



2023 AAB-MLE PROFICIENCY TESTING ORDER FORM

1. ☐ New Enrollee
☐ Renewal: AAB-MLE ID# _____

2. **Billing Address (for delivery of invoices and statements if different from shipping address)**

Institution: _____

Mail Address: _____

City/State/Zip: _____

Billing Phone: _____

Email: _____

3. **Certification / Accreditation**

Lab Director: _____

CLIA Number: _____

COLA ID #: _____

CAP/LAP #: _____

New York State ID# _____

State ID# _____

4. **Shipping address (for delivery of testing material, physical street address required, no PO boxes)**

☐ Same as billing address

Name (Contact): _____

Institution: _____

Address: _____

City/State/Zip: _____

Country (other than US): _____

Phone: _____ Fax: _____

Email: _____

5. **Mailing Address (for delivery of correspondence such as graded reports if different from shipping address)**

☐ Same as billing address

Mailing Address: _____

City/State/Zip: _____

6. **Payment Options**

☐ Purchase Order #: _____

☐ Check (enclosed)

☐ Credit Card Type: ☐ Visa ☐ Mastercard

☐ American Express ☐ Discover

Card number: _____

Exp date: _____ Security Code: _____

Billing Zip: _____

Payment is due net 30 days. Overdue accounts are subject to holds and/or cancellations.

7. **How did you hear about us?**

8. **Laboratory Type:**

The AAB-MLE products you have ordered may contain pathogenic and biohazardous material. By returning this order form you assume all risk and responsibility in connection with the receipt, handling, storage, use and disposal of the materials.

Please note: You must cancel a module IN WRITING at least 4 weeks prior to the upcoming shipment to avoid being charged.

Email mle@aab-mle.org

Ph. 800-234-5315 Fax 713-781-5008

Institution Name: _____

2023 AAB-MLE Order Form

CLIA #: _____

2023 Programs Order Form Prorate 2 Events

Cat #	Program Module Description	X	Price	Total
Point of Care Waived Tests				
542	Fecal Occult Blood		\$92	
537	Fecal Occult Blood - Add-On (with 530, 531 only)		\$66	
543	Gastric Occult Blood		\$130	
538	KOH Slides		\$128	
534	Provider Performed Microscopy (PPM)		\$100	
535	PPM - Add-On		\$34	
531	Urinalysis Dipstick		\$80	
530	Urinalysis Module		\$96	
547	Urine Eosinophils		\$54	
541	Urine hCG		\$70	
540	Urine hCG - Add-On (with 530, 531 only)		\$22	
539	Urine Microalbumin/Creatinine		\$94	
536	Urine Microalbumin/Creatinine - Add-On (with 530, 531 only)		\$66	
550	Urine Pregnancy - 2 vial		\$86	
532	Urine Sediment Identification		\$90	
533	Urine Sediment Identification - Add-On (with 534 only)		\$26	
Chemistry				
876	Adulterated Urine		\$136	
874	Adulterated Urine - Add-On (with 868 only)		\$66	
851	Afinion Glycohemoglobin		\$156	
836	Ammonia		\$126	
847	Blood Gases (2 sets)		\$246	
838	Blood Lead - Waived		\$158	
856	Blood Oximetry		\$254	
846	BNP/D-Dimer		\$172	
845	Cardiac Markers		\$254	
810	Chemistry Module		\$268	
813	Comprehensive Metabolic Profile		\$212	
860	Endocrinology 1		\$174	
863	Endocrinology 2		\$152	
873	Ethyl Glucuronide - Add-On (with 868 only)		\$54	
858	Fertility Testing		\$114	
875	Fluids Chemistry		\$172	
850	Glycohemoglobin		\$146	
852	Glycohemoglobin - 5-vial		\$258	
828	Iron Binding Capacity		\$110	
818	i-STAT Chemistry		\$192	
832	i-STAT Chemistry - Waived		\$136	
811	Lipid Panel/Glucose - Waived		\$134	
829	Lipid Profile		\$164	
841	Neonatal/Direct Bilirubin		\$162	
869	p2PSA		\$152	
861	PSA		\$108	
859	PSA - Add-On (with 860 only)		\$48	
835	Serum Alcohol/Ketones		\$176	
865	Serum hCG		\$138	
866	Serum hCG - Add-On (with 810, 813, 817, 818, 824 only)		\$68	
854	SHBG/Testosterone		\$240	
COLUMN 1			Subtotal	

Deadline for Enrollment - May 8, 2023

Cat #	Program Module Description	X	Price	Total
Chemistry - continued				
830	Therapeutic Drug Monitoring		\$158	
831	Therapeutic Drug Monitoring - Add-On (with 810 only)		\$46	
864	Thyroid Antibodies		\$182	
824	Thyroid Profile		\$182	
844	Total Protein		\$164	
862	Tumor Markers		\$266	
872	Urine Chemistry		\$174	
868	Urine Drug Screen		\$170	
812	Waived Chemistry Panel		\$162	
833	Waived Chemistry Panel - Add-On (with 824 only)		\$56	
870	Whole Blood Glucose		\$196	
871	Whole Blood Glucose - Waived		\$126	
Hematology				
231	Blood Cell Identification		\$96	
230	Blood Cell Identification - Add-On (with 223 through 229)		\$34	
250	Fluid Cell Count / Crystals		\$182	
224	Hematology - Sysmex 3-Part Diff		\$220	
210	Hematology Module		\$196	
225	Hematology with 3-Part Diff		\$214	
229	Hematology with 5 or 6-Part Diff - Sysmex		\$248	
226	Hematology with 5-Part Diff		\$248	
223	Hematology with 5-Part Diff - Abbott Cell Dyn		\$248	
228	Hematology with 5-Part Diff - AcT 5 and Pentra		\$248	
227	Hematology with 5-Part Diff - DxH 500 Series		\$248	
215	Hemoglobin/Glucose - HemoCue		\$130	
213	Hemoglobin/Hematocrit - Waived		\$124	
212	Hemoglobin/Hematocrit/WBC		\$166	
248	Rapid Sedimentation Rate		\$130	
240	Reticulocyte Count		\$170	
247	Sedimentation Rate		\$130	
249	Sickle Cell Screen		\$140	
Coagulation				
332	Activated Clotting Time		\$188	
330	CoaguChek XS Plus Prothrombin Time		\$226	
331	CoaguChek XS Plus Prothrombin Time - Waived		\$146	
320	Coagulation Module		\$160	
328	i-STAT Prothrombin Time		\$246	
324	Roche CoaguChek XS INR - Waived		\$146	
Immunohematology				
451	ABO & Rh Typing		\$206	
452	Blood Bank 1		\$276	
453	Blood Bank 2		\$296	
450	D (Rh) Typing		\$118	
454	Direct Antiglobulin Test		\$156	
COLUMN 2			Subtotal	

Institution Name: _____

2023 AAB-MLE Order Form

CLIA #: _____

2023 Programs Order Form Prorate 2 Events

Cat #	Program Module Description	X	Price	Total
Immunology/Serology				
782	ANA Panel		\$200	
783	ANA Panel - Add-On (with 750, 751 only)		\$154	
764	C-Reactive Protein		\$88	
776	C-Reactive Protein - Add-On (with 750 only)		\$44	
773	Diagnostic Allergy		\$258	
780	H. pylori Antibody Detection		\$120	
765	High Sensitivity C-Reactive Protein		\$96	
777	High Sensitivity C-Reactive Protein - Add-On (with 750, 751 only)		\$48	
791	HIV Markers		\$206	
790	HIV Markers - Waived		\$128	
750	Immunology Module		\$234	
784	Immunoproteins		\$166	
761	Infectious Mono/Rheumatoid Factor		\$220	
762	Infectious Mononucleosis		\$142	
755	Infectious Mononucleosis - Waived		\$90	
781	Mycoplasma Antibody		\$120	
793	Oral Fluid HIV Antibodies		\$264	
763	Rheumatoid Factor		\$142	
751	Rheumatology Module		\$176	
771	Rubella		\$142	
792	SARS-CoV-2 Serology		\$210	
770	Specific Allergen Testing		\$258	
772	Syphilis Serology		\$156	
752	ToRCH - M3 only		\$147	
775	Viral Markers		\$330	
Microbiology - Cultures				
630	Bacteriology 1		\$242	
640	Bacteriology 2		\$232	
678	Dermatophyte Culture		\$198	
646	Genital Culture		\$222	
653	Genital/Urine Culture		\$224	
651	Miscellaneous Cultures - Add-On (with 640 - 647, 652 or 653 only)		\$132	
695	MRSA Culture		\$208	
696	MRSA Culture - Add-On (with any 5 challenge culture or antigen)		\$112	
694	Supplemental Blood Culture		\$106	
641	Throat Culture		\$222	
648	Urine Colony Count		\$170	
643	Urine Culture		\$222	
647	Urine Presumptive ID/Colony Count		\$262	
652	Urine Presumptive ID/Throat Culture		\$254	
645	Urine/Throat Culture		\$224	
Microbiology - Staining				
679	Acid-Fast Smears - M3 only		\$112	
650	Gram Stain		\$140	
COLUMN 3				
			Subtotal	

Deadline for Enrollment - May 8, 2023

Cat #	Program Module Description	X	Price	Total
Microbiology - Antigen Testing				
682	C. difficile/Rotavirus Antigen Detection		\$208	
675	Chlamydia/GC/Strep B Antigen Screen		\$266	
673	Chlamydia/GC/Strep B - Add-on (with 640 - 647, 652 or 653 only)		\$132	
683	Cryptosporidium/Giardia lamblia Antigen Detection		\$240	
686	Legionella Antigen Detection		\$180	
692	OSOM Bacterial Vaginosis - Waived		\$134	
665	Rapid Urease (CLO)		\$116	
681	Respiratory Antigen Detection		\$224	
680	Respiratory Antigen Detection - Waived		\$150	
688	SARS-CoV-2 Antigen Detection		\$224	
689	SARS-CoV-2 Molecular Detection		\$230	
684	Shiga Toxin		\$176	
660	Strep A Antigen Detection		\$140	
662	Strep A Antigen Detection - Waived		\$88	
687	Streptococcus pneumoniae Antigen Detection		\$184	
693	Tricomonas vaginalis - Waived		\$134	
668	Vaginosis Screen		\$282	
Parasitology				
691	Parasitology		\$250	
690	PVA Slides - Add-On		\$132	
Andrology, Embryology & Fetal Tests Full Year				
978	Antisperm Antibodies		\$284	
984	Embryo Grading		\$318	
983	Fetal Fibronectin (fFN)		\$424	
975	Fetal Membrane Rupture		\$384	
976	IVF Embryology Culture Media		\$492	
977	Preimplantation Genetic Testing - Aneuploidy		\$952	
979	Sperm Count, Qualitative/Post-vasectomy		\$274	
980	Sperm Count, for Quantitative and Qualitative		\$308	
981	Sperm Morphology		\$308	
985	Sperm Motility		\$320	
982	Sperm Viability		\$308	
Specialty PPM and POC				
902	Basic Waived and PPM Package		\$204	
901	Waived and PPM Package		\$234	
903	Whole Blood Glucose, EQAS (Multi-Site)		\$162	
COLUMN 4			Subtotal	
COLUMN 3			Subtotal	
COLUMN 2			Subtotal	
COLUMN 1			Subtotal	
Total Program Order				
Annual Registration				\$90
Single Program Surcharge				If applicable \$40
Non Continental US Shipping Charge				If applicable \$60
Total Payment Due				