



Pulmonary Function Laboratory
Outpatient Exam Request
237 Old White Street Suite 1 Jacksonville, NC 28540
Scheduling 910-577-4968 Fax 910-577-4988

Patient Name: Last, First	Date of Birth
Diagnosis	Indication/Chief Complaint- ICD-10 Code(s) required

Please check the appropriate test(s). Call scheduling for appointment date and time. Most appointments can be scheduled within 48 hours. Please fax this signed request along with patient demographics to the office at 910-577-4988.

- Pulmonary Screen (FVC, Pre/Post Bronchodilator)- CPT 94060
- Pulmonary Screen (FVC/ No Bronchodilator)- CPT 94010
- DLCO (Lung Diffusion)- CPT 94729 (per AMA/CPT guidelines please order with 94010 or 94060)
- Baseline Spirometry (Full) with Lung Volumes- CPT 94060, 94727
- Baseline Spirometry, Lung Volumes with DLCO- CPT 94060,94727,94729
- Complete Pulmonary Function Test (Spirometry, Lung Volumes, DLCO)- CPT 94060,94760,94727,94729
- 6 Minute Walk Test (Wear comfortable shoes)- CPT 94620
- EKG For Surgical Clearance

Patient may be seen in office for Pulmonary Function Testing **only or consultation with a pulmonary physician dependent on what ordering physician is requesting. **

Physician Signature: _____ Date: _____ Time: _____