



DB Labs, LLC
522 East Main St. Edmore MI, 48829
Phone: 1-989-304-3310 Fax: 1-989-427-0364

FOR OFFICE USE ONLY
Client #: _____
Profile Code: _____
Web Portal: _____
User ID: _____
Password: _____

New Account Form

Please Print Legibly!

Please Select One or Both: [] Toxicology [] Pharmacogenetics

ACCOUNT INFORMATION

Date _____

Company Name: _____

Company Address: _____

City, State: _____ Zip Code: _____

Phone #: _____ Fax #: _____

Normal Work Hours: _____

Known Holidays Closed: _____

Weekly Estimated Sample Volume: _____

Do you currently have a daily sample pick-up with UPS? [] Yes [] No

If yes, what time is the scheduled UPS pick-up? _____

If no, what time would you prefer the daily sample pick-up to be? _____

CONTACTS

Contact(s): _____ Phone #: _____ Email: _____

Lab Contact: _____ Phone #: _____ Email: _____

PHYSICIAN OFFICE SCREENING METHODOLOGY

[] POCT Cups [] Immunoassay

Does your office bill for this test? [] Yes [] No

REPORT DELIVERY PROCESS

How would you prefer the report? Please check all that apply:

[] Fax [] Web Portal [] Hardcopy via Regular Mail

CUSTOM PROFILE

Would you like to create a custom test profile?

[] Yes [] No If yes, please complete the Custom Profile Form.

For DB Laboratory Services and Consulting, LLC internal use only:

Acct Rep: _____ Date Acct Starts: _____ Date UPS Scheduled: _____ Date Supp. Ordered: _____



Company Name _____

PHYSICIAN INFORMATION

Dr. Name (M.D., D.O., P.A. CRNP): _____ NPI #: _____

Signature: _____ Phone #: _____

Physician's Nurse Contact: _____ Phone #: _____

Dr. Name (M.D., D.O., P.A. CRNP): _____ NPI #: _____

Signature: _____ Phone #: _____

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