BARTONELLA ePCR™
SPECIMEN KIT ORDER FORM

*Testing is not yet available in **NY and CA.***

GALAXY*diagnostics*
Human Health Division
7030 Kit Creek Rd, Suite 270
Research Triangle Park, NC 27709
T: 919-313-9672| F: 919-287-2476
www.galaxydx.com | contact@galaxydx.com

Account #_____

Please limit your first kit order to **5 kits total**.

Physician Account Information

Clinic Name and Address	Physician Name	
	Contact Name	
NPI#:	Phone	Fax

Kits Requested

Kit Type	Description	# Required
Single Blood Draw	Includes required forms and materials for single blood draw: 1 EDTA tube (purple top) and1 SST tubes (yellow top).	
Triple Blood Draw	Includes required forms and materials for triple blood draw: 3 EDTA tube (purple top) and 3 SST tubes (yellow top).	
Tissue and other fluids	Includes required forms and shipping materials for tissue, CSF, joint fluids, and effusions, etc.	

Shipping Address

Shipping Address	Phone
	Email

EMAIL OR FAX ORDERS | EXPECT DELIVERY WITHIN 7 BUSINESS DAYS