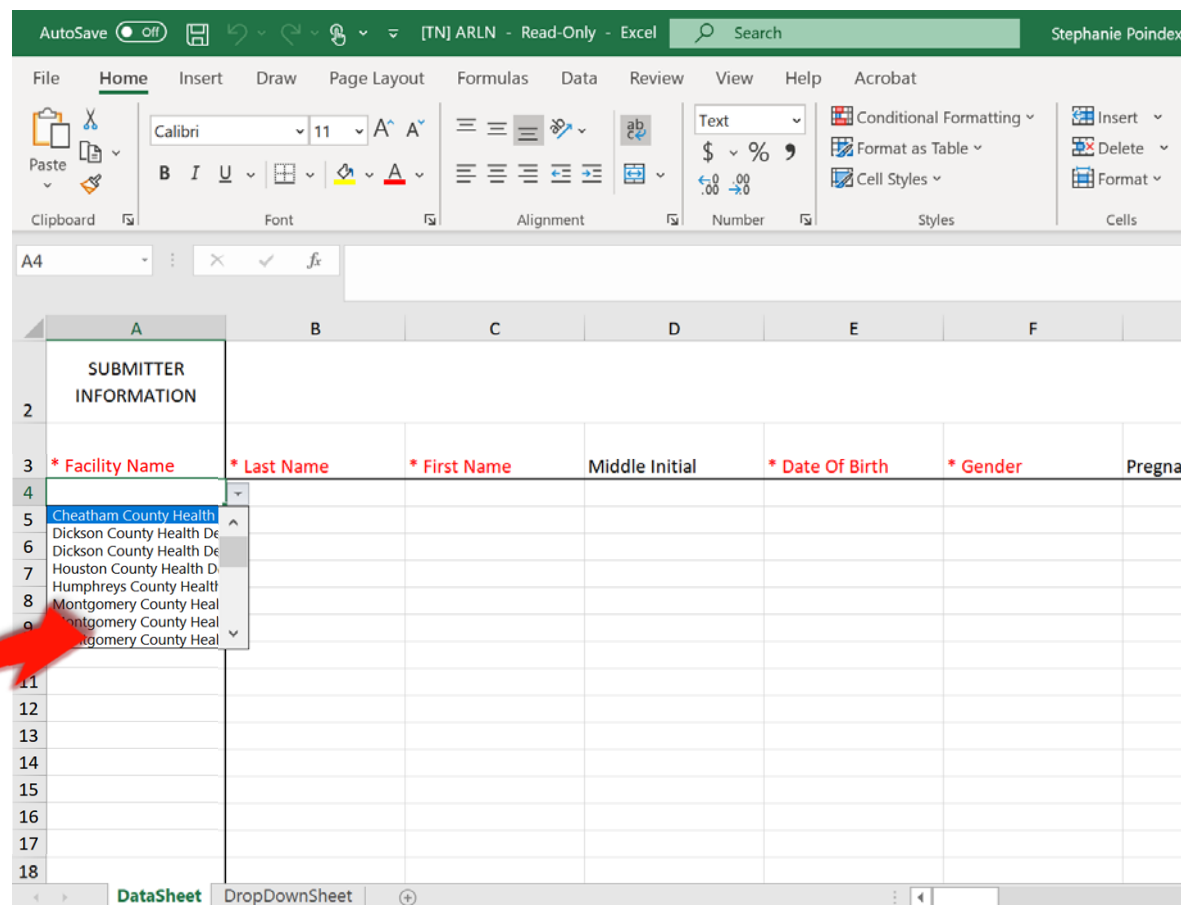
	A	B	C	D	E	F
2	SUBMITTER INFORMATION					
3	* Facility Name	* Last Name	* First Name	Middle Initial	* Date Of Birth	* Gender
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						



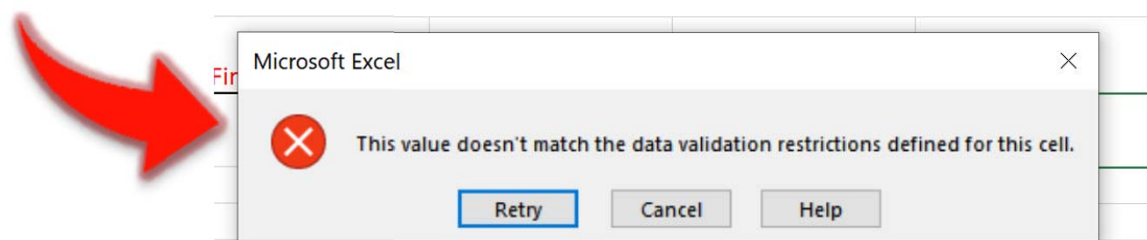
Note: You may be required to “Enable Editing” in the spreadsheet to enter your specimen information.

Batch Import Template

- Some fields require you to choose an option from a drop-down menu
- To access the drop-down menu:
 - Click on the cell below the field
 - A down arrow  will appear to the right of the line
 - Click on the down arrow to reveal the choices associated with this field



Note: A selection from the drop-down menu must be chosen when included. If text is entered in the cell that does not match the choices, an error message will be displayed.



Batch Import Template

The screenshot displays an Excel spreadsheet titled "[TN] ARLN (5) - Microsoft Excel". The spreadsheet is divided into two main sections: "SUBMITTER INFORMATION" and "PATIENT INFORMATION". The "PATIENT INFORMATION" section includes fields for Facility Name, Last Name, First Name, Middle Initial, Date of Birth, Gender, Pregnant status, Estimated Due Date, Race, Ethnicity, Address, City, State, and County of Residence. Below this is the "SPECIMEN INFORMATION" section, which includes fields for Specimen Type, Specify, Is this a Clinical Sample?, Carbapenem Resistance Gene, If Other, specify, Organism Species, If Other, specify, and Laboratory Name. A red box highlights the "SPECIMEN INFORMATION" section. A yellow pop-up message box is visible over the "Carbapenem Resistance Gene" field, listing the following options: KPC, VIM, IMP, NDM, OXA, Other (please specify). A red arrow points to the pop-up message box.

SUBMITTER INFORMATION	
Facility Name	Last Name

PATIENT INFORMATION											
First Name	Middle Initial	Date of Birth	Gender	Pregnant	Estimated Due Date	Race	Ethnicity	Address	City	State	County of Residence

SPECIMEN INFORMATION						
Specimen Type	Specify	Is this a Clinical Sample?	Carbapenem Resistance Gene	If Other, specify	Organism Species	If Other, specify

Carbapenem Resistance Gene
KPC, VIM, IMP, NDM, OXA, Other (please specify)

- A pop-up message will appear when entering information into the fields in the template.
- The information in the field must be an exact match to one of the options listed in the pop-up.
 - If the entry into the template does not match one or more of the options, the lab order will not import.

Importing Batch Orders

1. Click the **Batch Order** Call-To-Action Button
2. Click **IMPORT FROM FILE**

The screenshot displays the TN Department of Health interface. On the left sidebar, the 'BATCH ORDER' button is highlighted with a red box and labeled with a red '1'. The main content area shows a 'Batch Order' section with an 'IMPORT FROM FILE' button circled in red and labeled with a red '2'. Below this, there are two order tiles: '[TN] ARLN' (Modified Mar 02 2021, No description) and '[TN] Covid'. A red arrow points from the three-dot menu icon on the '[TN] ARLN' tile to an 'Import From File' modal window. The modal window contains a 'Batch Import Program *' dropdown, an 'Attach File To Import' section with a dashed box for file upload, and 'CANCEL' and 'IMPORT' buttons at the bottom.

NOTE: The Import from File option can also be accessed by clicking the  icon on the [TN] ARLN Tile

Importing Batch Orders

3. Click the drop-down arrow and select [TN] ARLN
4. Drag & Drop –OR– Search for the Import Template File
5. Click **IMPORT** to upload the file

The screenshot shows the 'Batch Order' interface in the TN Department of Health system. A red box highlights the 'Import From File' modal window. A red arrow points from the 'IMPORT FROM FILE' button to the modal. Three numbered callouts are present: 3 points to the dropdown arrow in the 'Batch Import Program' field, 4 points to the file upload area, and 5 points to the 'IMPORT' button.

TN Department of Health

Batch Order

IMPORT FROM FILE

[TN] ARLN
Modified Mar 02
No description

Import From File

Batch Import Program *

[TN] ARLN

Drag & drop a file to attach it, or
Browse for a file

CANCEL IMPORT

3

4

5

TN

Importing Batch Orders

- If the required fields are not completed in the Batch Import Template before uploading, the user will receive an error message.

Warning

Some records were imported with errors. Hover over the (📄 icon) on the left of the record to view the details.

Please correct the errors by populating the missing fields in the grid or delete and reimport the corrected record from spreadsheet.

CLOSE

- Click on the 📄 icon beside each to view the details of the error(s)



The screenshot shows the TN Department of Health [TN] Covid Batch Order interface. On the left is a sidebar with navigation links: Dashboard, Incomplete Orders, In Transit Orders, and All Orders. The main content area shows the 'Batch Order / [TN] Covid' header and buttons for 'ADD ROW', 'COPY LAST', 'REMOVE SELECTED', and 'IMPORT FROM FILE'. Below these is a table with columns for 'Patient Information', 'Last Name *', 'First Name', and 'Date'. A red arrow points from the text 'Click on the 📄 icon beside each to view the details of the error(s)' to the 'Last Name *' column header. Below the table, the 'Spreadsheet line #4 errors:' section lists the following errors:

- Submitter Information: Facility Name - This field is required
- Patient Information: First Name - This field is required
- Patient Information: Last Name - Invalid Date
- Patient Information: Gender - This field is required
- Patient Information: Race - This field is required

Importing Batch Orders

Any errors **must** be corrected before submitting the Batch Order

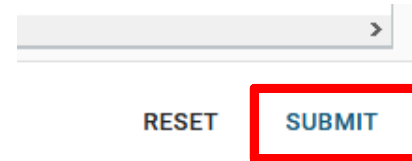
Manually correct the errors for each line

The screenshot shows the 'Batch Order' interface for the Tennessee Department of Health. The left sidebar contains navigation links: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are buttons for 'ORDER TESTS', 'BATCH ORDER', and 'VIEW REPORTS'. The main content area shows a table with columns for Patient Information and Submitter Information. The 'REMOVE SELECTED' button is highlighted with a red box. The 'Last Name' column is also highlighted with a red box. A red arrow points from the 'REMOVE SELECTED' button to the 'Last Name' column. Another red arrow points from the 'Last Name' column to the 'OR' text. The 'Facility Name' column is also highlighted with a red box. The 'Tennessee Dept. of Health Division' is listed in the Submitter Information column.

OR Delete the uploaded entries, correct the spreadsheet, and re-upload the file

Importing Batch Orders

- Once all entries are ready to submit, click **SUBMIT** in the bottom right corner




A screenshot of a form interface. At the top is a dropdown menu with a right-pointing arrow. Below it are two buttons: 'RESET' and 'SUBMIT'. The 'SUBMIT' button is highlighted with a red rectangular border.

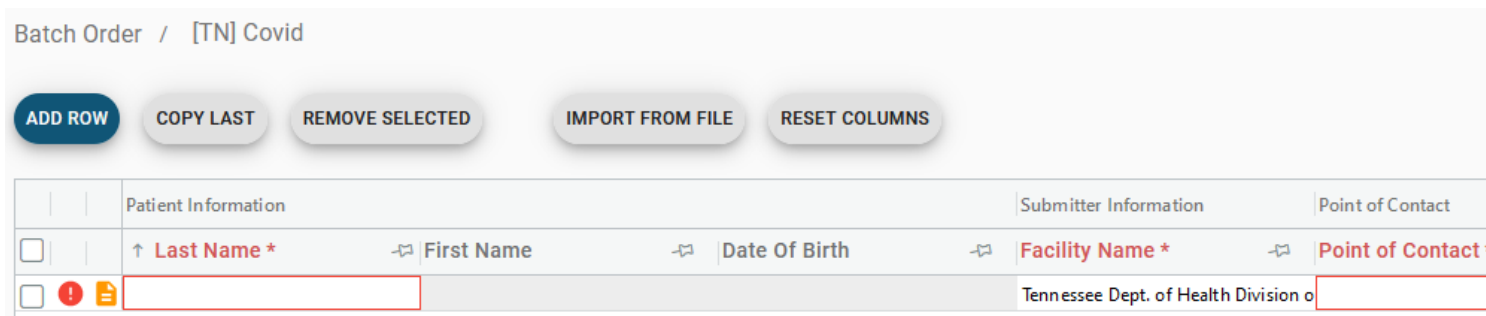
- If errors exist when submitting, a warning will be displayed

Invalid Data

There are no valid records in the grid. Please correct data and try again.

CLOSE

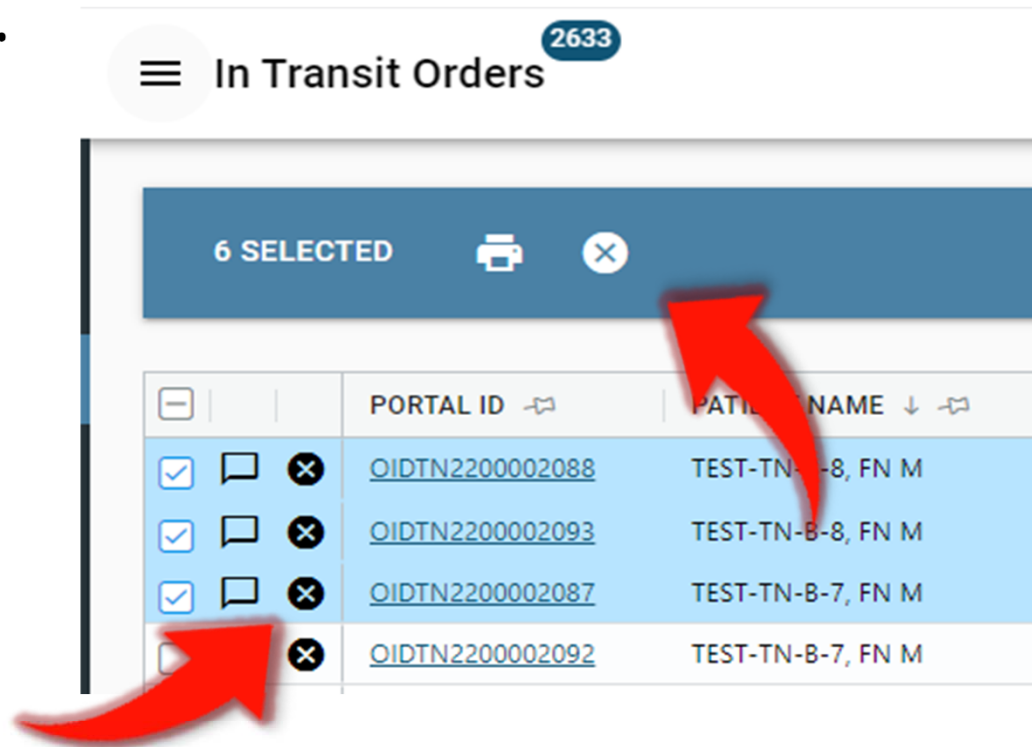
- After closing the warning, the  icon will be displayed next to the entry with errors
 - The fields with errors will be highlighted in red



A screenshot of a web form titled 'Batch Order / [TN] Covid'. The form has a header bar with five buttons: 'ADD ROW' (dark blue), 'COPY LAST', 'REMOVE SELECTED', 'IMPORT FROM FILE', and 'RESET COLUMNS'. Below the buttons is a table with four columns: 'Patient Information', 'Submitter Information', and 'Point of Contact'. The table has two rows. The first row is the header with fields: 'Last Name *', 'First Name', 'Date Of Birth', 'Facility Name *', and 'Point of Contact *'. The second row is a data entry row. The 'Last Name *' field is highlighted in red and contains a red exclamation mark icon. The 'Facility Name *' field is also highlighted in red and contains the text 'Tennessee Dept. of Health Division o'. The 'Point of Contact' field is empty.

Cancelling Orders

- If an order has been placed with errors in the data, highlight the orders to be canceled in the In Transit module.



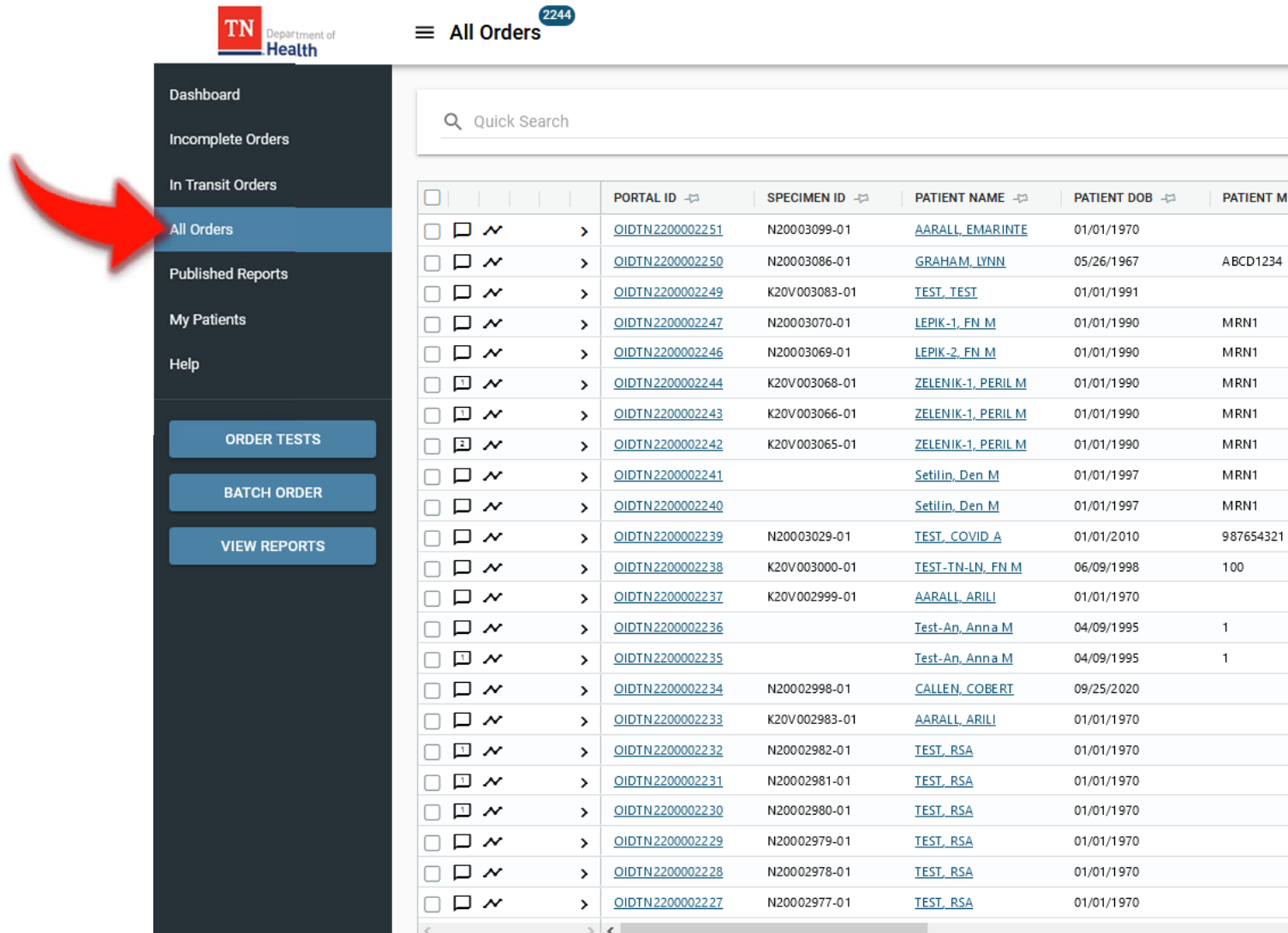
- Click the  button available in the blue ribbon or at the individual orders.



Accessing Orders,
Reports, and Patients

Tracking Order Status

- To see a status of your test order, open **All Orders** grid



TN Department of Health

≡ All Orders ²²⁴⁴

Quick Search

	PORTAL ID	SPECIMEN ID	PATIENT NAME	PATIENT DOB	PATIENT M
<input type="checkbox"/>	OIDTN2200002251	N20003099-01	AARALL, EMARINTE	01/01/1970	
<input type="checkbox"/>	OIDTN2200002250	N20003086-01	GRAHAM, LYNN	05/26/1967	ABCD1234
<input type="checkbox"/>	OIDTN2200002249	K20V003083-01	TEST, TEST	01/01/1991	
<input type="checkbox"/>	OIDTN2200002247	N20003070-01	LEPIK-1, FN M	01/01/1990	MRN1
<input type="checkbox"/>	OIDTN2200002246	N20003069-01	LEPIK-2, FN M	01/01/1990	MRN1
<input type="checkbox"/>	OIDTN2200002244	K20V003068-01	ZELENIK-1, PERIL M	01/01/1990	MRN1
<input type="checkbox"/>	OIDTN2200002243	K20V003066-01	ZELENIK-1, PERIL M	01/01/1990	MRN1
<input type="checkbox"/>	OIDTN2200002242	K20V003065-01	ZELENIK-1, PERIL M	01/01/1990	MRN1
<input type="checkbox"/>	OIDTN2200002241		Setilin, Den M	01/01/1997	MRN1
<input type="checkbox"/>	OIDTN2200002240		Setilin, Den M	01/01/1997	MRN1
<input type="checkbox"/>	OIDTN2200002239	N20003029-01	TEST, COVID A	01/01/2010	987654321
<input type="checkbox"/>	OIDTN2200002238	K20V003000-01	TEST-TN-LN, FN M	06/09/1998	100
<input type="checkbox"/>	OIDTN2200002237	K20V002999-01	AARALL, ARILI	01/01/1970	
<input type="checkbox"/>	OIDTN2200002236		Test-An, Anna M	04/09/1995	1
<input type="checkbox"/>	OIDTN2200002235		Test-An, Anna M	04/09/1995	1
<input type="checkbox"/>	OIDTN2200002234	N20002998-01	CALLEN, COBERT	09/25/2020	
<input type="checkbox"/>	OIDTN2200002233	K20V002983-01	AARALL, ARILI	01/01/1970	
<input type="checkbox"/>	OIDTN2200002232	N20002982-01	TEST, RSA	01/01/1970	
<input type="checkbox"/>	OIDTN2200002231	N20002981-01	TEST, RSA	01/01/1970	
<input type="checkbox"/>	OIDTN2200002230	N20002980-01	TEST, RSA	01/01/1970	
<input type="checkbox"/>	OIDTN2200002229	N20002979-01	TEST, RSA	01/01/1970	
<input type="checkbox"/>	OIDTN2200002228	N20002978-01	TEST, RSA	01/01/1970	
<input type="checkbox"/>	OIDTN2200002227	N20002977-01	TEST, RSA	01/01/1970	

Tracking Order Status

TN Department of Health
All Orders 2244
USER NAME

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS


Quick Search

	DATE COLLECTED ↕	DATE SUBMITTED ↕	FACILITY NAME ↕	SPECIMEN TYPE ↕	STATUS ↕	OUTCOME ↕	DATE RECEIVED ↕
<input type="checkbox"/>	11/05/2020 08:25 am	11/05/2020 08:26 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	InTransit		
<input type="checkbox"/>	11/01/2020 10:45 am	11/02/2020 11:26 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	InTransit		
<input type="checkbox"/>	10/29/2020 12:30 pm	10/29/2020 01:13 pm	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal and oropharyngeal swab	InTransit		
<input type="checkbox"/>	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasa swab	InTransit		
<input type="checkbox"/>	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasa swab	InTransit		
<input type="checkbox"/>	10/24/2020 02:20 pm	10/24/2020 02:23 pm	Tennessee Dept. of Health Division of Lab Services	Nasa swab	Canceled	Not Tested	
<input type="checkbox"/>	10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasa swab	Canceled	Not Tested	
<input type="checkbox"/>	10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasa swab	Canceled	Not Tested	
<input type="checkbox"/>	10/23/2020 03:21 pm	10/28/2020 02:49 pm	Tennessee Dept. of Health Division of Lab Services	Whole Blood	InTransit		
<input type="checkbox"/>	10/23/2020 03:21 pm	10/23/2020 03:25 pm	Tennessee Dept. of Health Division of Lab Services	Whole Blood	InTransit		
<input type="checkbox"/>	10/19/2020 09:17 am	10/19/2020 11:53 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	InTransit		
<input type="checkbox"/>	09/30/2020 12:45 pm	09/30/2020 12:49 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	InTransit		
<input type="checkbox"/>	09/29/2020 05:14 am	09/30/2020 12:19 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	InTransit		
<input type="checkbox"/>	09/30/2020 02:25 am	09/30/2020 02:28 am	Tennessee Dept. of Health Division of Lab Services	Serum	InTransit		
<input type="checkbox"/>	09/30/2020 02:06 am	09/30/2020 02:28 am	Tennessee Dept. of Health Division of Lab Services	Plasma	Canceled		
<input type="checkbox"/>	09/25/2020 05:12 pm	09/25/2020 05:12 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	InTransit		
<input type="checkbox"/>	09/23/2020 03:02 pm	09/25/2020 03:06 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	InTransit		
<input type="checkbox"/>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested	
<input type="checkbox"/>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested	
<input type="checkbox"/>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested	
<input type="checkbox"/>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	InTransit		
<input type="checkbox"/>	09/15/2020 03:46 pm	09/25/2020 09:41 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	InTransit		

⚙️ 🔍
EXPORT Rows per page: 25 1/25

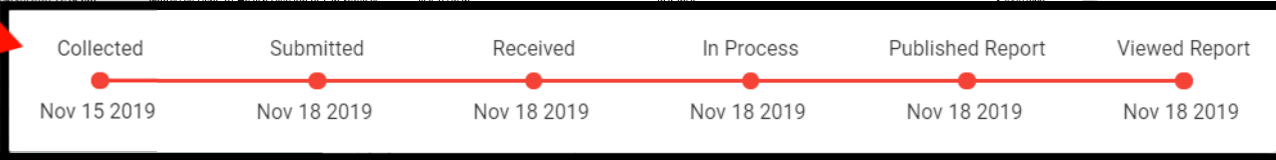
- **Status** column:
 - **InTransit** – order has been submitted but not yet received by the lab
 - **ReceivedInLab** – order has been received in lab but not yet tested
 - **InProcess** – order is being tested by the lab
 - **Released** – testing is done, order is released, results reports published
 - **Canceled** – order is canceled

Tracking Order Status

 **2244** **All Orders** **USER NAME**

Quick Search

			DATE COLLECTED	DATE SUBMITTED	FACILITY NAME	SPECIMEN TYPE	STATUS	OUTCOME	DATE RECEIVED	LIMS ACCESSION ID
<input type="checkbox"/>			11/05/2020 08:25 am	11/05/2020 08:26 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	In Transit			N20003099
<input type="checkbox"/>			11/01/2020 10:45 am	11/02/2020 11:26 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	In Transit			N20003086
<input type="checkbox"/>			10/29/2020 12:30 pm	10/29/2020 01:13 pm	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal and oropharyngeal swab	In Transit			K20003083
<input type="checkbox"/>			10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit			N20003070
<input type="checkbox"/>			10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit			N20003069
<input type="checkbox"/>			10/24/2020 02:20 pm	10/24/2020 02:23 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested		K20003068
<input type="checkbox"/>			10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested		K20003066
<input type="checkbox"/>			10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested		K20003065
<input type="checkbox"/>			10/23/2020 03:21 pm	10/28/2020 02:49 pm	Tennessee Dept. of Health Division of Lab Services	Whole Blood	In Transit			
<input type="checkbox"/>			10/23/2020 03:21 pm	10/23/2020 03:25 pm	Tennessee Dept. of Health Division of Lab Services	Whole Blood	In Transit			
<input type="checkbox"/>			10/19/2020 09:17 am	10/19/2020 11:53 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	In Transit			N20003029
<input type="checkbox"/>			09/30/2020 12:45 pm	09/30/2020 12:49 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit			K20003000
<input type="checkbox"/>			09/30/2020 05:14 am	09/30/2020 12:19 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit			K20003000
<input type="checkbox"/>			09/30/2020 05:12 pm							
<input type="checkbox"/>			09/28/2020 03:02 pm							
<input type="checkbox"/>			09/15/2020 03:46 pm							
<input type="checkbox"/>			09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested		N20002981
<input type="checkbox"/>			09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested		N20002980
<input type="checkbox"/>			09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit			N20002979
<input type="checkbox"/>			09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit			N20002978

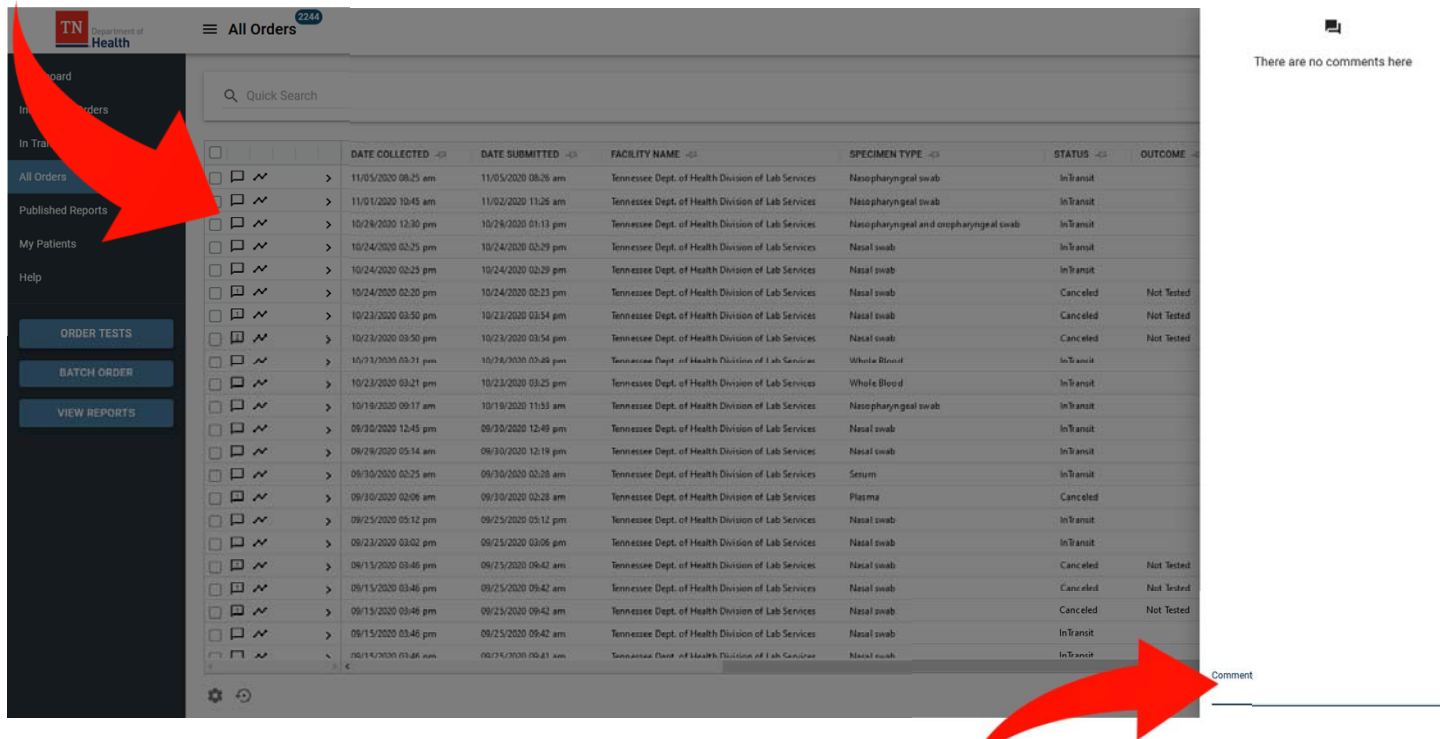


EXPORT Rows per page: 25 1-25 of 2244













































- To view order related events across time, open **All Orders** grid, locate your order and hover over the  icon:


View or Add Comments

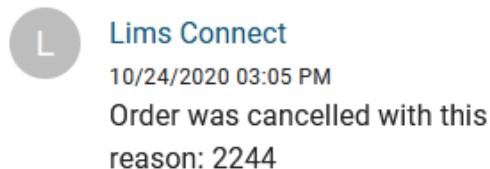
- Click on the  icon to view comments for a specimen



The screenshot shows the Lims Connect interface with a list of lab orders. The interface includes a sidebar with navigation options like 'All Orders', 'Published Reports', 'My Patients', and 'Help'. The main area displays a table of orders with columns for DATE COLLECTED, DATE SUBMITTED, FACILITY NAME, SPECIMEN TYPE, STATUS, and OUTCOME. A red arrow points to the comment icon (a speech bubble with a checkmark) in the first row of the table. Another red arrow points to the comment box at the bottom right of the interface, which is labeled 'Comment'.

			DATE COLLECTED	DATE SUBMITTED	FACILITY NAME	SPECIMEN TYPE	STATUS	OUTCOME	
<input type="checkbox"/>			>	11/05/2020 08:25 am	11/05/2020 08:26 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	In Transit	
<input type="checkbox"/>			>	11/01/2020 10:45 am	11/02/2020 11:26 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	In Transit	
<input type="checkbox"/>			>	10/28/2020 12:30 pm	10/28/2020 01:13 pm	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal and oropharyngeal swab	In Transit	
<input type="checkbox"/>			>	10/24/2020 02:25 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	10/24/2020 02:29 pm	10/24/2020 02:29 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	10/24/2020 02:20 pm	10/24/2020 02:23 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested
<input type="checkbox"/>			>	10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested
<input type="checkbox"/>			>	10/23/2020 03:50 pm	10/23/2020 03:54 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested
<input type="checkbox"/>			>	10/23/2020 03:51 pm	10/28/2020 03:48 pm	Tennessee Dept. of Health Division of Lab Services	Whole Blood	In Transit	
<input type="checkbox"/>			>	10/23/2020 03:21 pm	10/23/2020 03:25 pm	Tennessee Dept. of Health Division of Lab Services	Whole Blood	In Transit	
<input type="checkbox"/>			>	10/19/2020 09:17 am	10/19/2020 11:33 am	Tennessee Dept. of Health Division of Lab Services	Nasopharyngeal swab	In Transit	
<input type="checkbox"/>			>	09/30/2020 12:45 pm	09/30/2020 12:49 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	08/28/2020 05:14 am	09/30/2020 12:18 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	09/30/2020 02:25 am	09/30/2020 02:28 am	Tennessee Dept. of Health Division of Lab Services	Serum	In Transit	
<input type="checkbox"/>			>	09/30/2020 02:06 am	09/30/2020 02:28 am	Tennessee Dept. of Health Division of Lab Services	Plasma	Canceled	
<input type="checkbox"/>			>	09/25/2020 05:12 pm	09/25/2020 05:12 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	09/23/2020 03:02 pm	09/25/2020 03:06 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested
<input type="checkbox"/>			>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested
<input type="checkbox"/>			>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	Canceled	Not Tested
<input type="checkbox"/>			>	09/15/2020 03:46 pm	09/25/2020 09:42 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	
<input type="checkbox"/>			>	10/15/2020 03:46 pm	10/15/2020 03:46 pm	Tennessee Dept. of Health Division of Lab Services	Nasal swab	In Transit	

- Enter comments by typing into the comment box
- Orders with existing comments will show a number in the  icon



The screenshot shows a comment entry in the Lims Connect system. It includes a circular profile picture with the letter 'L', the text 'Lims Connect', the timestamp '10/24/2020 03:05 PM', and the message 'Order was cancelled with this reason: 2244'.

Viewing Reports

- To view new (i.e. unread) published reports, click **VIEW REPORTS** button
- Unviewed reports will be in **bold** text

TN Department of Health

View Reports ⁷

Quick Search

<input type="checkbox"/>		PORTAL ID ↕	SPECIMEN ID ↕	LIMS ACCESSIONING ID ↕	PATIENT NAME ↕	PATIENT DOB ↕	FACILITY NAME ↕		
<input type="checkbox"/>				OIDTN2200000008	N20V000099-01	N20000099	NCOV19, TEST_003 Z	01/12/2000	Tennessee Dept. of
<input type="checkbox"/>				OIDTN2200000009	N20V000100-01	N20000100	NCOV19, TEST_004 Z	09/10/1981	Tennessee Dept. of
<input type="checkbox"/>				OIDTN2200000018	N20V000109-01	N20000109	NCOV19, TEST_013 Z	10/16/1970	Tennessee Dept. of
<input type="checkbox"/>				OIDTN2200000019	N20V000110-01	N20000110	NCOV19, TEST_014 Z	10/16/1970	Tennessee Dept. of
<input type="checkbox"/>				OIDTN2200000025	N20V000120-01	N20000120	NCOV-19, TEST_025 Z	12/12/1980	Tennessee Dept. of
<input type="checkbox"/>				OIDTN2200000026	N20V000121-01	N20000121	NCOV-19, TEST_026 Z	02/12/1981	Tennessee Dept. of
<input type="checkbox"/>				OIDTN2200000028	N20V000123-01	N20000123	NCOV-19, TEST_028 Z	08/21/2001	Tennessee Dept. of

- Click on the icon to download the report.

Downloading Reports


TN Department of Health

View Reports ⁷



Quick Search

		PORTAL ID	SPECIMEN ID	LIMS ACCESSIONING ID	PATIENT NAME	PATIENT DOB	FACILITY NAME
<input type="checkbox"/>		OIDTN2200000008	N20V000099-01	N20000099	NCOV19, TEST_003 Z	01/12/2000	Tennessee Dept. of
<input type="checkbox"/>		OIDTN2200000009	N20V000100-01	N20000100	NCOV19, TEST_004 Z	09/10/1981	Tennessee Dept. of
<input type="checkbox"/>		OIDTN2200000018	N20V				
<input type="checkbox"/>		OIDTN2200000019	N20V				
<input type="checkbox"/>		OIDTN2200000025	N20V				
<input type="checkbox"/>		OIDTN2200000025	N20V				
<input type="checkbox"/>		OIDTN2200000025	N20V				

Download Report

 **OIDTN2200000018-Final.pdf**
Nov 12 2020 12:13 PM **NEW**

CLOSE

- After clicking the  icon, a dialog box will open
- Unopened reports will have a **NEW** and no checkmark  inside the green circle.
 - The type of the report (Final, etc.) will be displayed as a part of the PDF name.
- Once report has been viewed, the order disappears from the View Reports grid and moves to the **Published Reports** grid

Downloading Reports

- Latest report always appears on top
- Click the 🕒 icon to open the report history
 - Provides an audit trail of all actions taken on the report



View Reports ⁷

Quick Search

			PORTAL ID ↕	SPECIMEN ID ↕	LIMS ACCESSIONING ID ↕	PATIENT NAME ↕	PATIENT DOB ↕
<input type="checkbox"/>			OIDTN2200000008	N20V000099-01	N20000099	NCOV19, TEST_003 Z	01/12/2000
<input type="checkbox"/>			OIDTN2200000009	N20V000100-01	N20000100	NCOV19, TEST_004 Z	09/10/1981
<input type="checkbox"/>			OIDTN2200000018	N20V000109-01	N20000109	NCOV19, TEST_013 Z	10/16/1970
<input type="checkbox"/>			OIDTN2200000000				01/16/1970
<input type="checkbox"/>			OIDTN2200000000				2/12/1980
<input type="checkbox"/>			OIDTN2200000000				2/12/1981
<input type="checkbox"/>			OIDTN2200000000				8/21/2001

Download Report

Latest

[OIDTN2200000008-Final.pdf](#)
Nov 12 2020 12:13 PM **NEW**

Previous

[OIDTN2200000008-Final.pdf](#)
Feb 25 2020 04:26 PM

[OIDTN2200000008-Final.pdf](#)
Feb 25 2020 02:51 PM **NEW**

[OIDTN2200000008-Final.pdf](#)
Feb 25 2020 02:51 PM **NEW**

CLOSE

Download Report

Latest

[OIDTN2200000008-Final.pdf](#)
Nov 12 2020 12:13 PM **NEW**

Previous

[OIDTN2200000008-Final.pdf](#)
Feb 25 2020 04:26 PM

User Name	Action	Date
Lims Connect	Viewed	10/26/2020 11:28 AM

[OIDTN2200000008-Final.pdf](#)
Feb 25 2020 02:51 PM **NEW**

[OIDTN2200000008-Final.pdf](#)
Feb 25 2020 02:51 PM **NEW**


CLOSE

Downloading Multiple Reports

- Click the **checkbox** beside the reports you wish to download
- A blue bar will appear above the grid

The screenshot shows the 'View Reports' page in the TN Department of Health system. A sidebar on the left contains navigation links: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. At the bottom of the sidebar are buttons for 'ORDER TESTS', 'BATCH ORDER', and 'VIEW REPORTS'. The main content area is titled 'View Reports' with a notification badge '7'. Below the title is a blue bar indicating '4 SELECTED' reports, with a download icon. A red box highlights the checkboxes in the first column of the report grid, and a red arrow points to the blue bar.

			PORTAL ID ↗	SPECIMEN ID ↗	LIMS ACCESSIONING ID ↗	PATIENT NAME ↗	PATIENT DATE
<input checked="" type="checkbox"/>	✓	PDF	OIDTN2200000008	N20V000099-01	N20000099	NCOV19, TEST_003 Z	01/12/
<input checked="" type="checkbox"/>	✓	PDF	OIDTN2200000009	N20V000100-01	N20000100	NCOV19, TEST_004 Z	09/10/
<input checked="" type="checkbox"/>	✓	PDF	OIDTN2200000018	N20V000109-01	N20000109	NCOV19, TEST_013 Z	10/16/
<input checked="" type="checkbox"/>	✓	PDF	OIDTN2200000019	N20V000110-01	N20000110	NCOV19, TEST_014 Z	10/16/
<input type="checkbox"/>	✓	PDF	OIDTN2200000025	N20V000120-01	N20000120	NCOV-19, TEST_025 Z	12/12/
<input type="checkbox"/>	✓	PDF	OIDTN2200000026	N20V000121-01	N20000121	NCOV-19, TEST_026 Z	02/12/
<input type="checkbox"/>	✓	PDF	OIDTN2200000028	N20V000123-01	N20000123	NCOV-19, TEST_028 Z	08/21/

- Click the download  icon to download multiple reports
- The selected reports will download in a single PDF file

Sending Reports

- Click on the ➤ icon to send a report to the provider

The screenshot shows the TN Department of Health portal interface. On the left is a dark sidebar with navigation links: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are three blue buttons: ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The VIEW REPORTS button is highlighted with a red rectangle. The main content area has a header with the TN Department of Health logo, a 'View Reports' link with a notification badge '1', and a 'Quick Search' bar. Below the search bar is a table of reports. A red arrow points from the 'Send to Physician' icon (a right-pointing arrow) in the report table to a modal window. The modal window is titled 'Send to Physician' and contains the following text: 'If you would like to share this patient report with another physician, please enter his or her email address below. Please note that you are responsible for verifying that the receiver has appropriate rights to see this patient's PHI. This email is not encrypted.' Below the text are three input fields: 'Subject (optional)', 'Emails *', and 'Message'. At the bottom of the modal are 'CLOSE' and 'SUBMIT' buttons.

Send to Physician

If you would like to share this patient report with another physician, please enter his or her email address below. Please note that you are responsible for verifying that the receiver has appropriate rights to see this patient's PHI. This email is not encrypted.

Subject
(optional)

Emails *

Message


(optional)

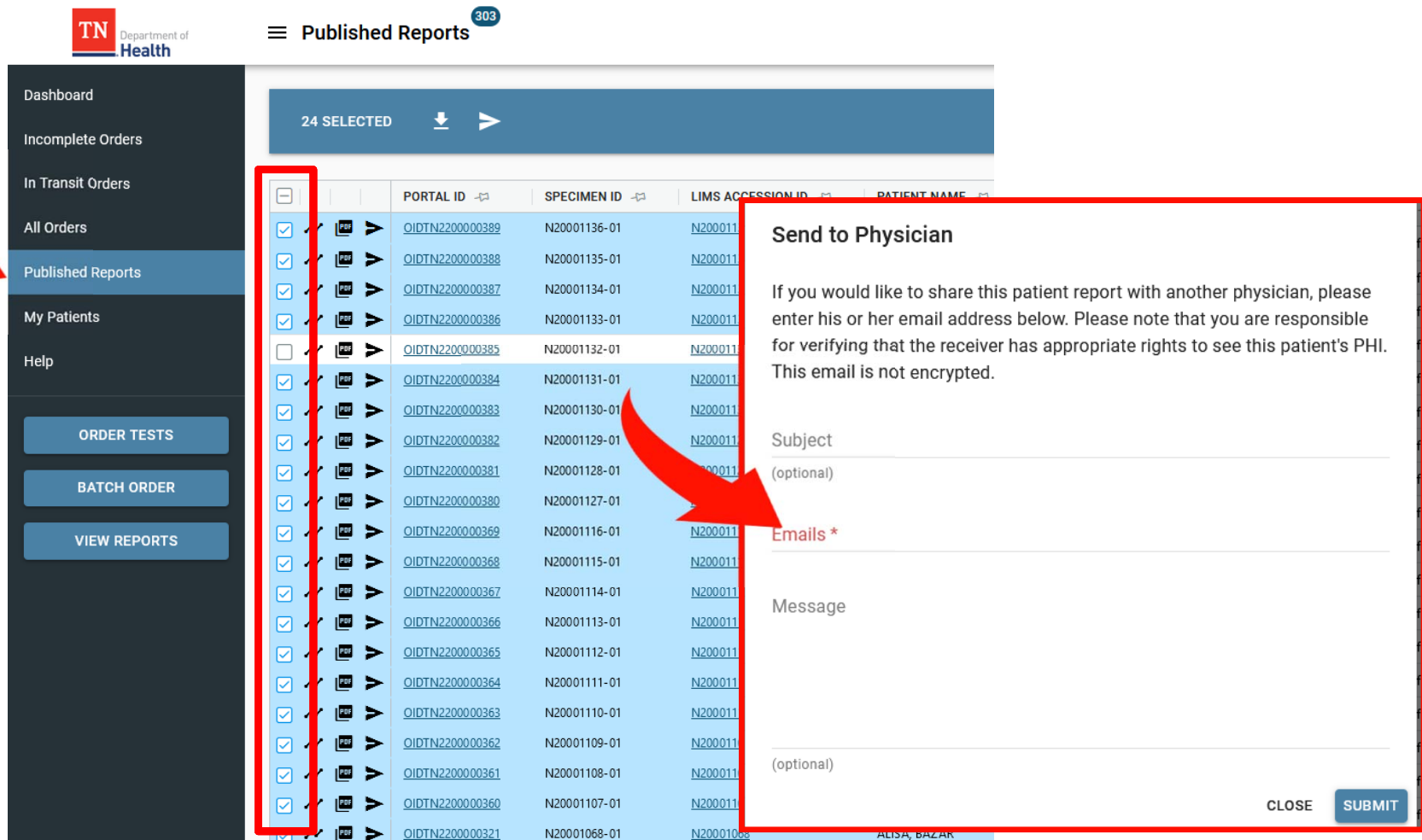
CLOSE SUBMIT

- Populate Subject, Email addresses, Message and click **Submit**.

Note: Recipient will get temporary access to the portal to download the shared report

Sending Multiple Reports

- Navigate to the **Published Reports** page
- Select the checkboxes for the patients you wish to send
- Click the  icon in the blue bar to send multiple reports to the provider



TN Department of Health

Published Reports ³⁰³

24 SELECTED

		PORTAL ID	SPECIMEN ID	LIMS ACCESSION ID	PATIENT NAME
<input checked="" type="checkbox"/>			QIDTN2200000389	N20001136-01	N20001136-01
<input checked="" type="checkbox"/>			QIDTN2200000388	N20001135-01	N20001135-01
<input checked="" type="checkbox"/>			QIDTN2200000387	N20001134-01	N20001134-01
<input checked="" type="checkbox"/>			QIDTN2200000386	N20001133-01	N20001133-01
<input type="checkbox"/>			QIDTN2200000385	N20001132-01	N20001132-01
<input checked="" type="checkbox"/>			QIDTN2200000384	N20001131-01	N20001131-01
<input checked="" type="checkbox"/>			QIDTN2200000383	N20001130-01	N20001130-01
<input checked="" type="checkbox"/>			QIDTN2200000382	N20001129-01	N20001129-01
<input checked="" type="checkbox"/>			QIDTN2200000381	N20001128-01	N20001128-01
<input checked="" type="checkbox"/>			QIDTN2200000380	N20001127-01	N20001127-01
<input checked="" type="checkbox"/>			QIDTN2200000369	N20001116-01	N20001116-01
<input checked="" type="checkbox"/>			QIDTN2200000368	N20001115-01	N20001115-01
<input checked="" type="checkbox"/>			QIDTN2200000367	N20001114-01	N20001114-01
<input checked="" type="checkbox"/>			QIDTN2200000366	N20001113-01	N20001113-01
<input checked="" type="checkbox"/>			QIDTN2200000365	N20001112-01	N20001112-01
<input checked="" type="checkbox"/>			QIDTN2200000364	N20001111-01	N20001111-01
<input checked="" type="checkbox"/>			QIDTN2200000363	N20001110-01	N20001110-01
<input checked="" type="checkbox"/>			QIDTN2200000362	N20001109-01	N20001109-01
<input checked="" type="checkbox"/>			QIDTN2200000361	N20001108-01	N20001108-01
<input checked="" type="checkbox"/>			QIDTN2200000360	N20001107-01	N20001107-01
<input checked="" type="checkbox"/>			QIDTN2200000321	N20001068-01	N20001068-01

Send to Physician

If you would like to share this patient report with another physician, please enter his or her email address below. Please note that you are responsible for verifying that the receiver has appropriate rights to see this patient's PHI. This email is not encrypted.

Subject

(optional)

Emails *

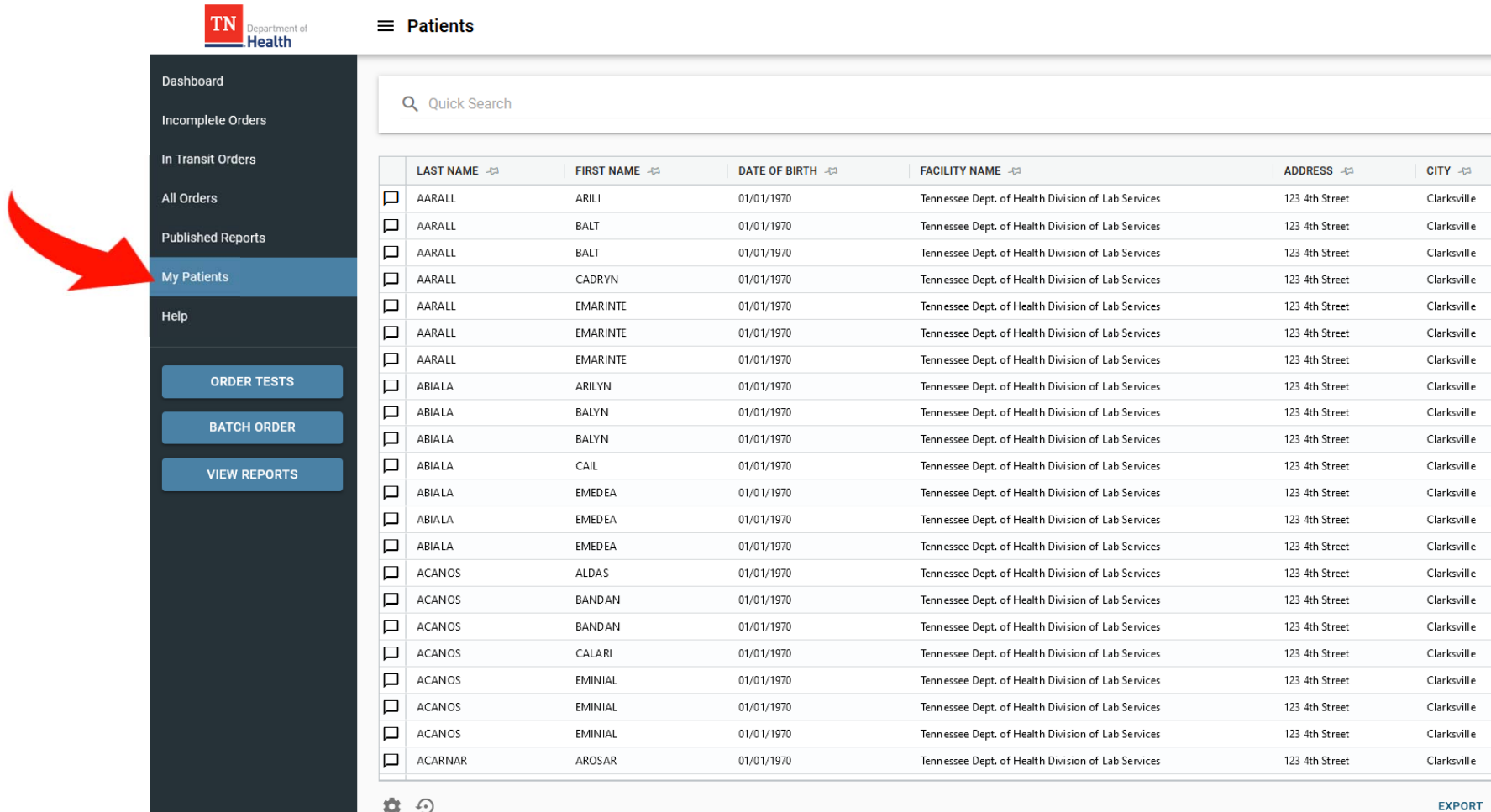
Message

(optional)

CLOSE SUBMIT

My Patients

- Click on **My Patients** link in the navigation bar to access your patients



TN Department of Health

≡ Patients

Quick Search

	LAST NAME ↕	FIRST NAME ↕	DATE OF BIRTH ↕	FACILITY NAME ↕	ADDRESS ↕	CITY ↕
☐	AARALL	ARILI	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	AARALL	BALT	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	AARALL	BALT	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	AARALL	CADRYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	AARALL	EMARINTE	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	AARALL	EMARINTE	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	AARALL	EMARINTE	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	ARILYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	BALYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	BALYN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	CAIL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	EMEDEA	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	EMEDEA	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ABIALA	EMEDEA	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	ALDAS	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	BANDAN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	BANDAN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	CALARI	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	EMINIAL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	EMINIAL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACANOS	EMINIAL	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville
☐	ACARNAR	AROSAR	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksville

ORDER TESTS
BATCH ORDER
VIEW REPORTS

EXPORT

Note: Patient page can also be accessed from **All Orders** grid by clicking on a Patient Name

Edit Patient Information

- Click on the patient in the data grid to view patient demographics

The screenshot displays the 'Patients' section of the TN Department of Health system. On the left is a dark sidebar with navigation links: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are buttons for ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The main area features a 'Quick Search' bar and a data grid with columns: LAST NAME, FIRST NAME, DATE OF BIRTH, FACILITY NAME, ADDRESS, and CITY. A patient named 'AGRAE, ALAR' is selected, and a red arrow points from their row to a detailed 'Patient' form. This form has tabs for 'DEMOGRAPHICS' (selected) and 'ORDERS'. The 'DEMOGRAPHICS' tab contains fields for Last Name (AGRAE), First Name (ALAR), Middle Initial, Date of Birth (01/01/1970), Phone Number ((615) 837-5472), Address (123 4th Street), State (TN), Zip Code (37040), County of Residence (Montgomery), Gender (Ambiguous), Pregnant (No), Race (Other Race), Ethnicity (Not Hispanic or Latino), and Medical Record Number. An 'EDIT' button is located at the bottom right of the form.

LAST NAME	FIRST NAME	DATE OF BIRTH	FACILITY NAME	ADDRESS	CITY
ADJUS	BANIN	01/01/1970	Tennessee Dept. of Health Division of Lab Services	123 4th Street	Clarksv
ADJUS					
ADJUS					
AGRAE					
AGRAE					
AGRAE					
AGRAE					
AGRAE					
AITESE					
AITESE					
AITESE					
AITESE					
AITESE					
AITESE					
AITESE					
ALANE					
ALANE					
ALANE					
ALAR					
ALAR					
ALAR					
ALARIL					

To edit patient demographics, click **EDIT**

View Patient Orders

- From the Patient Demographic page, click on the **ORDERS** tab to view all orders for the selected patient

The screenshot shows the TN Department of Health Patient Demographics page. The left sidebar contains navigation links: Dashboard, Incomplete Orders, In Transit Orders, All Orders, Published Reports, My Patients, and Help. Below these are buttons for ORDER TESTS, BATCH ORDER, and VIEW REPORTS. The main content area has tabs for DEMOGRAPHICS and ORDERS. The ORDERS tab is highlighted with a red box. A red arrow points from the ORDERS tab to a red box around the patient information section. The patient information section includes fields for Last Name (AGRAE), First Name (ALAR), Middle Initial, Date Of Birth (01/01/1970), Address (123 Street), City (Clarksville), County of Residence (Montgomery), Gender (Female), Pregnant (No), Race (Asian), and Ethnicity (Hispanic or Latino). Below this is a table of orders with columns: PORTAL ID, STATUS, SPECIMEN ID, DATE COLLECTED, DATE SUBMITTED, FACILITY NAME, and SPECIMEN TYPE. The table contains one row with the following data: PORTAL ID: QIDTN2200001124, STATUS: InTransit, SPECIMEN ID: N20001873-01, DATE COLLECTED: 09/15/2020 03:46 pm, DATE SUBMITTED: 09/22/2020 10:20 am, FACILITY NAME: Tennessee Dept. of Health Division of Lab Services, and SPECIMEN TYPE: Nasal swab. The bottom right corner of the page features the TN logo.

TN Department of Health

≡ Patient

USER NAME

DEMOGRAPHICS **ORDERS**

Last Name: AGRAE First Name: ALAR Middle Initial:

Date Of Birth: 01/01/1970

Address: 123 Street

City: Clarksville

County of Residence: Montgomery

Gender: ☐ Female ☐ Male

Pregnant: ☐ Yes ☒ No ☐

Race: ☐ Asian ☐ Black or African American

Ethnicity: ☐ Hispanic or Latino

Medical Record Number:

Dashboard

Incomplete Orders

In Transit Orders

All Orders

Published Reports

My Patients

Help

ORDER TESTS

BATCH ORDER

VIEW REPORTS

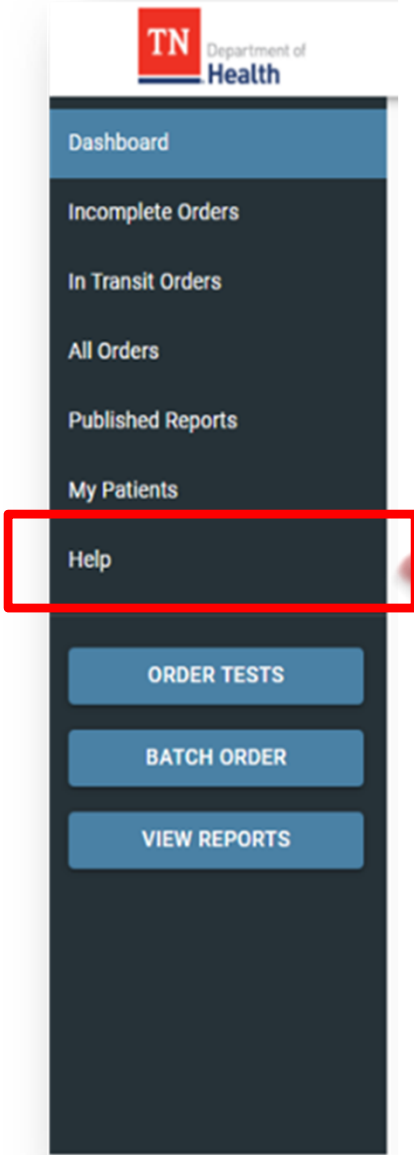
Quick Search

	PORTAL ID	STATUS	SPECIMEN ID	DATE COLLECTED	DATE SUBMITTED	FACILITY NAME	SPECIMEN TYPE	DATE
<input type="checkbox"/>	QIDTN2200001124	InTransit	N20001873-01	09/15/2020 03:46 pm	09/22/2020 10:20 am	Tennessee Dept. of Health Division of Lab Services	Nasal swab	

EXPORT Rows per

TN

Lab Web Portal Help



Use the Help button on the dashboard to view portal help

Contact TN Primary Technical Support
1-615-837-5473