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| Geno Molecular Labs - Logo.jpg **2 Ethel Road, Suite 203C**  **Edison, NJ 08817**  **www. Genoscientific.com**  **Tel: (732)-662-5543**  **Fax: (732) 662-5544** | | | | | | |
| **ACCOUNT SET UP FORM** | | | | | | |
| **Genoscientific Account Manager**  **:** | | | | | | |
| **Date:** | | | | | | |
| Account Information | | | | | | |
| **Hospital/Practice Name:** | | | | | | |
| **Address:** | | | | | |  |
| **City:** | | **State:** | | | **ZIP Code:** | |
| **Phone:** | | **Email:** | | | **Fax:** | |
| **Office Manager:** | | | | | | |
| **Office Days/Hours:** | | | | | | **How long?** |
| **Phone:** | **E-mail:** | | | | **Fax:** | |
| **Billing Contact:** | | | | | | |
| **Office Days/Hours:** | | | | | |  |
| **Phone:** | | **E-mail:** | | | | **Fax:** |
| **Notes:** | | | | | | |
| Alternate Location | | | | | | |
| **Address:** | | | | | | |
| **City:** | | **State:** | | | **Zip:** | |
| **Phone:** | | **Email:** | | | **Fax:** | |
| **Office Manager:** | | **Phone:** | | | | **Email:** |
| **Office Days/Hours:** | | | | | | |
| **Billing Contact:** | | **Phone:** | | | **Email:** | |
| **Office Days/Hours:** | | | | | | |
| **Notes:** | | | | | | |
| Physician Information | | | | | | |
| **Physician Name** | | | **Degree Type** | **National Provider ID (NPIN)** | | |
|  | | |  |  | | |
|  | | |  |  | | |
| Account Requests | | | | | | |
| **Reporting Preferences:** | | | |  | | |
| **Pick Up Instructions:** | | | |  | | |
| **Special Requests:** | | | | | | |