



2024 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# _____

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.

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

7. **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.

Institution Name: _____

CLIA #: _____

2024 Programs Order Form

Cat #	Program Module Description	X	Price	Total
Point of Care Waived Tests				
542	Fecal Occult Blood		\$144	
537	Fecal Occult Blood - Add-On (with 530, 531 only)		\$105	
543	Gastric Occult Blood		\$204	
538	KOH Slides		\$201	
534	Provider Performed Microscopy (PPM)		\$159	
535	PPM - Add-On		\$54	
531	Urinalysis Dipstick		\$126	
530	Urinalysis Module		\$150	
541	Urine hCG		\$111	
540	Urine hCG - Add-On (with 530, 531 only)		\$36	
539	Urine Microalbumin/Creatinine		\$150	
536	Urine Microalbumin/Creatinine - Add-On (with 530, 531 only)		\$105	
550	Urine Pregnancy - 2 vial		\$141	
532	Urine Sediment Identification		\$141	
533	Urine Sediment Identification - Add-On (with 534 only)		\$42	
Chemistry				
874	Adulterated Urine - Add-On (with 868 only)		\$105	
851	Afinion Glycohemoglobin		\$243	
836	Ammonia		\$195	
847	Blood Gases (2 sets)		\$384	
838	Blood Lead - Waived		\$249	
846	BNP/D-Dimer		\$270	
845	Cardiac Markers		\$399	
810	Chemistry Module		\$414	
813	Comprehensive Metabolic Profile		\$327	
860	Endocrinology 1		\$270	
863	Endocrinology 2		\$237	
873	Ethyl Glucuronide - Add-On (with 868 only)		\$87	
858	Fertility Testing		\$180	
875	Fluids Chemistry		\$267	
850	Glycohemoglobin		\$228	
852	Glycohemoglobin - 5-vial		\$399	
828	Iron Binding Capacity		\$174	
818	i-STAT Chemistry		\$300	
832	i-STAT Chemistry - Waived		\$210	
811	Lipid Panel/Glucose - Waived		\$210	
829	Lipid Profile		\$258	
841	Neonatal/Direct Bilirubin		\$252	
861	PSA		\$168	
859	PSA - Add-On (with 860 only)		\$78	
835	Serum Alcohol/Ketones		\$276	
865	Serum hCG		\$216	
866	Serum hCG - Add-On (with 810, 813, 817, 818, 824 only)		\$108	
854	SHBG/Testosterone		\$369	
COLUMN 1			Subtotal	

2024 Programs Order Form

Cat #	Program Module Description	X	Price	Total
Chemistry - continued				
830	Therapeutic Drug Monitoring		\$249	
831	Therapeutic Drug Monitoring - Add-On (with 810 only)		\$69	
864	Thyroid Antibodies		\$282	
824	Thyroid Profile		\$285	
844	Total Protein		\$258	
862	Tumor Markers		\$411	
872	Urine Chemistry		\$270	
868	Urine Drug Screen		\$267	
812	Waived Chemistry Panel		\$255	
833	Waived Chemistry Panel - Add-On (with 824 only)		\$84	
870	Whole Blood Glucose		\$309	
871	Whole Blood Glucose - Waived		\$198	
Hematology				
231	Blood Cell Identification		\$150	
230	Blood Cell Identification - Add-On (with 223 through 229)		\$54	
224	Hematology - Sysmex 3-Part Diff		\$339	
225	Hematology with 3-Part Diff		\$330	
229	Hematology with 5 or 6-Part Diff - Sysmex		\$381	
226	Hematology with 5-Part Diff		\$381	
223	Hematology with 5-Part Diff - Abbott Cell Dyn		\$381	
228	Hematology with 5-Part Diff - AcT 5 and Pentra		\$381	
227	Hematology with 5-Part Diff - DxH 500 Series		\$381	
215	Hemoglobin/Glucose - HemoCue		\$204	
213	Hemoglobin/Hematocrit - Waived		\$192	
212	Hemoglobin/Hematocrit/WBC		\$255	
248	Rapid Sedimentation Rate		\$201	
240	Reticulocyte Count		\$261	
247	Sedimentation Rate		\$201	
249	Sickle Cell Screen		\$216	
Coagulation				
332	Activated Clotting Time		\$294	
330	CoaguChek XS Plus Prothrombin Time		\$354	
331	CoaguChek XS Plus Prothrombin Time - Waived		\$231	
320	Coagulation Module		\$252	
328	i-STAT Prothrombin Time		\$384	
324	Roche CoaguChek XS INR - Waived		\$231	
Immunohematology				
451	ABO & Rh Typing		\$324	
452	Blood Bank 1		\$435	
453	Blood Bank 2		\$465	
450	D (Rh) Typing		\$189	
454	Direct Antiglobulin Test		\$246	
COLUMN 2			Subtotal	

Institution Name: _____

CLIA #: _____

2024 Programs Order Form

Cat #	Program Module Description	X	Price	Total
Immunology/Serology				
782	ANA Panel		\$315	
783	ANA Panel - Add-On (with 750, 751 only)		\$243	
753	Anti-Streptolysin O Add-on (with 751 only)		\$93	
764	C-Reactive Protein		\$138	
776	C-Reactive Protein - Add-On (with 750 only)		\$72	
773	Diagnostic Allergy		\$399	
780	H. pylori Antibody Detection		\$186	
765	High Sensitivity C-Reactive Protein		\$150	
777	High Sensitivity C-Reactive Protein - Add-On (with 750, 751 only)		\$78	
791	HIV Markers		\$318	
790	HIV Markers - Waived		\$201	
750	Immunology Module		\$375	
784	Immunoproteins		\$264	
761	Infectious Mono/Rheumatoid Factor		\$345	
762	Infectious Mononucleosis		\$222	
755	Infectious Mononucleosis - Waived		\$141	
781	Mycoplasma Antibody		\$192	
793	Oral Fluid HIV Antibodies		\$402	
763	Rheumatoid Factor		\$222	
751	Rheumatology Module		\$276	
771	Rubella		\$222	
792	SARS-CoV-2 Serology		\$324	
770	Specific Allergen Testing		\$399	
772	Syphilis Serology		\$243	
752	ToRCH		\$310	
775	Viral Markers		\$510	
Microbiology - Cultures				
630	Bacteriology 1		\$381	
640	Bacteriology 2		\$366	
678	Dermatophyte Culture		\$312	
646	Genital Culture		\$348	
651	Miscellaneous Cultures - Add-On (with 640 - 647 only)		\$207	
695	MRSA Culture		\$327	
696	MRSA Culture - Add-On (with any 5 challenge culture or antigen)		\$174	
694	Supplemental Blood Culture		\$171	
641	Throat Culture		\$348	
648	Urine Colony Count		\$264	
643	Urine Culture		\$348	
645	Urine/Throat Culture		\$351	
Microbiology - Staining				
679	Acid-Fast Smears		\$236	
650	Gram Stain		\$252	
COLUMN 3			Subtotal	

2024 Programs Order Form

Cat #	Program Module Description	X	Price	Total
Microbiology - Antigen Testing				
682	C. difficile/Rotavirus Antigen Detection		\$333	
675	Chlamydia/GC/Strep B Antigen Screen		\$414	
673	Chlamydia/GC/Strep B - Add-on (with 640 - 647 only)		\$207	
683	Cryptosporidium/Giardia lamblia Antigen Detection		\$369	
686	Legionella Antigen Detection		\$282	
692	OSOM Bacterial Vaginosis - Waived		\$210	
665	Rapid Urease (CLO)		\$183	
681	Respiratory Antigen Detection		\$345	
680	Respiratory Antigen Detection - Waived		\$234	
688	SARS-CoV-2 Antigen Detection		\$345	
689	SARS-CoV-2 Molecular Detection		\$354	
684	Shiga Toxin		\$264	
660	Strep A Antigen Detection		\$219	
662	Strep A Antigen Detection - Waived		\$138	
687	Streptococcus pneumoniae Antigen Detection		\$288	
693	Tricomonas vaginalis - Waived		\$210	
668	Vaginosis Screen		\$441	
Parasitology				
691	Parasitology		\$399	
690	PVA Slides - Add-On		\$207	
Andrology, Embryology & Fetal Tests				
978	Antisperm Antibodies		\$298	
984	Embryo Grading		\$334	
983	Fetal Fibronectin (fFN)		\$446	
975	Fetal Membrane Rupture		\$404	
976	IVF Embryology Culture Media		\$516	
977	Preimplantation Genetic Testing - Aneuploidy		\$980	
979	Sperm Count, Qualitative/Post-vasectomy		\$288	
980	Sperm Count, for Quantitative and Qualitative		\$324	
981	Sperm Morphology		\$324	
985	Sperm Motility		\$336	
982	Sperm Viability		\$324	
Specialty PPM and POC				
902	Basic Waived and PPM Package		\$321	
901	Waived and PPM Package		\$366	
903	Whole Blood Glucose, EQAS (Multi-Site)		\$255	
COLUMN 4			Subtotal	
COLUMN 3			Subtotal	
COLUMN 2			Subtotal	
COLUMN 1			Subtotal	
Total Program Order				
			Annual Registration	\$90
			Single Program Surcharge	<i>If applicable</i> \$60
			Non Continental US Shipping Charge	<i>If applicable</i> \$90
			Total Payment Due	