From your Order Menu select Department Orders and then when asked to enter the Ordering Dept---you can key in MYL or perform a table look-up and select LAB – Misys from the list.
After selecting the test(s) to be done the Order Screen will display. This screen has not changed and the same information is required to process the request. Listed below is a description of each field and the information required.

**Field Explanations**

1. **ITEM (DISPLAY ONLY)**
   - This field is highlighted on the screen. This field displays the code and description from the Service Item Master (SIM), of the item selected to be ordered.

2. **INITIALS (3-A-R)**
   - If security is implemented for the person placing the order, the initials automatically display and cannot be edited.

3. **PRINT LOCATION (1-A-O)**
   - This field enables you to redirect the printed requisition for the order to a location other than the receiving department (for example, to the actual patient location or ordering location).

4. **PRIORITY (TABLE LOOKUP)**
   - This field indicates the manner in which the procedure should be performed (for example, ASAP, pre-op, routine). Several conditions apply.

5. **FREQUENCY (5-C-R) or (TABLE LOOKUP)**
   - This field displays the frequency code for the order.

6. **SCHEDULE DAYS (20-AN-R) or (TABLE LOOKUP)**
   - This field identifies the default scheduled days on which the item should occur (for example, daily or Every 6 hours).
7. TIMES (65-C-O)
This field identifies the specific times that a treatment or task should be administered. Enter the desired times using military time (the 24:00 clock), or standard time (the 12:00 clock, with A for am and P for PM).

8. START DATE (DATE-R)
This field identifies the date when the order is to begin generating occurrences.

9. START TIME (TIME-R)
This field identifies the time when the order is to begin generating occurrences.

10. DURATION (10-AN-R)
This field specifies the period of time that the order remains active.

11. STOP DATE (DATE-C)
This field identifies the date that the order stops generating occurrences.

12. STOP TIME (10-C-C)
This field identifies the time that this order stops generating occurrences.

13. NURSE COLLECTED (1-A-R)
This field specifies if the specimen is to be obtained by the Nursing staff or Laboratory personnel.

14. SPECIMEN SOURCE (TABLE LOOKUP-R)
This field indicates the specimen source for the test be to done (for example, blood).

15. MODIFIER (25-C-O)
This field further defines the specimen source (for example, left arm) for collection of the specimen source.

16. ORDERING PHYSICIAN (28-AN-R)
This field indicates the physician who is placing the order for the patient. This field is required.

17. PERFORMING PHYSICIAN (TABLE LOOKUP)
Enter the physician who performed or is going to perform the treatment in this field.

18. ORDERING DIAGNOSIS (30-A-O or TABLE LOOKUP)
Enter the ICD code for ordering this item. This ICD code is the reason, or ordering diagnosis, for ordering the test or exam. The following prompt displays:

Enter ICD diagnosis code--
'U-seer diagnosis code, `A-proved List, 'Dx' Admit, '-' for list, -free form

You can make an entry using one of the following methods:

• Enter the ICD diagnosis code when you know it.

• Enter U and hyphen (-) to display a list of the facility’s diagnosis codes for your selection. You can limit the search by entering one or more characters after the U. The system matches the codes in this table to the equivalent ICD code.

• Enter A and a hyphen (-) to display the list of approved diagnosis codes. This option is only available when the patient falls within the correct criteria for the Outpatient Charge Documentation process.

• Enter Dx to display the list of multiple diagnoses entered in the Admission process. These include the Admitting Diagnosis, Working Diagnosis, Principal Diagnosis, and multiple Secondary Diagnoses.
• Enter a hyphen (-) and freeform text that describes the diagnosis.

19. MODIFIER (TABLE LOOKUP)
This field allows entry of one or more HCPCS modifiers that qualify this procedure. If modifiers have been linked to the SIM for this particular item, and the patient’s insurance is CMS compliant and the patient is an outpatient, the system displays the Priority 1 modifiers first, Priority 2 modifiers second, and unspecified priority modifiers last.

20. PROMPT RESPONSE/MESSAGE (36-C-C)
This field contains questions or instructions which can be linked to an individual test. If a prompt is associated with a test, the cursor stops at this field. If no prompt is associated with a test, this field is bypassed.

21. COMMENT (36-C-O)
This field allows freeform entry of information pertinent to the patient or the procedure ordered.