HART

TEST REQUISITION FORM

ACCOUNT INFORMATION

Clinic Name

Street Address

City	State	Zip code

Phone Number	Fax Number

Clinic Contact

Contact Email

PATIENT INFORMATION

Patient Last Name	Patient First Name

Date of Birth	Sex ☐ Male ☐ Female

Street Address

City	State	Zip code

Phone Number	Email Address

Race and Ethnicity

☐ White ☐ Black or African American ☐ Hispanic or Latino
☐ Asian ☐ American Indian or Alaska Native ☐ Native Hawaiian ☐ Other

CLINICAL INFORMATION

PROVIDE MOST RECENT VALUES

Weight (lbs.)	Height (inches)	Angioplasty or Stent	Coronary Artery Bypass Graft (CABG)
		☐ No ☐ Yes Date	☐ No ☐ Yes Date

DIAGNOSIS INFORMATION

ICD10 CODE/S REQUIRED
(commonly used ICD10 codes are provided on the back)

ICD10 Code

ICD10 Code

ICD10 Code

ICD10 Code

ICD10 Code

BILLING INFORMATION

☐ Insurance — Provide a copy of both sides of insurance card/s

☐ Self-Pay

Patient Signature

Credit Card Number

Exp. Date	CVV#	Amount

By signing above, I understand that I am responsible for the cost of the HART test/s ordered, and I authorize payment on the credit card information provided.

☐ Client Bill — Client Name

TEST/S REQUESTED

☐ **HART CVE (0309U)-** is an immunoassay analysis of four proteins (NT-proBNP, osteopontin, tissue inhibitor of metalloproteinase-1 [TIMP-1], kidney injury molecule-1 [KIM-1]) in a machine learning, artificial intelligence (AI)-based algorithm for assessing a one-year risk of heart attack, stroke, or cardiovascular death (major cardiac event)

☐ **HART CADhs (0308U)-** is an immunoassay of three proteins (high sensitivity [hs] troponin, adiponectin, and kidney injury molecule-1 [KIM-1]), and three clinical vaables (age, sex, and history of cardiac procedures) in a machine learning, artificial intelligence (AI)-based algorithm for assessing obstructive coronary artery disease

ORDERING PROVIDER

Provider's Name	NPI#	Date

Provider's Signature

I am a licensed medical professional. I acknowledge that the test/s requested are medically necessary, and documentation of medical necessity is documented in the patient's medical records, which will be made available upon request of the performing laboratory.

BLOOD DRAW INFORMATION

Date Sample Collected	Phlebotomist Name

HART

Typical Symptoms Suggestive of Cardiovascular Disease	
I20.9	Angina pectoris, unspecified
I20.8	Other forms of angina pectoris
R07.9	Chest pain, unspecified
R07.89	Other chest pain
R06.02	Shortness of breath
R07.2	Precordial pain
Atypical Symptoms Suggestive of Cardiovascular Disease (typically concurrent with at least one risk factor)	
R12	Heartburn
R53.81	Other malaise
M79.602	Pain in left arm
R68.84	Jaw pain
R00.2	Palpitations
R42	Dizziness
Common Cardiovascular Disease Risk Factors (typically 3 or more)	
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
I70.209	Unspecified atherosclerosis of native arteries of extremities
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm
I25.5	Ischemic cardiomyopathy
I25.702	Atherosclerosis of coronary artery bypass graft(s), unspecified, with refractory angina pectoris
I10	Essential (primary) hypertension
Z82.41	Family history of sudden cardiac death
Z82.49	Family history of ischemic heart disease and other diseases of the circulatory system
E78.5	Hyperlipidemia, unspecified
E78.2	Mixed hyperlipidemia
E11.9	Type 2 diabetes mellitus without complications
E11.8	Type 2 diabetes mellitus with unspecified complications
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease
E10.9	Type 1 diabetes mellitus without complications
E10.8	Type 1 diabetes mellitus with unspecified complications
N18.9	Chronic kidney disease, unspecified
N18.1	Chronic kidney disease, stage 1
N18.2	Chronic kidney disease, stage 2
N18.30	Chronic kidney disease, stage 3 (unspecified)
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
E88.81	Metabolic syndrome
E66.9	Obesity, unspecified
I65.21	Occlusion and stenosis of right carotid artery
I65.22	Occlusion and stenosis of left carotid artery
I65.23	Occlusion and stenosis of bilateral carotid arteries
F17.210	Nicotine dependence, cigarettes, uncomplicated
F17.218	Nicotine dependence, cigarettes, with other nicotine-induced disorders
F17.219	Nicotine dependence, cigarettes, with unspecified nicotine-induced disorders
R94.39	Abnormal results of other cardiovascular function
R94.31	Abnormal EKG
I73.9	Peripheral vascular disease, unspecified

* The above commonly used diagnosis codes are listed as a convenience only. Ordering physicians should use ICD-10 codes that best describe the reason for performing tests, whether or not that code is listed above.