

Our portal is **Orchard Copia** or **Copia** for short. This guide will give you instructions on how to login, access results, and place orders for your patients. If you have questions at anytime please contact your Helix Diagnostics representative or our client service department at **888-275-5221**.

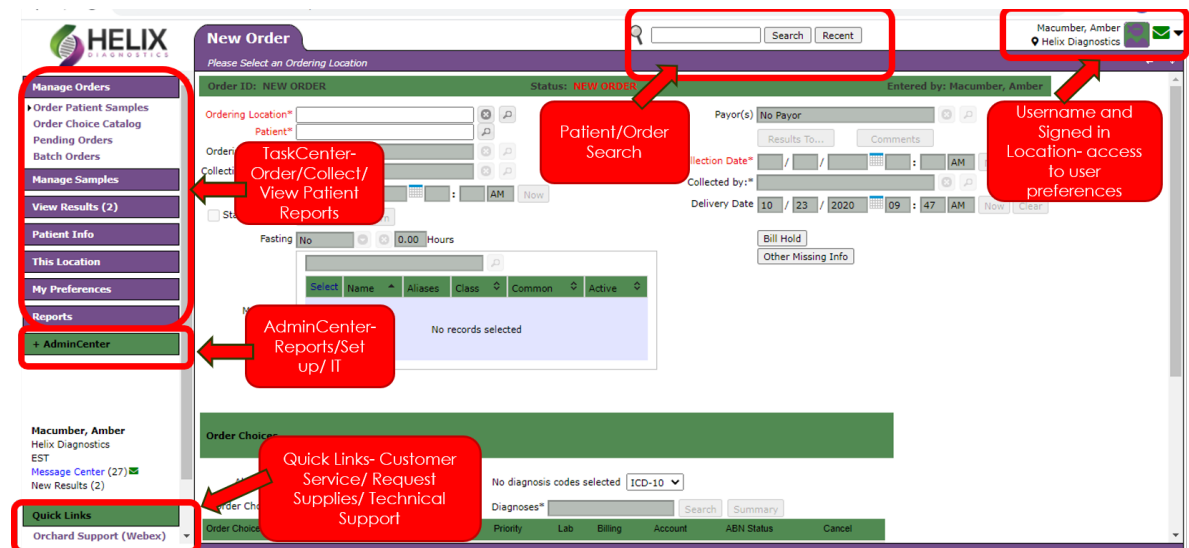
Section 1 Login to Copia

Go to <https://helixorchard.netSMARTcloud.com>
This can be saved as a favorite/bookmarked in your browser.

Type in your username and password provided to you by your Helix representative.
Copia will automatically ask you to create your own unique password.



After changing your password you will see a screen like the one to the right. Please look the picture over in comparison to your screen. This will help you to familiarize yourself with the layout of **Copia**.

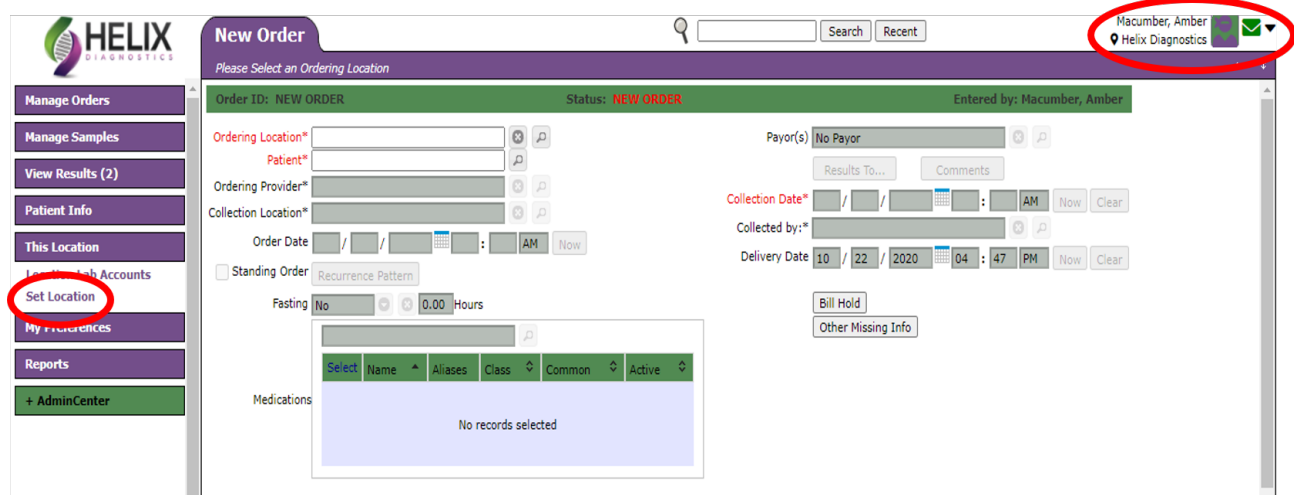


Section 2 Setting the Location

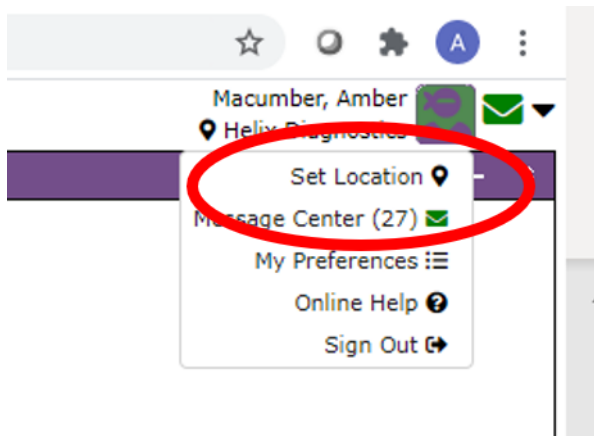
Location settings allow the user to choose a specific location that they are working from so that all location defaults are appropriately set when they log on.

(Example: Fax Number, Result Delivery, Available Providers)

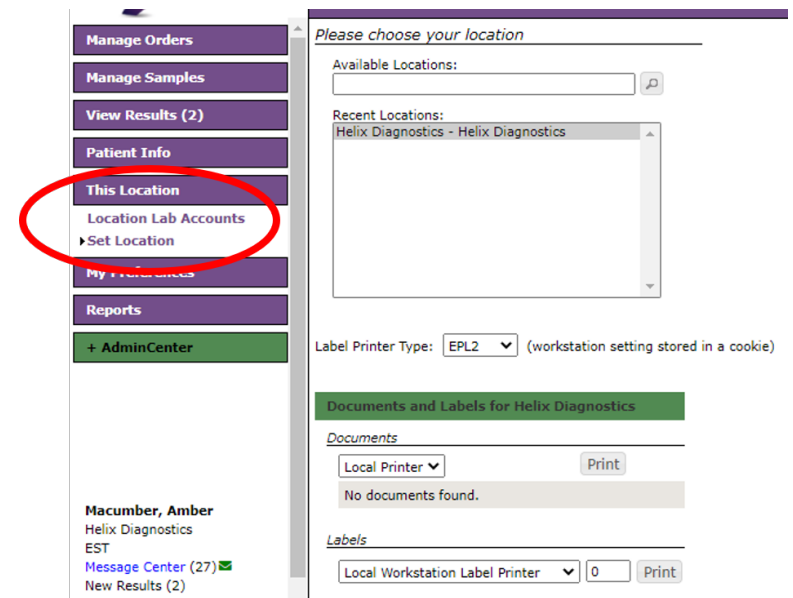
A user can have multiple locations that they can switch between.



- Click the drop in the right corner near your name and choose “**set location.**”

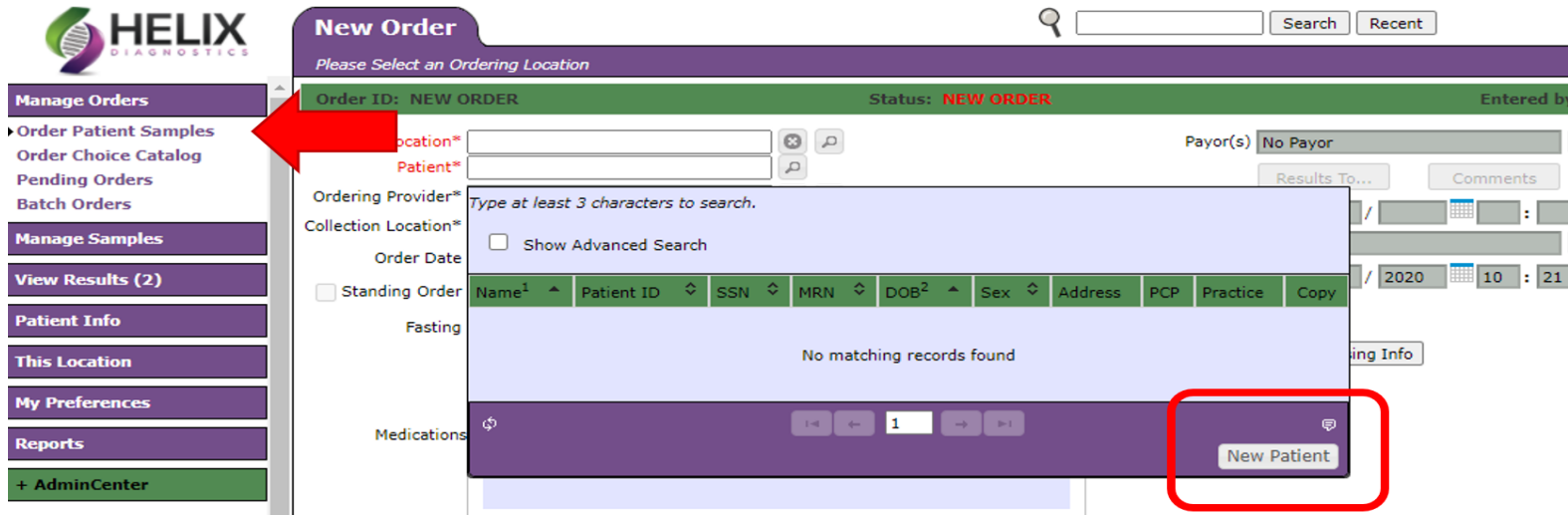


- This action will navigate to the “**This Location**” section of the Task Center.

- Choose your location.

Section 3 Creating a New Patient



HELIX DIAGNOSTICS

New Order

Please Select an Ordering Location

Order ID: NEW ORDER Status: NEW ORDER Entered by

Location* Patient*

Ordering Provider* Type at least 3 characters to search.

Collection Location* Show Advanced Search

Order Date / / 2020 10 : 21

Standing Order

Fasting

Medications

Payor(s) No Payor

Results To... Comments

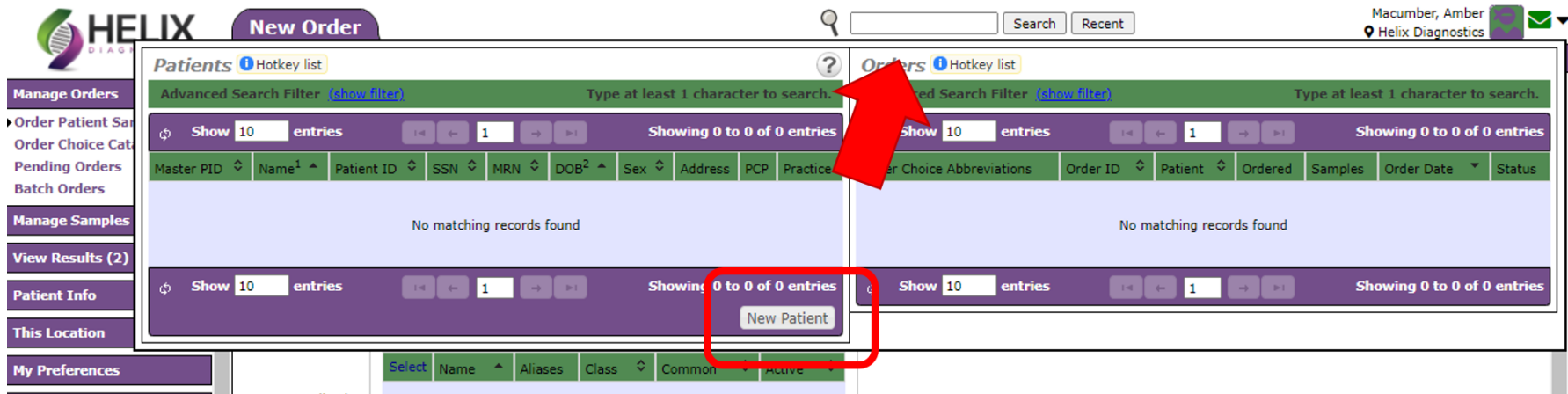
No matching records found

1

New Patient

- Under **“Manage Orders”** click on **“Order Patient Samples”**. Click into **“Patient”** then a box will appear. Choose **“New Patient.”**

- Another way to create a new patient is to click in the top global search box. A box will appear and choose **“New Patient.”**



HELIX DIAGNOSTICS

New Order

Macumber, Amber Helix Diagnostics

Search Recent

Patients Hotkey list

Advanced Search Filter (show filter) Type at least 1 character to search.

Show 10 entries Showing 0 to 0 of 0 entries

Master PID Name Patient ID SSN MRN DOB Sex Address PCP Practice

No matching records found

Show 10 entries Showing 0 to 0 of 0 entries

New Patient

Orders Hotkey list

Advanced Search Filter (show filter) Type at least 1 character to search.

Show 10 entries Showing 0 to 0 of 0 entries

Order Choice Abbreviations Order ID Patient Ordered Samples Order Date Status

No matching records found

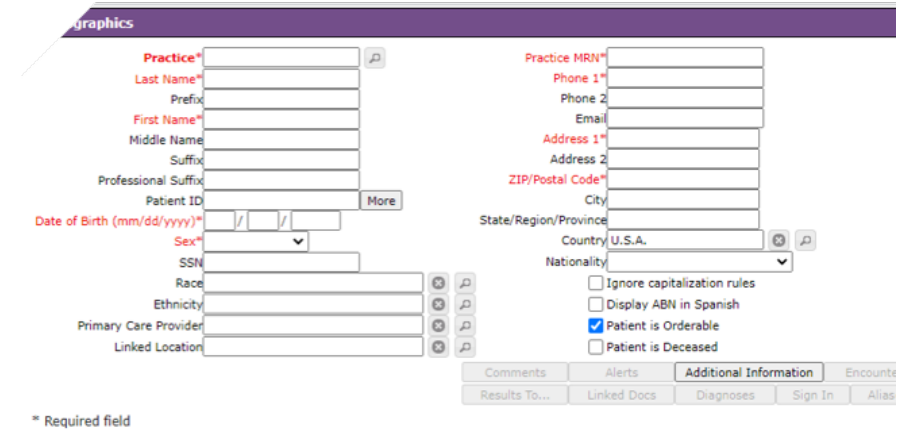
Show 10 entries Showing 0 to 0 of 0 entries

Select Name Aliases Class Common Active

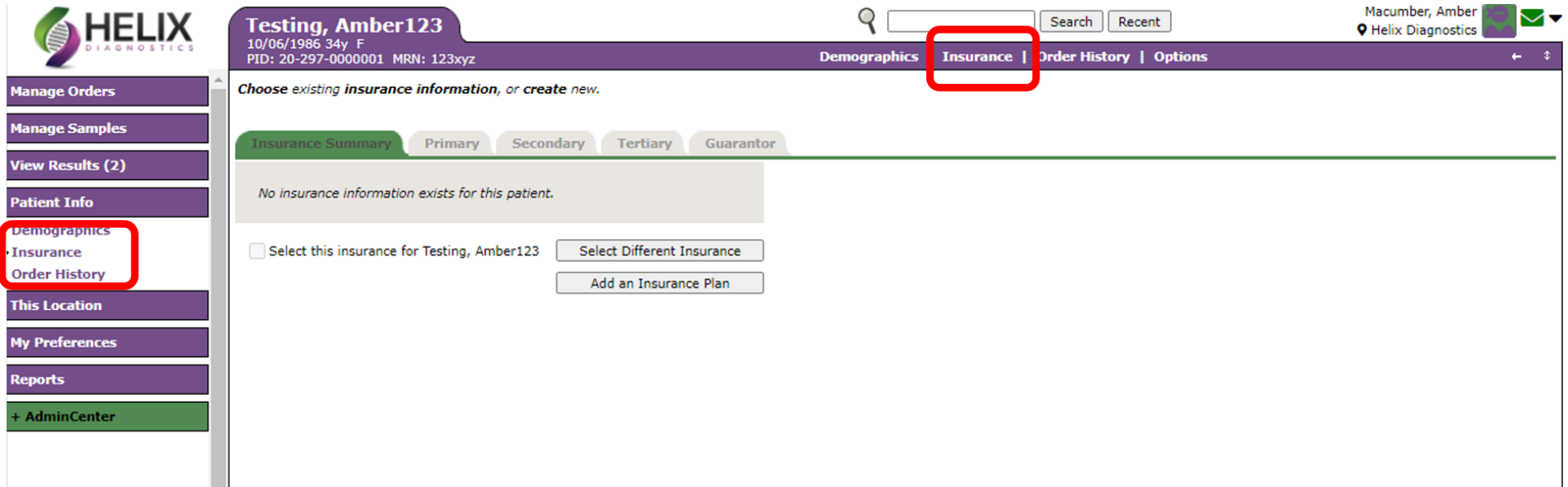
Fill out required information highlighted in **red**.
Then click **“Save.”**

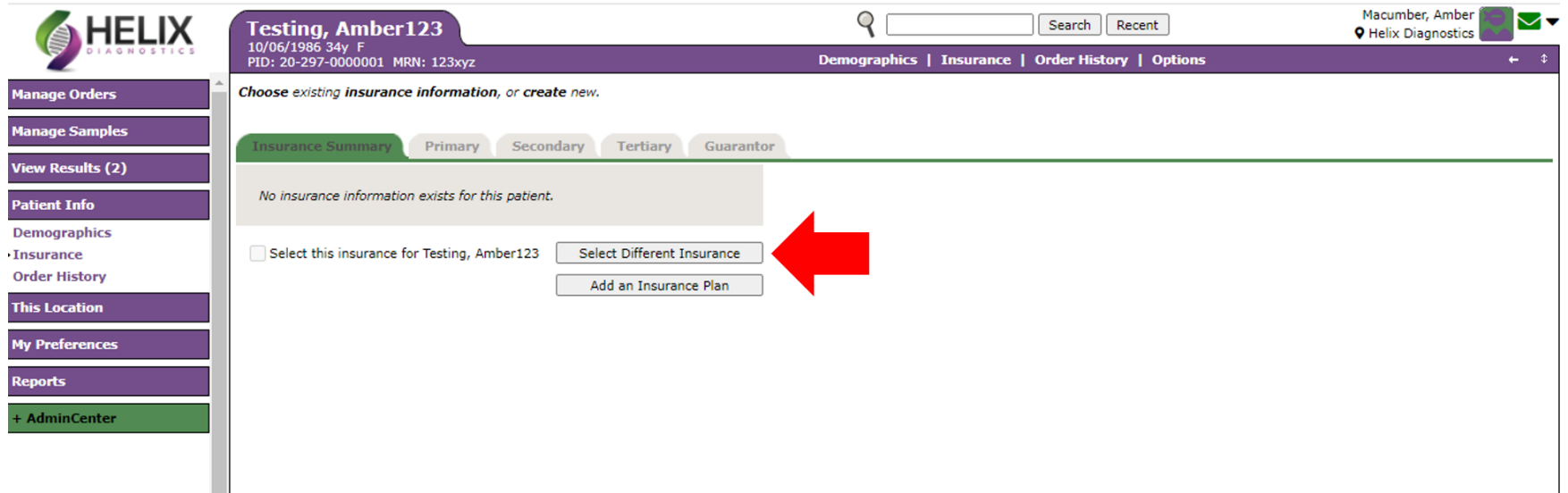
This will take you back to the order screen.
Now click on **“Insurance”** in the top of the purple bar below search.

You can also choose insurance under **“Patient Info”** on the left side of the page.



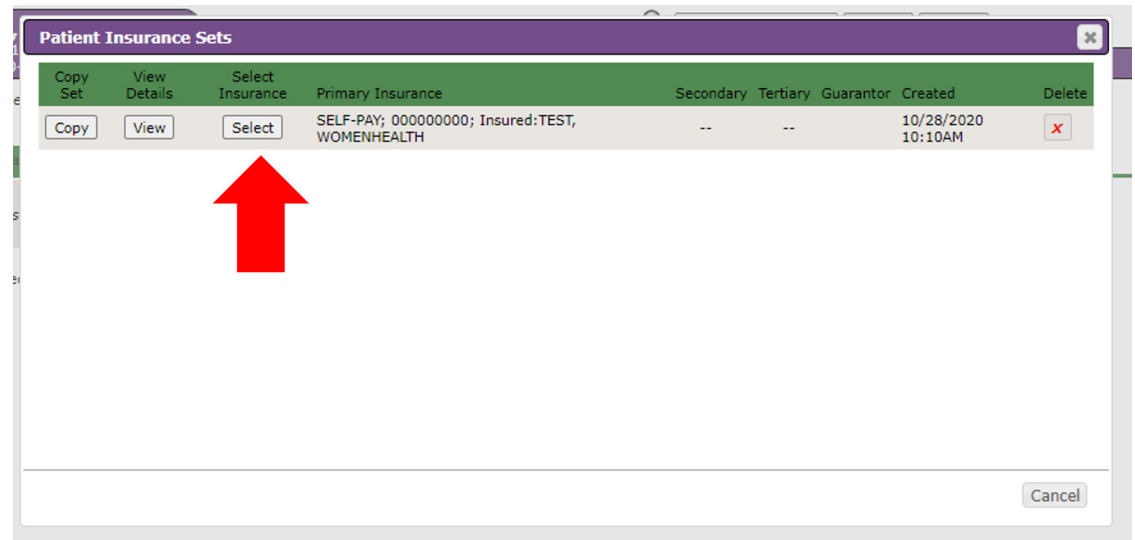
* Required field





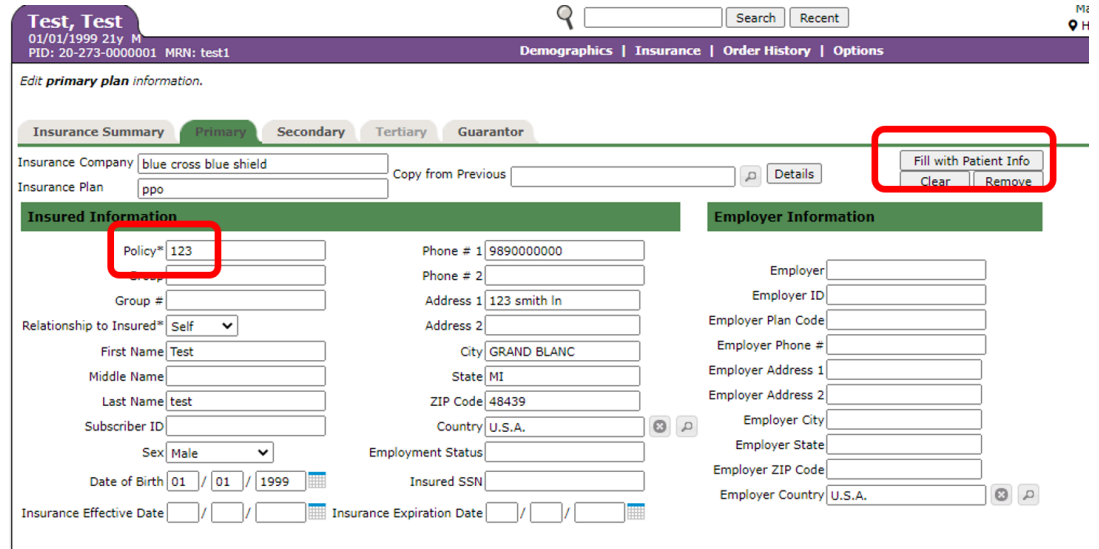
Click on “**Select Different Insurance**” and choose the insurance on the list that matches your patient’s insurance. If you do not see the correct insurance, you will have to add the insurance plan.

The instructions to add an insurance will be coming up.



Copy Set	View Details	Select Insurance	Primary Insurance	Secondary	Tertiary	Guarantor	Created	Delete
Copy	View	Select	SELF-PAY; 000000000; Insured:TEST, WOMENHEALTH	--	--		10/28/2020 10:10AM	X

After you have chosen the insurance please enter the policy # and group #, if applicable. On the right side of the page you will see a button “**Fill with Patient Info.**” Click this button and the patients demographics will load. Click “**Save.**”



Test, Test
01/01/1999 21y M
PID: 20-273-000001 MRN: test1

Demographics | Insurance | Order History | Options

Edit **primary plan** information.

Insurance Summary | **Primary** | Secondary | Tertiary | Guarantor

Insurance Company: blue cross blue shield
Insurance Plan: ppo
Copy from Previous: [] Details

Insured Information

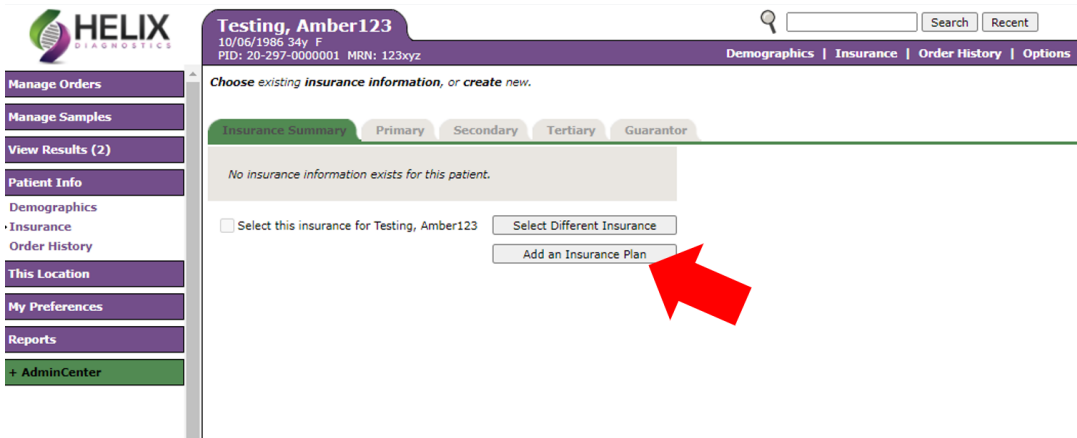
Policy# 123
Group #
Relationship to Insured: Self
First Name: Test
Middle Name
Last Name: test
Subscriber ID
Sex: Male
Date of Birth: 01 / 01 / 1999
Insurance Effective Date
Insurance Expiration Date

Phone # 1: 9890000000
Phone # 2
Address 1: 123 smith ln
Address 2
City: GRAND BLANC
State: MI
ZIP Code: 48439
Country: U.S.A.
Employment Status
Insured SSN

Employer Information

Employer
Employer ID
Employer Plan Code
Employer Phone #
Employer Address 1
Employer Address 2
Employer City
Employer State
Employer ZIP Code
Employer Country: U.S.A.

Fill with Patient Info
Clear Remove



HELIX DIAGNOSTICS

Testing, Amber123
10/06/1986 34y F
PID: 20-297-000001 MRN: 123xyz

Demographics | Insurance | Order History | Options

Choose existing **insurance information**, or create new.

Insurance Summary | Primary | Secondary | Tertiary | Guarantor

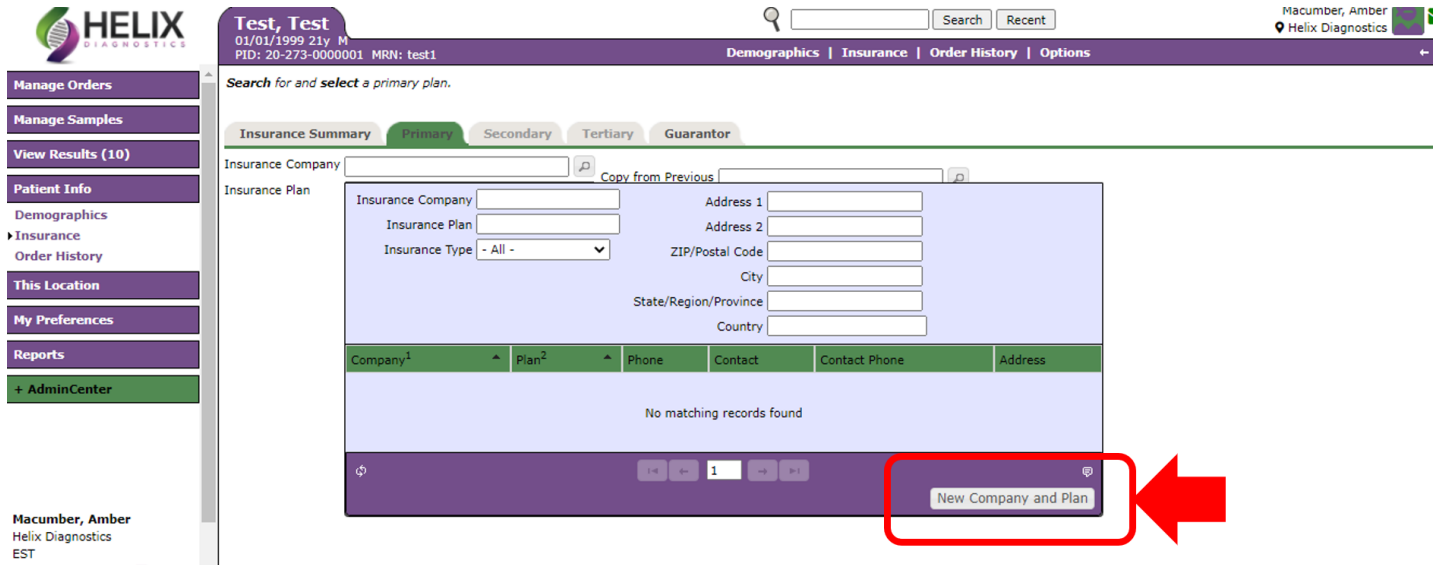
No insurance information exists for this patient.

Select this insurance for Testing, Amber123

Select Different Insurance
Add an Insurance Plan

To add an insurance that is not listed. Click “**Add an Insurance Plan.**” Next click “**New Company and Plan.**”

To Add an insurance that is not listed. Click **“Add an Insurance Plan.”** Next click **“New Company and Plan.”**



HELIX DIAGNOSTICS

Test, Test
01/01/1999 21y M
PID: 20-273-000001 MRN: test1

Demographics | Insurance | Order History | Options

Macumber, Amber
Helix Diagnostics

Search for and select a primary plan.

Insurance Summary | Primary | Secondary | Tertiary | Guarantor

Insurance Company Copy from Previous

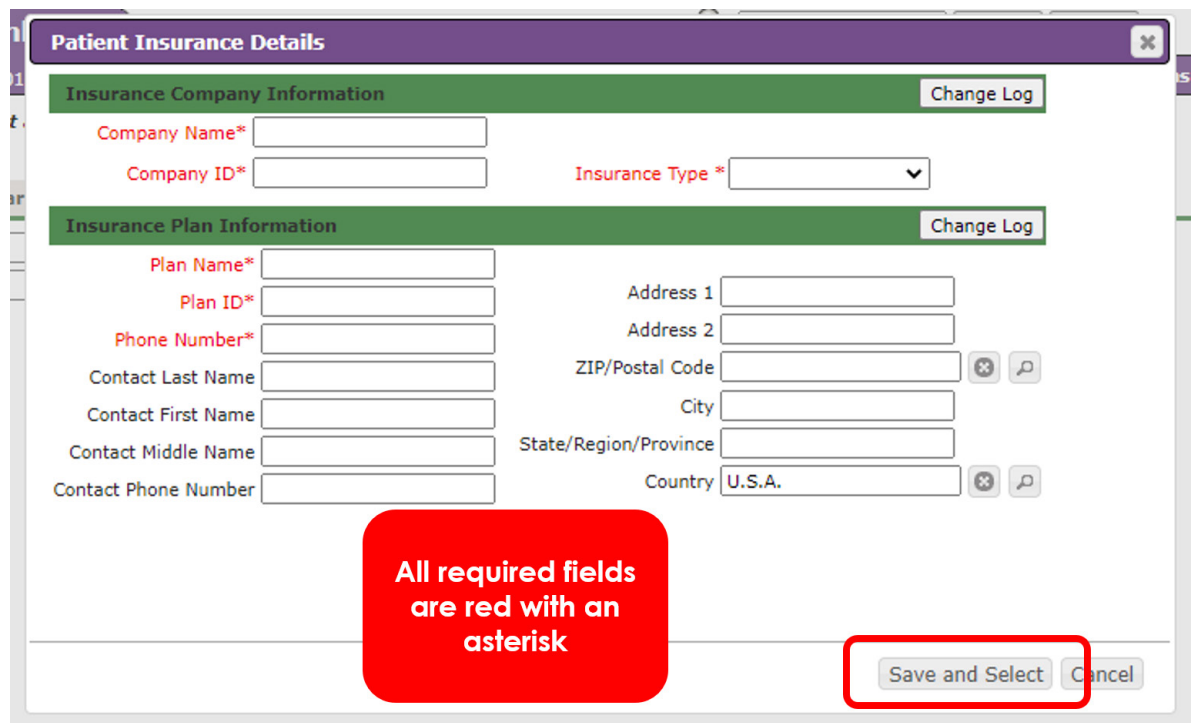
Insurance Plan

Insurance Company Address 1
 Insurance Plan Address 2
 Insurance Type - All - ZIP/Postal Code
 City
 State/Region/Province
 Country

Company ¹	Plan ²	Phone	Contact	Contact Phone	Address
No matching records found					

New Company and Plan

Fill out the insurance company and plan information along with the plan ID. All required fields have an asterisk and are in red. Click **“Save and Continue.”**



Patient Insurance Details

Insurance Company Information Change Log

Company Name*
 Company ID* Insurance Type *

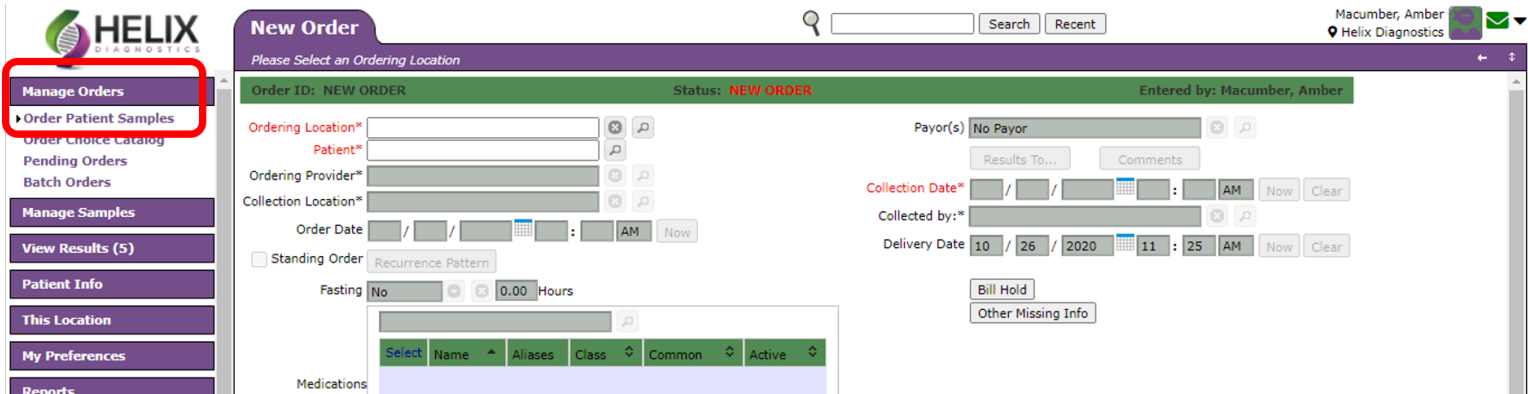
Insurance Plan Information Change Log

Plan Name*
 Plan ID* Address 1
 Phone Number* Address 2
 Contact Last Name ZIP/Postal Code
 Contact First Name City
 Contact Middle Name State/Region/Province
 Contact Phone Number Country

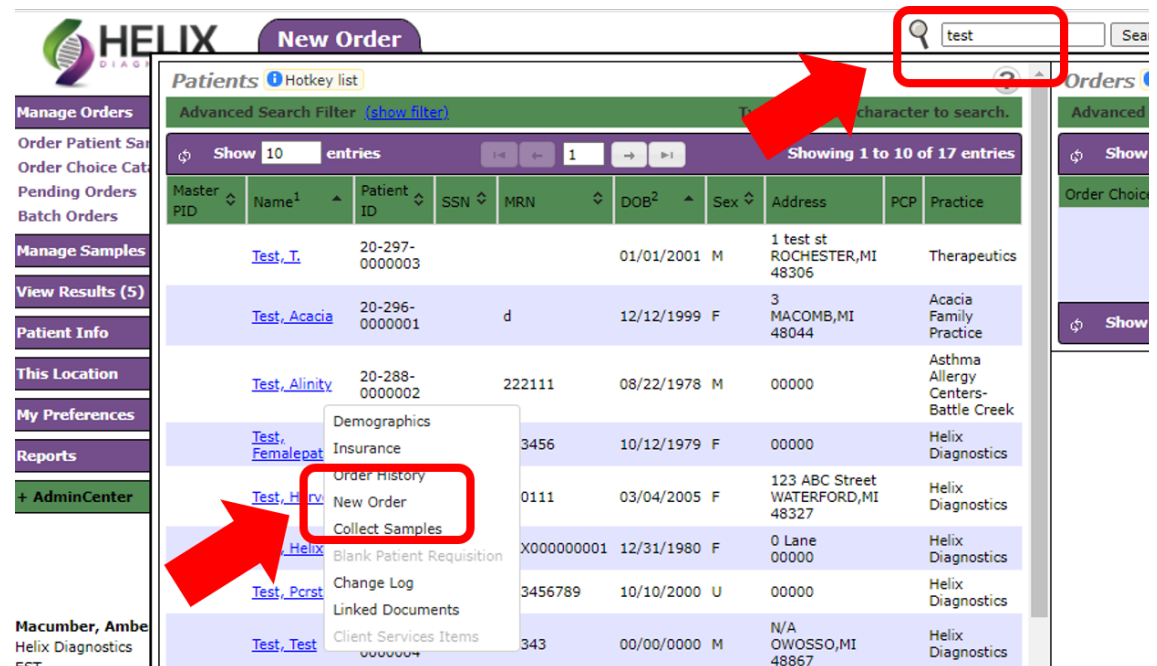
All required fields are red with an asterisk

Save and Select Cancel

Section 4 Creating a New Order



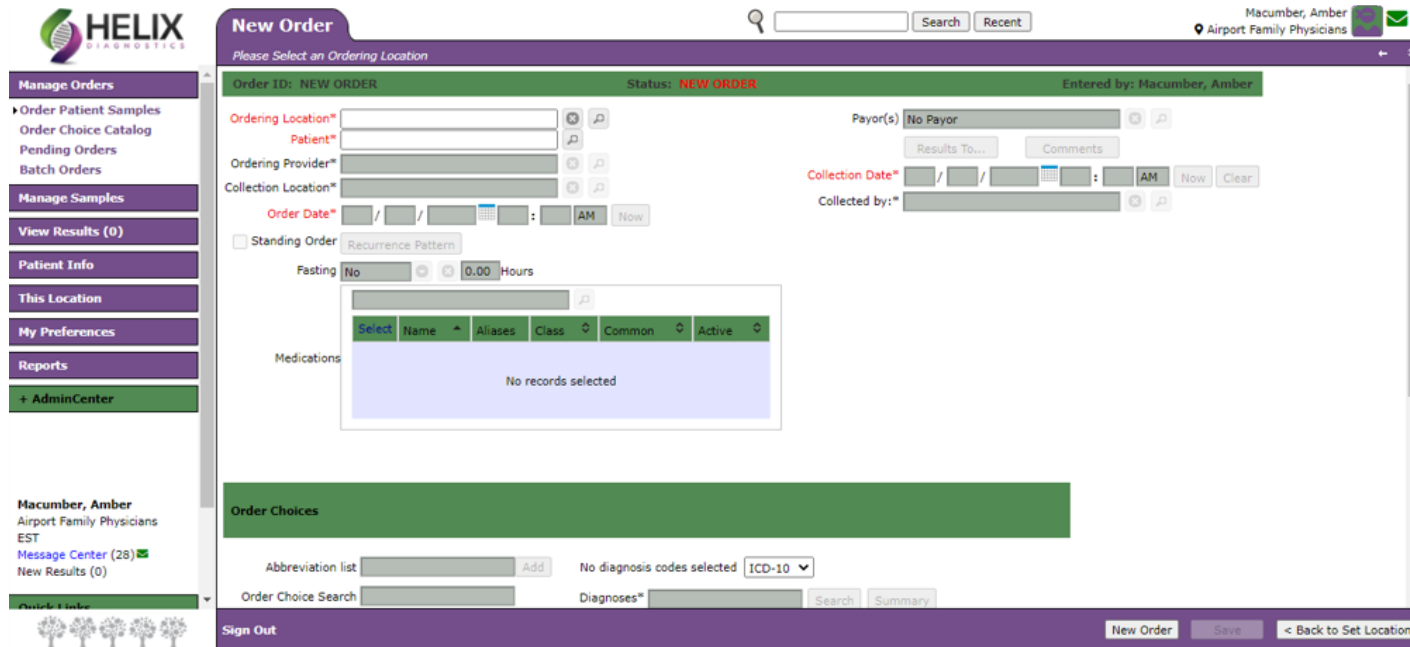
Under manage orders select “**Order Patient Samples.**” Type the last name of the patient in “**Patient**” and search. You can then select the patient you would like to place an order on.



Another way is to search the patient in the global search box at the top of the page. Click on the patient name and select “**New Order**”.

Master PID	Name ¹	Patient ID	SSN	MRN	DOB ²	Sex	Address	PCP	Practice
	Test, T	20-297-0000003			01/01/2001	M	1 test st ROCHESTER, MI 48306		Therapeutics
	Test, Acacia	20-296-0000001		d	12/12/1999	F	3 MACOMB, MI 48044		Acacia Family Practice
	Test, Alinity	20-288-0000002		222111	08/22/1978	M	00000		Asthma Allergy Centers- Battle Creek
	Test, Femalepat			3456	10/12/1979	F	00000		Helix Diagnostics
	Test, Henry			0111	03/04/2005	F	123 ABC Street WATERFORD, MI 48327		Helix Diagnostics
	Test, Helix			X000000001	12/31/1980	F	0 Lane 00000		Helix Diagnostics
	Test, Perst			3456789	10/10/2000	U	00000		Helix Diagnostics
	Test, Test			343	00/00/0000	M	N/A OWOSSO, MI 48867		Helix Diagnostics

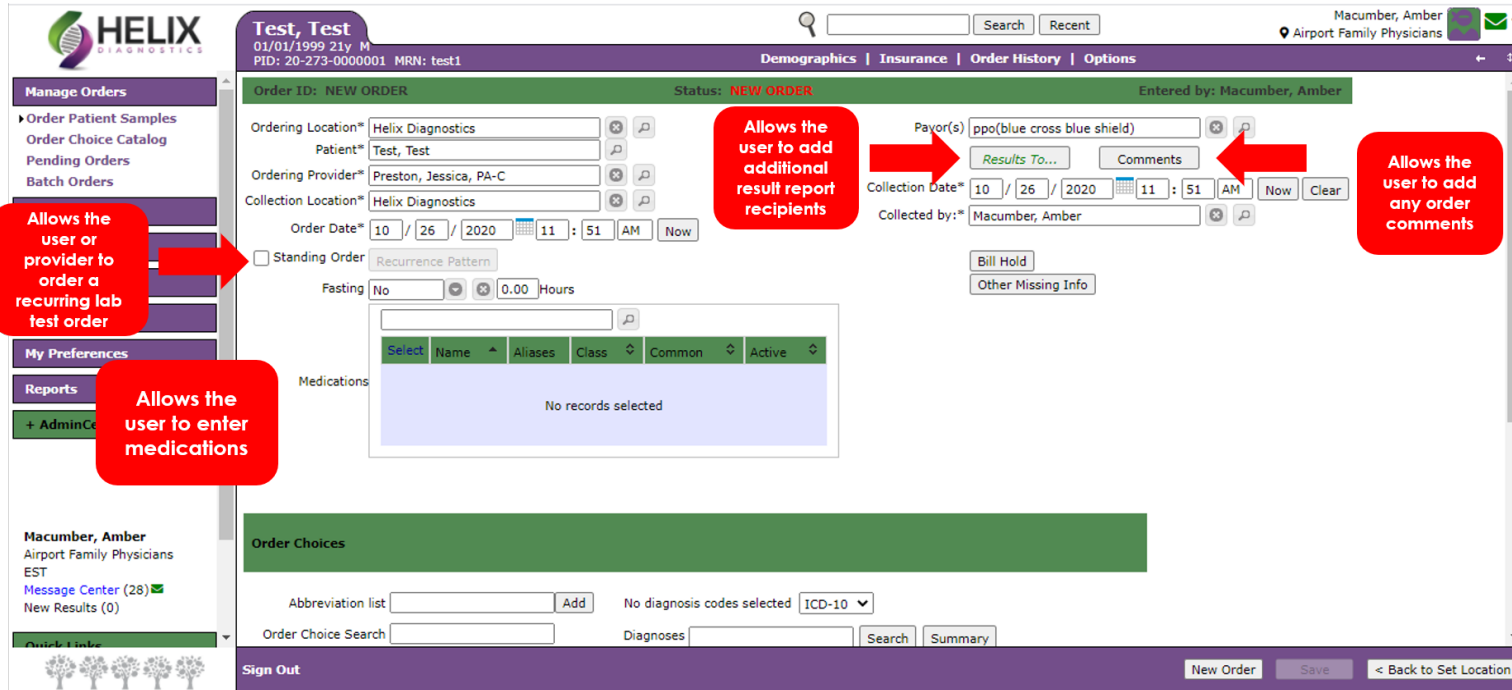
Fields with an asterik and in **red** are **required**.



The screenshot shows the 'New Order' form in the HELIX client portal. The form is titled 'New Order' and has a status of 'NEW ORDER'. The user is logged in as 'Macumber, Amber' at 'Airport Family Physicians'. The form contains several required fields marked with a red asterisk (*):

- Ordering Location*
- Patient*
- Ordering Provider*
- Collection Location*
- Order Date*
- Collection Date*
- Collected by*

Other fields include 'Payor(s)' (set to 'No Payor'), 'Fasting' (set to 'No'), and 'Medications' (currently empty). The 'Order Choices' section is partially visible at the bottom. The form also includes a search bar, a 'Recent' button, and a 'Sign Out' button at the bottom left.



HELIX DIAGNOSTICS

Test, Test
01/01/1999 21y M
PID: 20-273-0000001 MRN: test1

Demographics | Insurance | Order History | Options

Macumber, Amber
Airport Family Physicians

Order ID: NEW ORDER Status: NEW ORDER Entered by: Macumber, Amber

Ordering Location* Helix Diagnostics
Patient* Test, Test
Ordering Provider* Preston, Jessica, PA-C
Collection Location* Helix Diagnostics
Order Date* 10 / 26 / 2020 11 : 51 AM Now
 Standing Order Recurrence Pattern
Fasting No 0.00 Hours

Payor(s) ppo(blue cross blue shield)
Results To...
Comments

Collection Date* 10 / 26 / 2020 11 : 51 AM Now Clear
Collected by:* Macumber, Amber
Bill Hold
Other Missing Info

Allows the user or provider to order a recurring lab test order

Allows the user to add additional result report recipients

Allows the user to add any order comments

Allows the user to enter medications

Select	Name	Aliases	Class	Common	Active
No records selected					

Order Choices

Abbreviation list Add No diagnosis codes selected ICD-10
Order Choice Search Diagnoses Search Summary

Sign Out New Order Save < Back to Set Location

At the time of placing an order you will also have the ability to create a standing order, medication list, send reports to other physicians (CC specialists), and add other comments to the order.

Order Choices

Abbreviation list Selected diagnosis codes: A49.2, Z20.828

Order Choice Search

Order Choice	Diagnoses	Sample ID	Priority	Lab	Billing	Account	ABN Status	Cancel
Covid 2019 Testing	Z20.828	T.B.D.	Routine	Harvest	Direct Bill		No Status Assigned	<input type="button" value="x"/> <input type="button" value="i"/>
Glucose Random	Z20.828	T.B.D.	Routine	Harvest	Direct Bill		No Status Assigned	<input type="button" value="x"/> <input type="button" value="i"/>

Documentation and Actions

Items that need to be addressed before saving new order will highlight in black to click on

A test can be chosen in **Order Choice Search**, diagnosis code added in the **Diagnosis Search Box** and any items that need to be addressed (**ex. ABN**) will be highlighted. Click on the highlighted box to answer the needed information.

Order Choice Search

Order Choice Name: Search All Order Choices
 Search Order Choice List: My Frequent
 Search Profiles

⚙ Show 20 entries Showing 1 to 2 of 2 entries

Select	Abbreviation	CPT Codes	Name	Collection Information	Container Type	Sample Type	Storage Temperature	Host Codes
<input type="checkbox"/>	CoVlgG	84481	COV-2 IgG	Serum in Gold Top/SST	Gold Top/SST	Serum	Refrigerate	CoVlgG
<input type="checkbox"/>	CVD19		Covid 2019 Testing	Extracted DNA in Swab Buffer	Swab Buffer	Extracted DNA	Room Temperature	CVD19

⚙ Show 20 entries Showing 1 to 2 of 2 entries

SelectedItems

Select	Abbreviation	CPT Codes	Name	Collection Information	Container Type	Sample Type	Storage Temperature	Host Codes	Count	Remove
<input checked="" type="checkbox"/>	CBC	85027	CBC	Whole Blood in Lavender Top (EDTA)	Lavender Top (EDTA)	Whole Blood	Refrigerate	CBC	1	<input type="button" value="x"/>

After you click in the **order choice search** and start typing, the above box will come up. You can search for the test by name or test code and matching tests will display. Information such as collection info, container type, and storage temperature will also be displayed. Once a test is selected you will see it in the selected item box at the bottom. After all tests are selected, click **“Add Selected Items.”**

Diagnoses Search

Diagnoses: Search All
 Patient's Previous
 User's Frequent

⚙ Show 10 entries Showing 1 to 1 of 1 entries

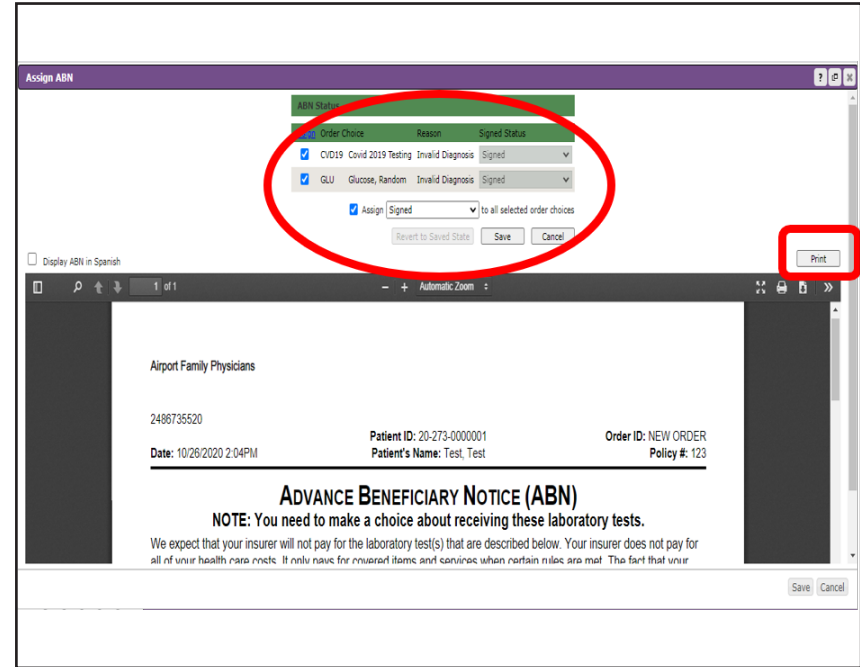
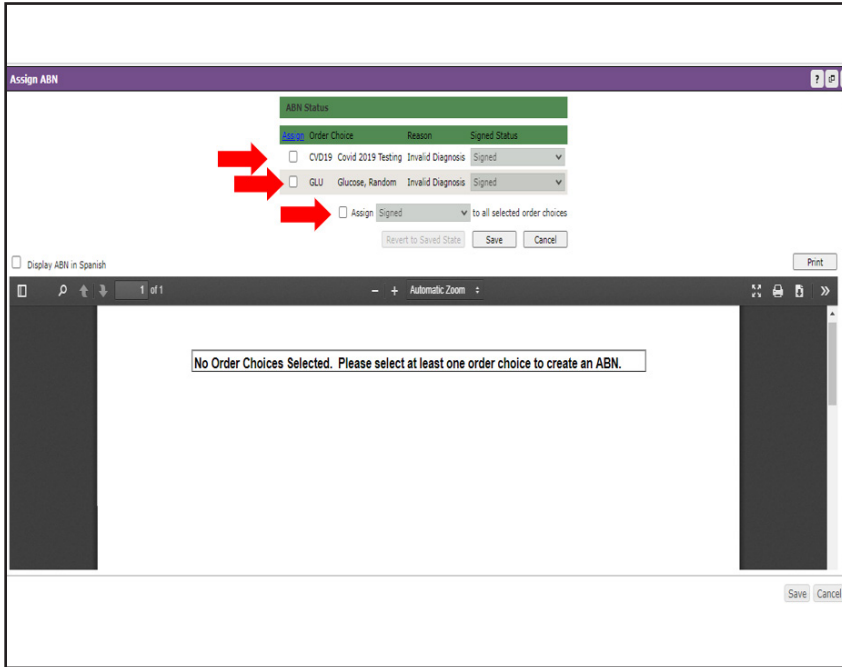
Select	Code	Description
<input type="checkbox"/>	Z20.828	Contact with and (suspected) exposure to other viral communi... (more)

⚙ Show 10 entries Showing 1 to 1 of 1 entries

SelectedItems

Select	Code	Description	Remove
<input checked="" type="checkbox"/>	R53.83	Other fatigue	<input type="button" value="x"/>

After you click in the **diagnosis search** and start typing, the above box will come up. You can search for the diagnosis code by description or diagnosis code and matching codes will display. Once a code is selected you will see it in the selected item box at the bottom. After all codes are selected, click **“Add Selected Items.”**



If an order does not satisfy the **ABN** requirements for Medicare patients, you will see the **ABN** action highlighted at the bottom of your order screen in the actions box. Click on the “**ABN**” button and this box will appear. Please choose the selected tests and choose assign. An **ABN** will display and then select print. Please have the patient sign the **ABN** and include it with the requisitions when packaging the sample.

ABN = Advanced Beneficiary Notice

*The **ABN** is a notification to the patient that they Medicare may or may not cover the tests listed and they may or may not be responsible for the bill. They have the right to appeal the claim to Medicare and the right to refuse the testing. There are a menu of tests that are limited coverage. These are listed on the Local and National Coverage Determination lists (**LCD** and **NCD**). Providers can go back in the order and add any missing diagnosis codes that may satisfy the **ABN**.*

Airport Family Physicians

2486735520

Patient ID: 20-273-0000001

Order ID: 1027-XD-20288

Date: 10/28/2020 2:35PM

Patient's Name: Test, Test

Policy #: 123

ADVANCE BENEFICIARY NOTICE (ABN)

NOTE: You need to make a choice about receiving these laboratory tests.

We expect that your insurer will not pay for the laboratory test(s) that are described below. Your insurer does not pay for all of your health care costs. It only pays for covered items and services when certain rules are met. The fact that your insurer may not pay for a particular item or service does not mean that you should not receive it. There may be a good reason your doctor recommended it. Right now, in your case, your insurer probably will not pay for the laboratory test(s) indicated below for the following reasons:

Your insurer does not pay for these tests for your condition	Your insurer does not pay for these tests as often as this (denied as too frequent)	Your insurer does not pay for experimental or research use tests
Glucose, Random		

The purpose of this form is to help you make an informed choice about whether or not you want to receive these laboratory tests, knowing that you might have to pay for them yourself. Before you make a decision about your options, you should read this entire notice carefully.

- Ask us to explain, if you don't understand why your insurer probably won't pay.
- Ask us how much these laboratory tests will cost you (Estimated Cost: \$ _____), in case you have to pay for them yourself or through other insurance.

PLEASE CHOOSE ONE OPTION. CHECK ONE BOX. SIGN & DATE YOUR CHOICE.

Option 1. YES. I want to receive these laboratory tests.
I understand that my insurer will not decide whether to pay unless I receive these laboratory tests. Please submit my claim to my insurer. I understand that you may bill me for laboratory tests and that I may have to pay the bill while my insurer is making its decision. If my insurer does pay, you will refund to me any payments I made to you that are due to me. If my insurer denies payment, I agree to be personally and fully responsible for payment. That is, I will pay personally, either out of pocket or through any other insurance that I have.

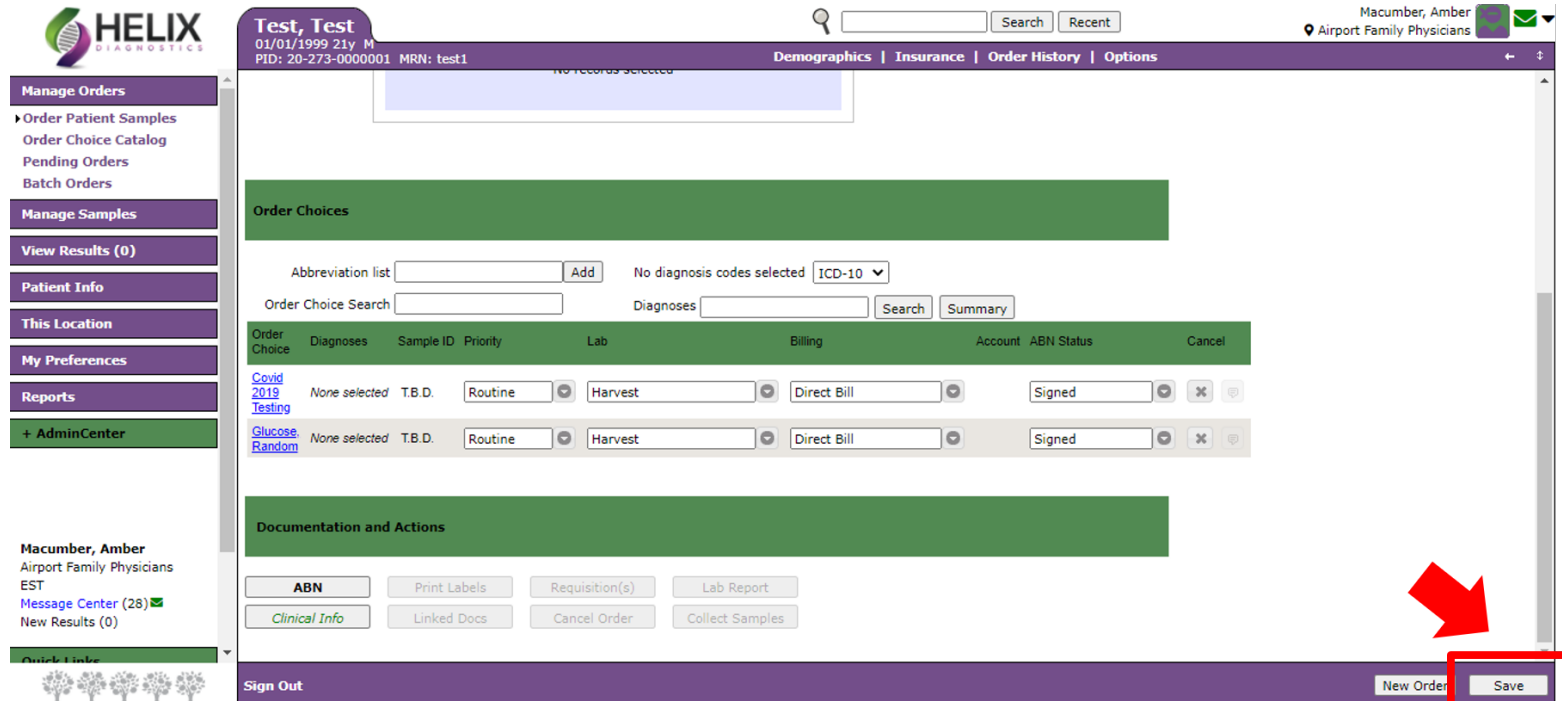
Option 2. NO. I have decided not to receive these laboratory tests.
I will not receive these laboratory tests. I understand that you will not be able to submit a claim to my insurer and that I will not be able to appeal your opinion that it won't pay. I will notify my doctor who ordered these laboratory tests that I did not receive them.

_____ Date

_____ Signature of patient or person acting on patient's behalf

NOTE: Your health information will be kept confidential. Any information that we collect about you on this form will be kept confidential in our offices. If a claim is submitted to your insurer, your health information on this form may be shared with your insurance company.

Example of an Advanced Beneficiary Notice



Test, Test
01/01/1999 21y M
PID: 20-273-000001 MRN: test1

Demographics | Insurance | Order History | Options

Macumber, Amber
Airport Family Physicians

Abbreviation list Add No diagnosis codes selected ICD-10

Order Choice Search Diagnoses Search Summary

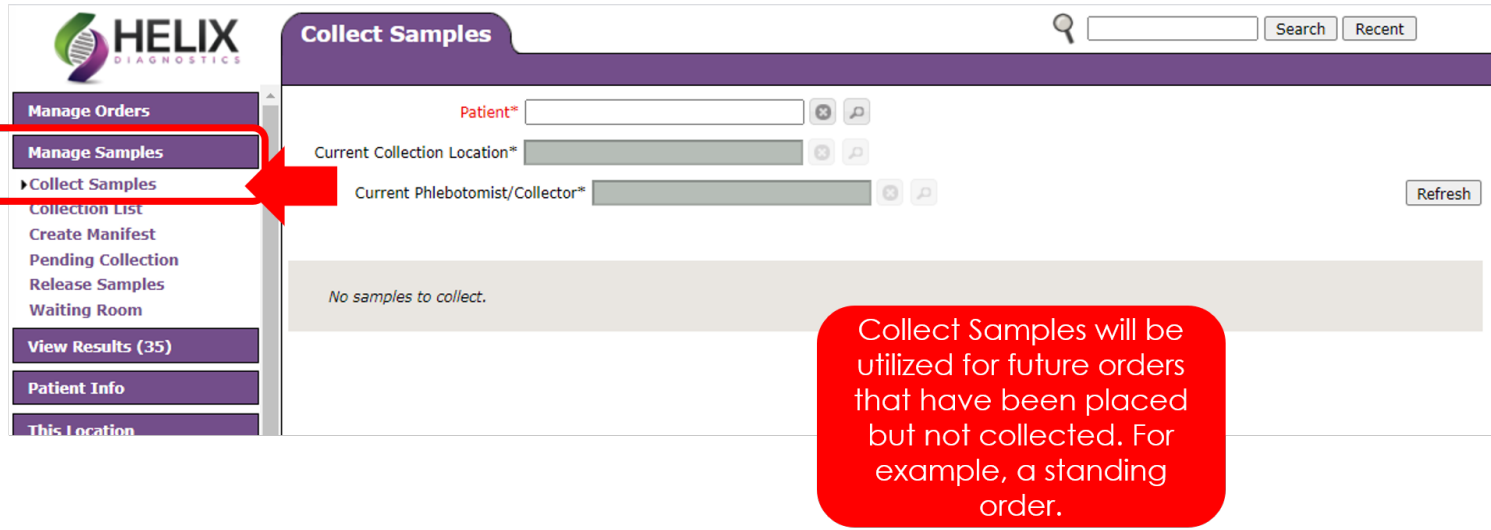
Order Choice	Diagnoses	Sample ID	Priority	Lab	Billing	Account	ABN Status	Cancel
Covid 2019 Testing	None selected	T.B.D.	Routine	Harvest	Direct Bill		Signed	<input type="checkbox"/> <input type="checkbox"/>
Glucose Random	None selected	T.B.D.	Routine	Harvest	Direct Bill		Signed	<input type="checkbox"/> <input type="checkbox"/>

Documentation and Actions

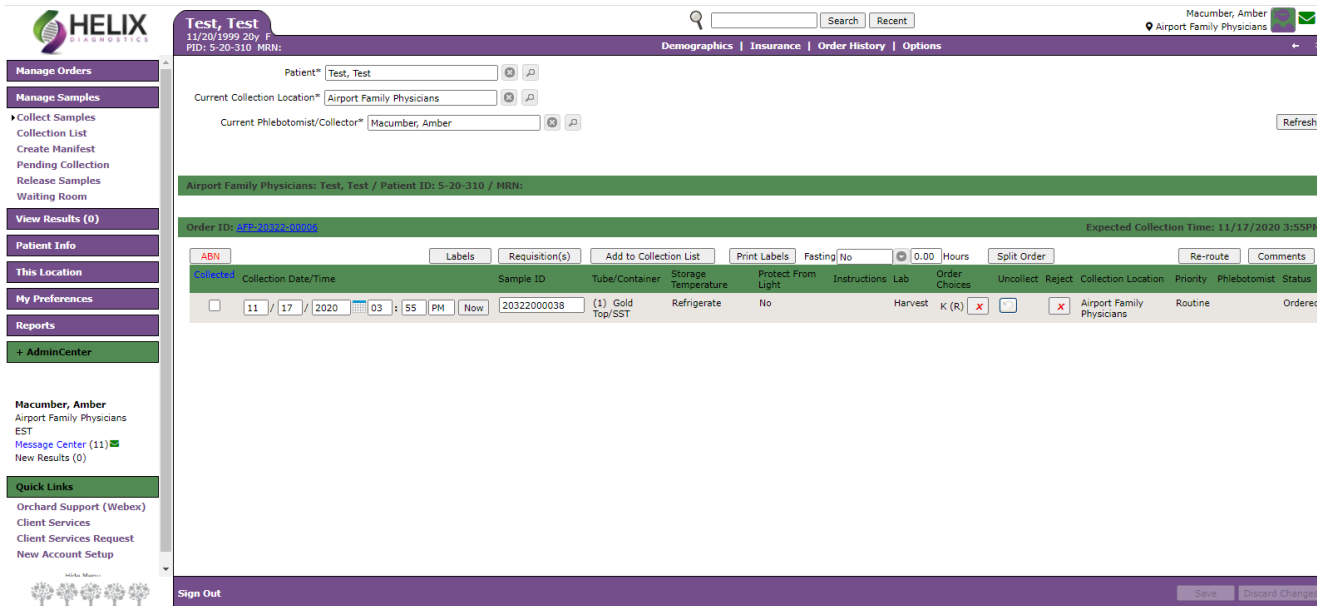
ABN Print Labels Requisition(s) Lab Report
Clinical Info Linked Docs Cancel Order Collect Samples

Sign Out New Order **Save**

When you are done with the order click **“Save.”** If you have missed any necessary information **Copia** will display a box telling you what you have missed. (Ex. Missing source information, Collection date/time) Once you have filled in the missing information click **“Save.”** The order will save and a requisition will load to print.




Collect Samples will be utilized for future orders that have been placed but not collected. For example, a standing order.



Collected	Collection Date/Time	Sample ID	Tube/Container	Storage Temperature	Protect From Light	Instructions	Lab	Order Choices	Uncollect	Reject	Collection Location	Priority	Phlebotomist	Status
<input checked="" type="checkbox"/>	11/17/2020 03:55 PM Now	20322000038	(1) Gold Top/SST	Refrigerate	No	Harvest	K (R)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Airport Family Physicians	Routine	Macumber, Amber	Ordered

After saving your order you will be directed to the “**Collect Samples**” screen. For this screen check the box next to the order and save if the sample has been collected. If not, you can “**collect**” the order later. If you place a future order, you will go to this screen to “**collect**” the sample at a later date when the sample is obtained.

Example of the Order Requisition


REQUISITION
Performing Lab: HELIX Diagnostics 

Order Information:

Practice: Helix Diagnostics	Date Printed: 11/17/2020 3:55PM
Order ID: 1007-XD-20282	Ordering Location ID: HLXD
Ordering Provider: Preston, Jessica, PA-C	Location: Helix Diagnostics
Date: 10/22/2020 10:43AM	Status: Ordered
Patient Comments:	
Order Comments:	

Patient Information:	Insurance Information:
Name: Test, Test	Primary: none specified
DOB: 01/01/1999	Secondary: none specified
Patient ID: 20-273-0000001	Ins Co Addr:
MRN: test1	Subscriber ID:
SSN:	Group #:
Phone: 989-888-8888	Policy #:
Address: 123 smith In	Insured Name:
GRAND BLANC, MI	Rel to Insured:
48439	Insured Addr:
Primary Provider:	Employer:
	Employer ID:

Order Choices for: Harvest

SID: 20282000011 

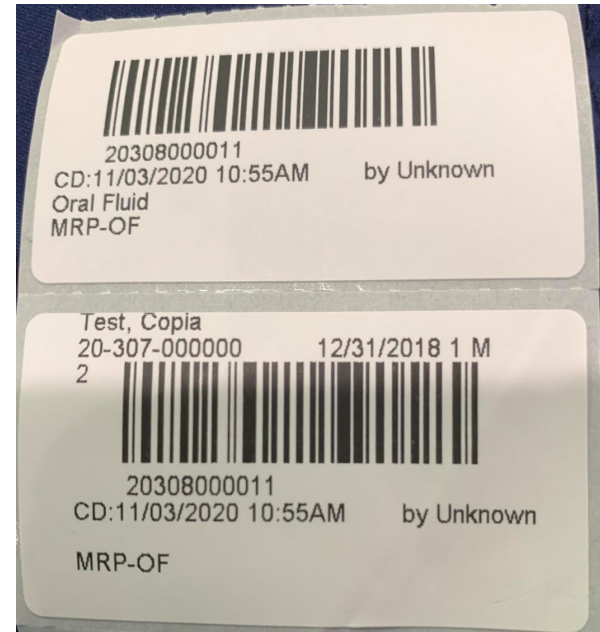
Priority	CPT Code	Name	Tube/Container	Host Code	ICD Codes	ABN Status
R		Covid 2019 Testing	(1) Swab Buffer	CVD19		N/A

ROOM TEMPERATURE
Billing: Patient Bill

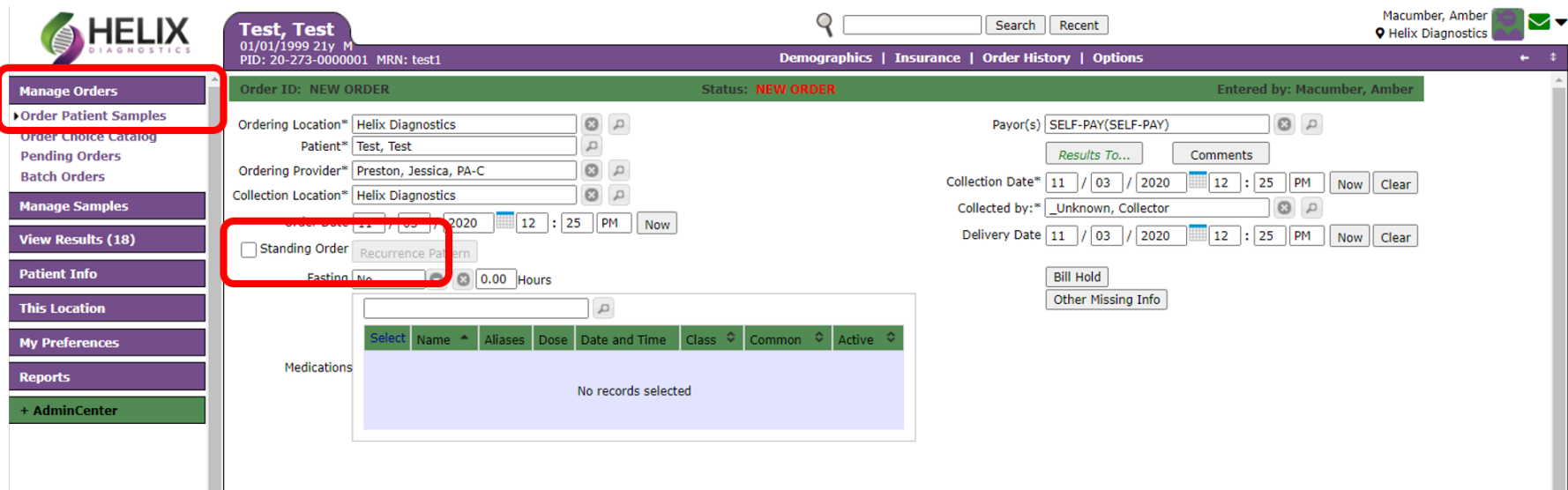
Clinical Info:

Order Choices	Questions	Answers
CVD19	Site	
CVD19	Source	

Example of Specimen Labels



Section 5 Creating a Standing Order



HELIX DIAGNOSTICS

Test, Test
01/01/1999 21y M
PID: 20-273-000001 MRN: test1

Demographics | Insurance | Order History | Options

Order ID: NEW ORDER Status: NEW ORDER Entered by: Macumber, Amber

Ordering Location* Helix Diagnostics
Patient* Test, Test
Ordering Provider* Preston, Jessica, PA-C
Collection Location* Helix Diagnostics

Order Date 11 / 03 / 2020 12 : 25 PM Now
 Standing Order Recurrence Pattern
 Fasting No 0.00 Hours

Payor(s) SELF-PAY(SELF-PAY)
 Results To... Comments
 Collection Date* 11 / 03 / 2020 12 : 25 PM Now Clear
 Collected by* _Unknown, Collector
 Delivery Date 11 / 03 / 2020 12 : 25 PM Now Clear
 Bill Hold
 Other Missing Info

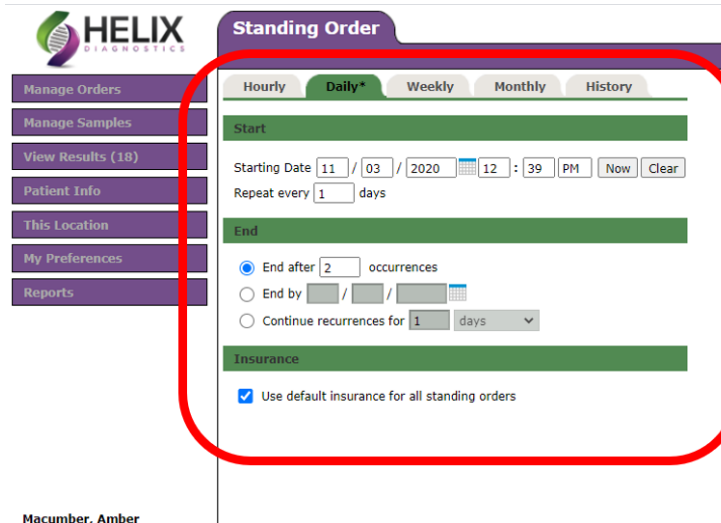
Medications

Select	Name	Aliases	Dose	Date and Time	Class	Common	Active
No records selected							

After starting a new order on a patient. Click the box next to “**Standing Order.**”

The screen to the right will come up. You can set the recurrence pattern for your standing order on this screen.

When you are done click “**Save.**”



HELIX DIAGNOSTICS

Standing Order

Manage Orders
 Manage Samples
 View Results (18)
 Patient Info
 This Location
 My Preferences
 Reports

Hourly **Daily*** Weekly Monthly History

Start

Starting Date 11 / 03 / 2020 12 : 39 PM Now Clear
 Repeat every 1 days

End

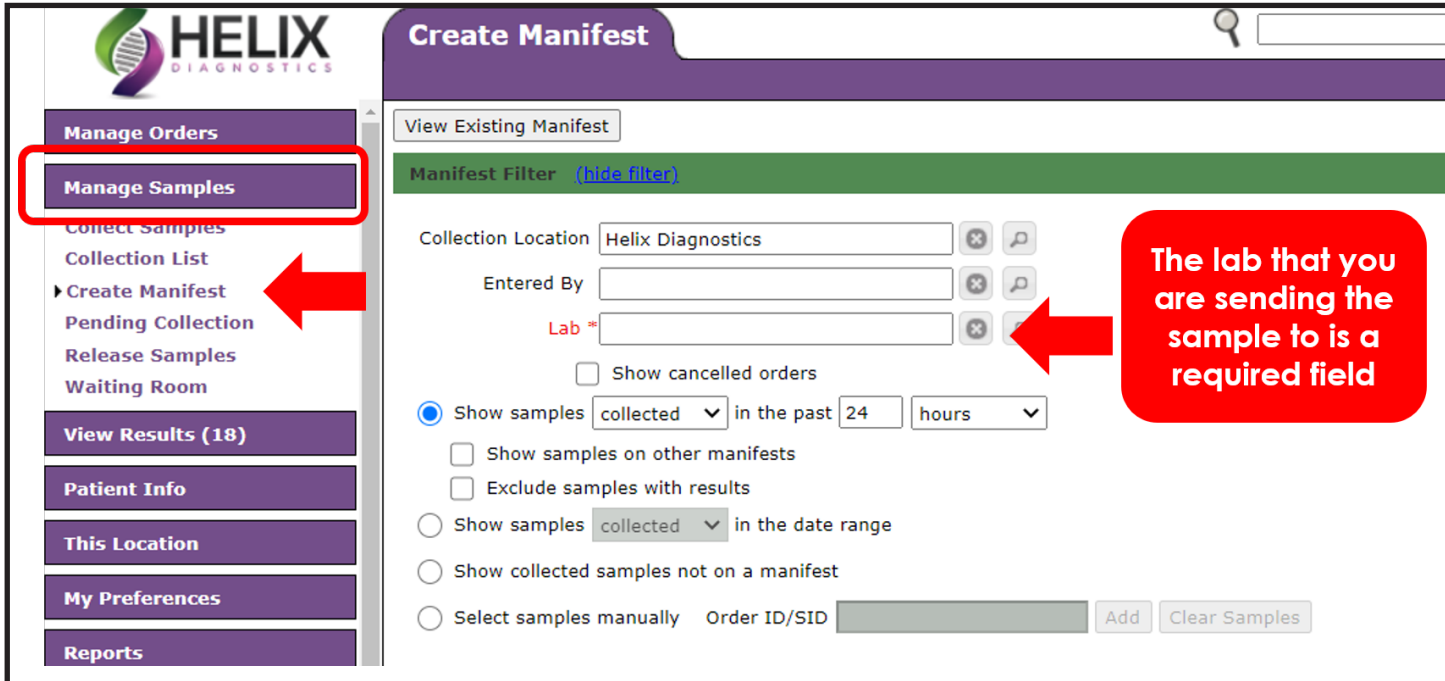
End after 2 occurrences
 End by / /
 Continue recurrences for 1 days

Insurance

Use default insurance for all standing orders

Enter the recurrence pattern for the standing order. This order can be placed to start at a future date.

Section 6 Creating a Manifest and Collection List



The screenshot shows the 'Create Manifest' interface. On the left sidebar, 'Manage Samples' is highlighted with a red box, and a red arrow points to 'Create Manifest'. In the main content area, the 'Lab **' field is highlighted with a red arrow pointing to a red callout box that says 'The lab that you are sending the sample to is a required field'. Other fields include 'Collection Location' (Helix Diagnostics), 'Entered By', and various filter options for sample status and time range.

Manifest - A manifest allows a group of samples to be tracked together to the testing location with one tracking ID and information.

You must choose the lab before creating the manifest.

Select the samples that are being packaged for delivery or shipping to the laboratory. Then select **“Create Manifest.”**

Manifest

Create Manifest Refresh

Total rows selected: 3 Clear


Show 10 entries Showing 1 to 10 of 17 entries

Sample Collection Location	Select	Order ID	Patient	Sample ID	Collection Date/Time	Order Date/Time	Order Choices	Host Codes	Proposed Collection Location
Helix Diagnostics	<input type="checkbox"/>	HLXD-20306-00001	Test, Test	20306000004	11/01/2020 2:22PM	11/01/2020 2:15PM	HH	HH	Helix Diagnostics
Helix Diagnostics	<input type="checkbox"/>	HLXD-20306-00002 (S)	Test, Test	20306000005	11/01/2020 3:37PM	11/01/2020 3:37PM	CBC	CBC	Helix Diagnostics
Helix Diagnostics	<input type="checkbox"/>	HLXD-20306-00004	Test, Test	20306000007	11/01/2020 3:47PM	11/01/2020 3:48PM	GLU	GLU	Helix Diagnostics
Helix Diagnostics	<input checked="" type="checkbox"/>	HLXD-20306-00007	Test, Test	20306000010	11/01/2020 4:19PM	11/01/2020 4:27PM	AMPH	AMPH	Helix Diagnostics
Helix Diagnostics	<input type="checkbox"/>	HLXD-20306-00007	Test, Test	20306000011	11/01/2020 4:19PM	11/01/2020 4:27PM	CVD19	CVD19	Helix Diagnostics
Helix Diagnostics	<input checked="" type="checkbox"/>	HLXD-20306-00007	Test, Test	20306000012	11/01/2020 4:19PM	11/01/2020 4:27PM	GLU	GLU	Helix Diagnostics
Helix Diagnostics	<input type="checkbox"/>	HLXD-20306-00007	Test, Test	20306000013	11/01/2020 4:19PM	11/01/2020 4:27PM			Helix Diagnostics
Helix Diagnostics	<input checked="" type="checkbox"/>	HLXD-20306-00008 (S)	Test, Test	20306000014	11/01/2020 5:34PM	11/01/2020 5:34PM			Helix Diagnostics

Scan or select the samples that are being packaged and shipped to the testing lab, then select “Create Manifest”

This form can be printed and packed with the samples for courier to pick up.

MANIFEST ID: HLXD-AMacumber-3071305

Manifest ID Bar Code: 

Manifest Date: 11/02/2020 1:05PM

From: **Helix Diagnostics**
6620 Highland Road
Suite 240
WATERFORD, MI 48327
8882755221

To: **Harvest**

Manifest Sample Count: 3

Courier: _____

Order ID: HLXD-20306-00007 Provider: Preston, Jessica, PA-C
Patient ID: 20-273-0000001 Bill Type: Direct Bill
Name: Test, Test Account #:
DOB: 01/01/1999 Insurance:
Sex: M Subscriber ID:
Order Comments:

Order Choice Code	Order Choice Name	Tube(s)/Container(s)	ICD Code(s)	Collected
AMPH	Amphetamine	(1) Urine Cup	F11.20, U07.1	11/01/2020 4:19PM

SID: 20306000010

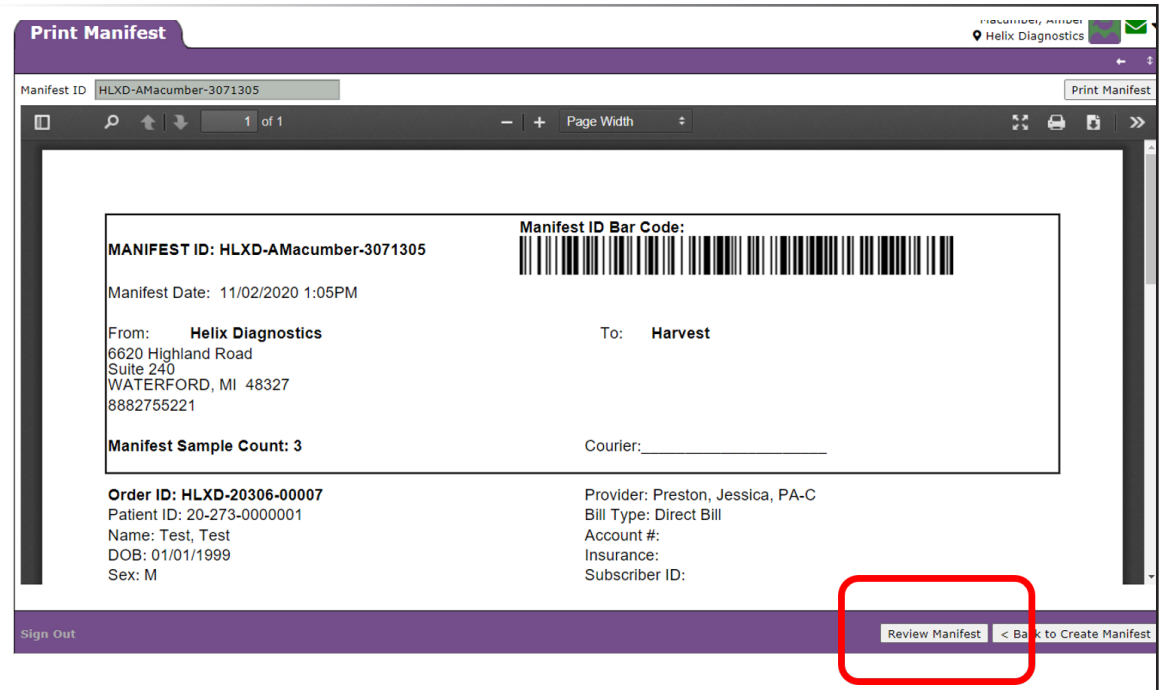
Order Choice Code	Order Choice Name	Tube(s)/Container(s)	ICD Code(s)	Collected
GLU	Glucose, Random	(1) Gold Top/SST	F11.20, U07.1	11/01/2020 4:19PM

Order ID: HLXD-20306-00008 Provider: Preston, Jessica, PA-C
Patient ID: 20-273-0000001 Bill Type: Direct Bill
Name: Test, Test Account #:
DOB: 01/01/1999 Insurance:
Sex: M Subscriber ID:
Order Comments:

Order Choice Code	Order Choice Name	Tube(s)/Container(s)	ICD Code(s)	Collected
AMPH	Amphetamine	(1) Urine Cup	F11.20	11/01/2020 5:34PM

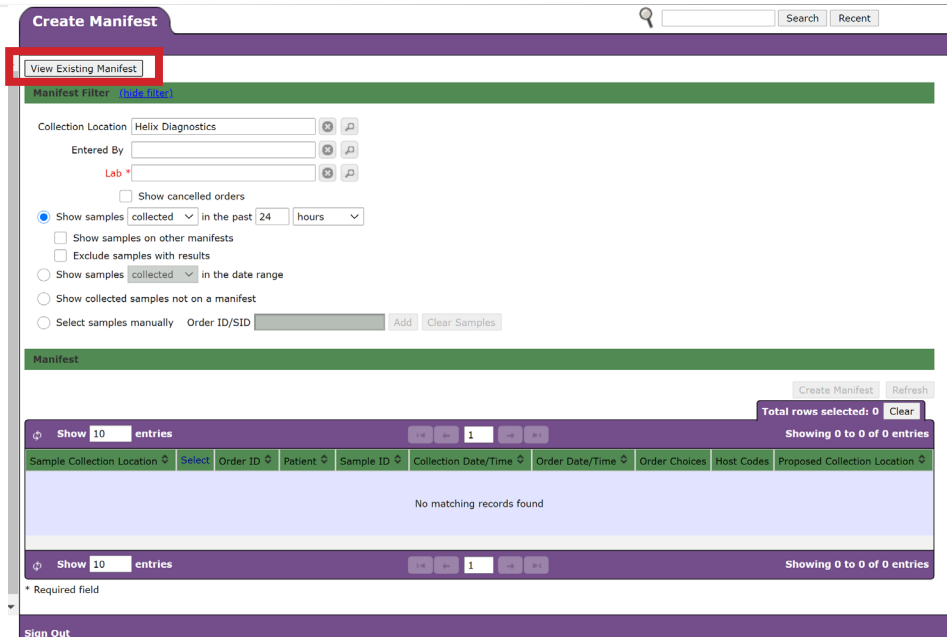
You can print the manifest at this screen.
Click **“Print Manifest”**

When done click **“Review Manifest”** and it will take you back to the Create Manifest Screen where you can review the manifest created or view other manifest.

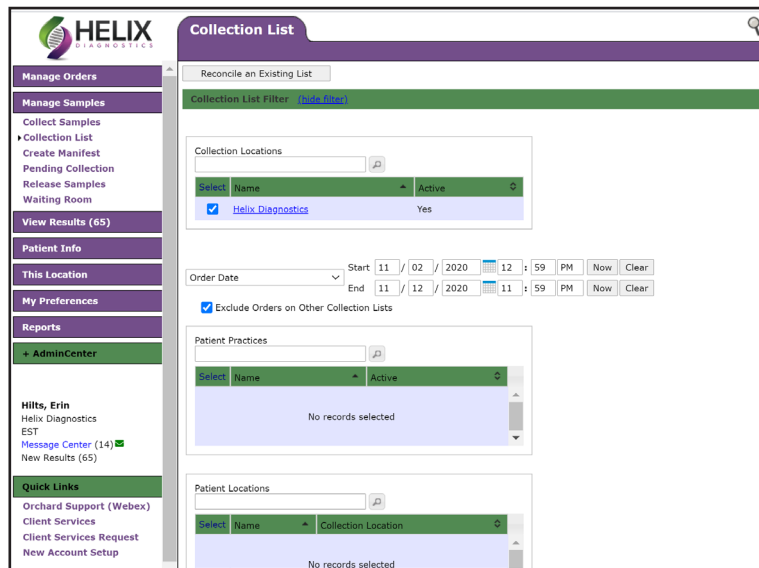


To view your manifest or other manifests click on **“View Existing Manifests.”**

You can review and reprint manifests.

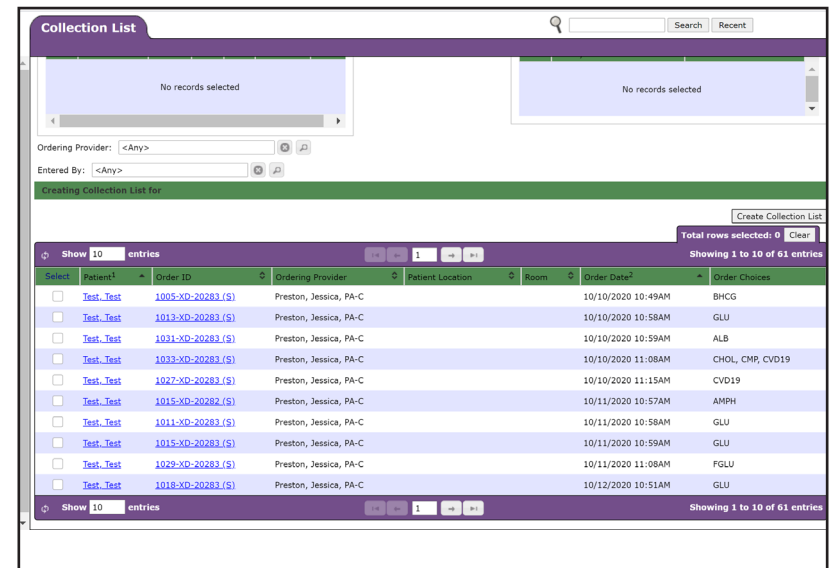


Collection List



A **Collection List** can be used to keep track of your orders.(ex.Draw Log) This is not required but is a helpful tool for your office.

Click “**Collection List**” under Manage Samples.
Choose your location and select a date range.



Select	Patient ¹	Order ID	Ordering Provider	Patient Location	Room	Order Date ²	Order Choices
<input type="checkbox"/>	Test_Test	1005-YD-20283.(S)	Preston, Jessica, PA-C			10/10/2020 10:49AM	BHCG
<input type="checkbox"/>	Test_Test	1013-YD-20283.(S)	Preston, Jessica, PA-C			10/10/2020 10:58AM	GLU
<input type="checkbox"/>	Test_Test	1031-YD-20283.(S)	Preston, Jessica, PA-C			10/10/2020 10:59AM	ALB
<input type="checkbox"/>	Test_Test	1033-YD-20283.(S)	Preston, Jessica, PA-C			10/10/2020 11:08AM	CHOL, CMP, CVD19
<input type="checkbox"/>	Test_Test	1027-YD-20283.(S)	Preston, Jessica, PA-C			10/10/2020 11:15AM	CVD19
<input type="checkbox"/>	Test_Test	1015-YD-20282.(S)	Preston, Jessica, PA-C			10/11/2020 10:57AM	AMPH
<input type="checkbox"/>	Test_Test	1011-YD-20283.(S)	Preston, Jessica, PA-C			10/11/2020 10:58AM	GLU
<input type="checkbox"/>	Test_Test	1015-YD-20283.(S)	Preston, Jessica, PA-C			10/11/2020 10:59AM	GLU
<input type="checkbox"/>	Test_Test	1029-YD-20283.(S)	Preston, Jessica, PA-C			10/11/2020 11:08AM	FGLU
<input type="checkbox"/>	Test_Test	1018-YD-20283.(S)	Preston, Jessica, PA-C			10/12/2020 10:51AM	GLU

Scroll down to the bottom of the page and select the orders for that date and then click “**Create Collection List.**”

Print Collection List

mits, erin
Helix Diagnostics

List ID: HLXD-EHilts-3171332

Summary Master Label Count (per order) 1

Include ABNs in Printed List

Fax List

Lab Master Label Count (per order) 1

Include Requisitions in Printed List

Print Labels

Extra Tube/Container Labels (per tube/container) 0

Include collected samples when printing labels

Collection List Phlebotomist/Collector Search Clear

Print List

Collection List ID: HLXD-EHilts-3171332 Collection Location: Helix Diagnostics
 List Created: 11/12/2020 1:32PM
 Orders to Collect: 10 Created by: Hilts, Erin

Patient: Test, Test (21y M) PID: 20-273-0000001

Order ID: 1005-XD-20283

SID	Order Choice	Instructions	Tubes/Containers
20283000011	BHCG		(1) Gold Top/SST

Order ID: 1013-XD-20283

SID	Order Choice	Instructions	Tubes/Containers
20283000022	GLU		(1) Gold Top/SST

Order ID: 1031-XD-20283

SID	Order Choice	Instructions	Tubes/Containers
20283000040	ALB		(1) Gold Top/SST

Order ID: 1033-XD-20283

Clinical Info:

Required	Questions	Answers
Optional	Site	
Optional	Source	

SID	Order Choice	Instructions	Tubes/Containers
20283000043	CHOL_CMP		(1) Gold Top/SST
20283000044	CVD19		(1) Swab Buffer

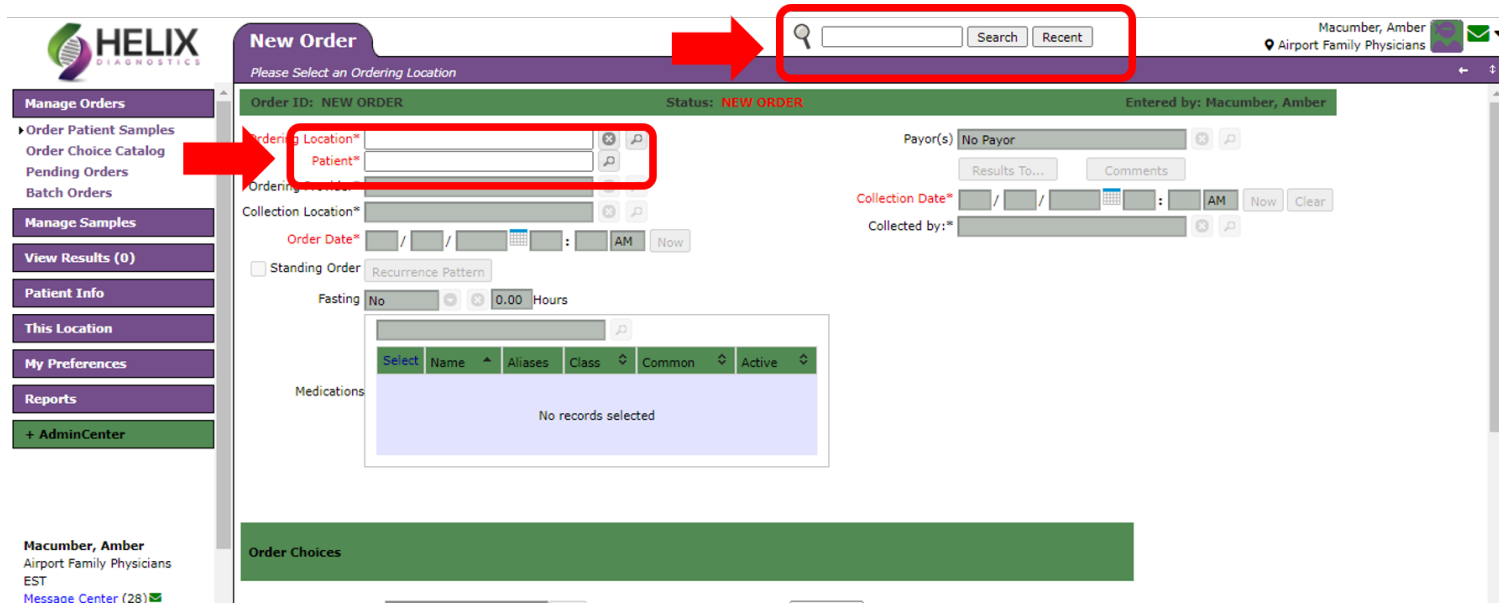
Order ID: 1027-XD-20283

Clinical Info:

Required	Questions	Answers
Optional	Site	
Optional	Source	

Example of a Collection List - This list can be printed. Click back to collection list to get out of this screen.

Section 7 Searching for a Patient or Order

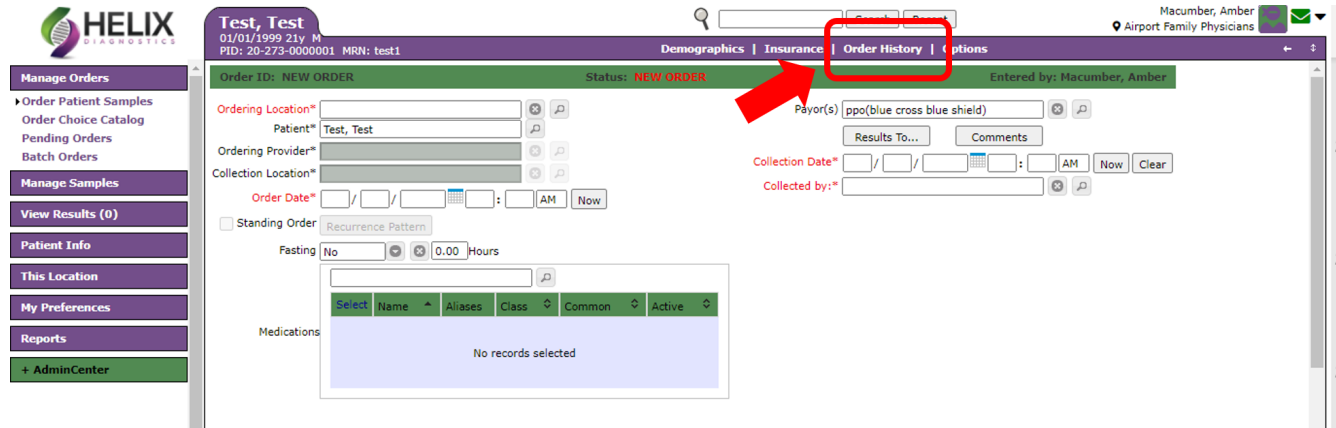


The screenshot shows the 'New Order' page in the HELIX Client Portal. The page is titled 'New Order' and has a status of 'NEW ORDER'. The user is logged in as 'Macumber, Amber' at 'Airport Family Physicians'. The page displays a search bar at the top right and a search field for 'Patient*' in the 'Ordering Location*' section. Red arrows point to these search elements. The page also displays a sidebar with navigation options like 'Manage Orders', 'Order Patient Samples', and 'Manage Samples'.

There are two ways to search for a patient's order. You can search a patient's name in the global search box or under "**Order Patient Samples.**"

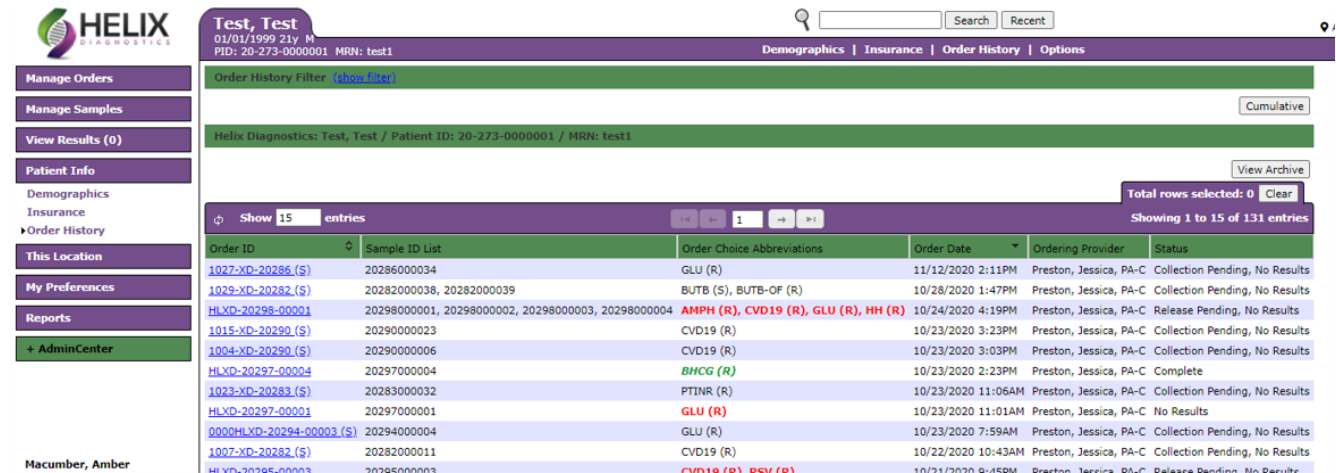
The global search, searches all patients in the system. Searching under "**Order Patient Samples**" only searches the patients already under your location. If you have never seen the patient before you can search to see if they have ever been to Helix and you can import the patient demographics.

When searching through the **“Order Patient Samples,”** after the patient is chosen. Click on **“Order History”** in the top purple bar.



The screenshot shows the Helix Diagnostics client portal interface. The top navigation bar includes links for Demographics, Insurance, **Order History** (highlighted with a red box and a red arrow), and Options. The main content area displays order details for a patient named 'Test, Test' (PID: 20-273-0000001, MRN: test1). The order status is 'NEW ORDER'. The interface includes fields for Ordering Location, Patient, Ordering Provider, Collection Location, Order Date, Standing Order, Recurrence Pattern, Fasting, and Medications. A red arrow points to the 'Order History' link in the top navigation bar.

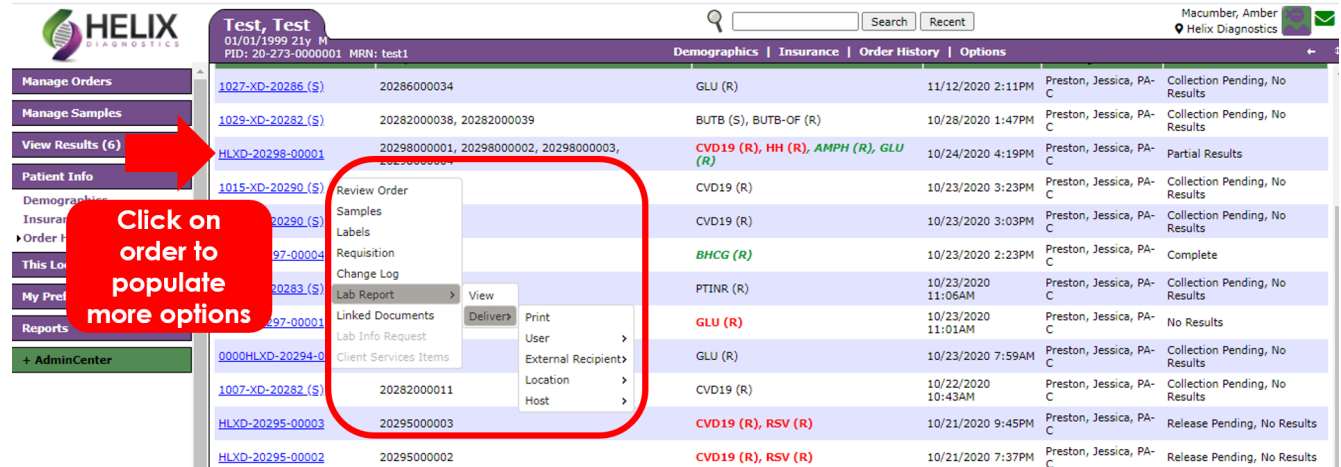
The order history will come up and show all the orders placed under the patient.



The screenshot shows the Helix Diagnostics client portal interface displaying the 'Order History' page. The top navigation bar includes links for Demographics, Insurance, Order History, and Options. The main content area displays a list of orders for the patient 'Test, Test' (PID: 20-273-0000001, MRN: test1). The list includes columns for Order ID, Sample ID List, Order Choice Abbreviations, Order Date, Ordering Provider, and Status. The status of the orders varies, including 'Collection Pending, No Results', 'Release Pending, No Results', and 'Complete'. A red arrow points to the 'Order History' link in the top navigation bar.

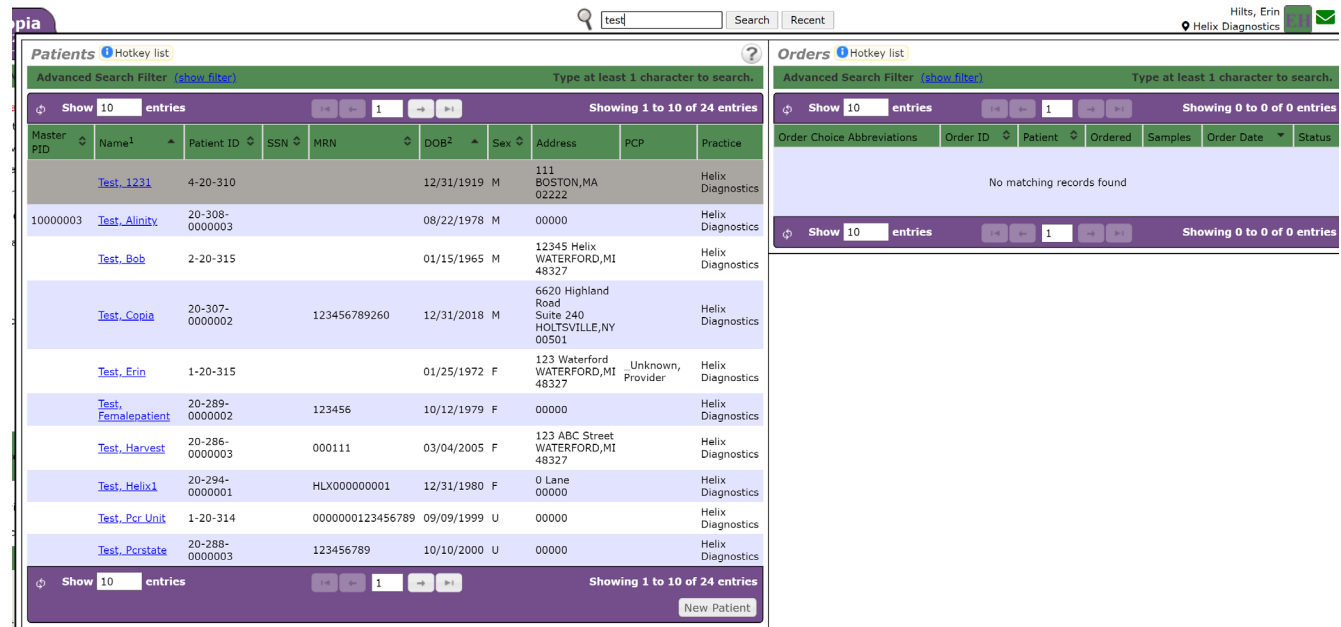
Order ID	Sample ID List	Order Choice Abbreviations	Order Date	Ordering Provider	Status
1027-XD-20286 (S)	20286000034	GLU (R)	11/12/2020 2:11PM	Preston, Jessica, PA-C	Collection Pending, No Results
1029-XD-20282 (S)	20282000036, 20282000039	BUTB (S), BUTB-OF (R)	10/28/2020 1:47PM	Preston, Jessica, PA-C	Collection Pending, No Results
HLXD-20298-00001	20298000001, 20298000002, 20298000003, 20298000004	AMPH (R), CVD19 (R), GLU (R), HH (R)	10/24/2020 4:19PM	Preston, Jessica, PA-C	Release Pending, No Results
1015-XD-20290 (S)	20290000023	CVD19 (R)	10/23/2020 3:23PM	Preston, Jessica, PA-C	Collection Pending, No Results
1004-XD-20290 (S)	20290000006	CVD19 (R)	10/23/2020 3:03PM	Preston, Jessica, PA-C	Collection Pending, No Results
HLXD-20297-00004	20297000004	BHCG (R)	10/23/2020 2:23PM	Preston, Jessica, PA-C	Complete
1023-XD-20283 (S)	20283000032	PTINR (R)	10/23/2020 11:06AM	Preston, Jessica, PA-C	Collection Pending, No Results
HLXD-20297-00001	20297000001	GLU (R)	10/23/2020 11:01AM	Preston, Jessica, PA-C	No Results
0000HLXD-20294-00003 (S)	20294000004	GLU (R)	10/23/2020 7:59AM	Preston, Jessica, PA-C	Collection Pending, No Results
1007-XD-20282 (S)	20282000011	CVD19 (R)	10/22/2020 10:43AM	Preston, Jessica, PA-C	Collection Pending, No Results

Click on the order to populate more options.
(Ex. Review Order, Labels, Lab Report)



Order ID	MRN	Test Name	Order Date	Order Time	Ordering Provider	Result Status
1027-XD-20286 (S)	20286000034	GLU (R)	11/12/2020	2:11PM	Preston, Jessica, PA-C	Collection Pending, No Results
1029-XD-20282 (S)	20282000038, 20282000039	BUTB (S), BUTB-OF (R)	10/28/2020	1:47PM	Preston, Jessica, PA-C	Collection Pending, No Results
HLXD-20298-00001	20298000001, 20298000002, 20298000003	CVD19 (R), HH (R), AMPH (R), GLU (R)	10/24/2020	4:19PM	Preston, Jessica, PA-C	Partial Results
1015-XD-20290 (S)		CVD19 (R)	10/23/2020	3:23PM	Preston, Jessica, PA-C	Collection Pending, No Results
20290 (S)		CVD19 (R)	10/23/2020	3:03PM	Preston, Jessica, PA-C	Collection Pending, No Results
97-00004		BHCG (R)	10/23/2020	2:23PM	Preston, Jessica, PA-C	Complete
20283 (S)		PTINR (R)	10/23/2020	11:06AM	Preston, Jessica, PA-C	Collection Pending, No Results
97-00001		GLU (R)	10/23/2020	11:01AM	Preston, Jessica, PA-C	No Results
0000HLXD-20294-0		GLU (R)	10/23/2020	7:59AM	Preston, Jessica, PA-C	Collection Pending, No Results
1007-XD-20282 (S)	20282000011	CVD19 (R)	10/22/2020	10:43AM	Preston, Jessica, PA-C	Collection Pending, No Results
HLXD-20295-00003	20295000003	CVD19 (R), RSV (R)	10/21/2020	9:45PM	Preston, Jessica, PA-C	Release Pending, No Results
HLXD-20295-00002	20295000002	CVD19 (R), RSV (R)	10/21/2020	7:37PM	Preston, Jessica, PA-C	Release Pending, No Results

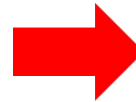
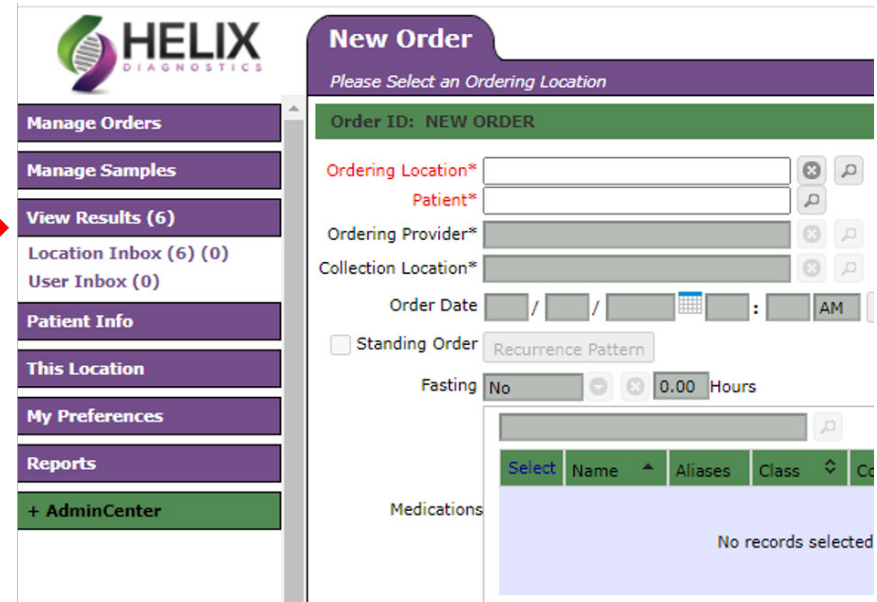
To search in the main global search box, type in the patient name. Click on the patient name and other options will pop up. Click "**Order History**" and the order history will populate like the above screens.



Master PID	Name	Patient ID	SSN	MRN	DOB	Sex	Address	PCP	Practice
Test_1231		4-20-310			12/31/1919	M	111 BOSTON, MA 02222		Helix Diagnostics
10000003	Test_Aliniv	20-308-0000003			08/22/1978	M	00000		Helix Diagnostics
	Test_Bob	2-20-315			01/15/1965	M	12345 Helix WATERFORD, MI 48327		Helix Diagnostics
	Test_Conia	20-307-0000002		123456789260	12/31/2018	M	6620 Highland Road Suite 240 HOLTSVILLE, NY 00501		Helix Diagnostics
	Test_Erin	1-20-315			01/25/1972	F	123 Waterford WATERFORD, MI 48327	Unknown, Provider	Helix Diagnostics
	Test_Femalepatient	20-289-0000002		123456	10/12/1979	F	00000		Helix Diagnostics
	Test_Harvest	20-286-0000003		000111	03/04/2005	F	123 ABC Street WATERFORD, MI 48327		Helix Diagnostics
	Test_Helix1	20-294-0000001		HLX000000001	12/31/1980	F	0 Lane 00000		Helix Diagnostics
	Test_Pcr_Unit	1-20-314		0000000123456789	09/09/1999	U	00000		Helix Diagnostics
	Test_Pcrstate	20-288-0000003		123456789	10/10/2000	U	00000		Helix Diagnostics

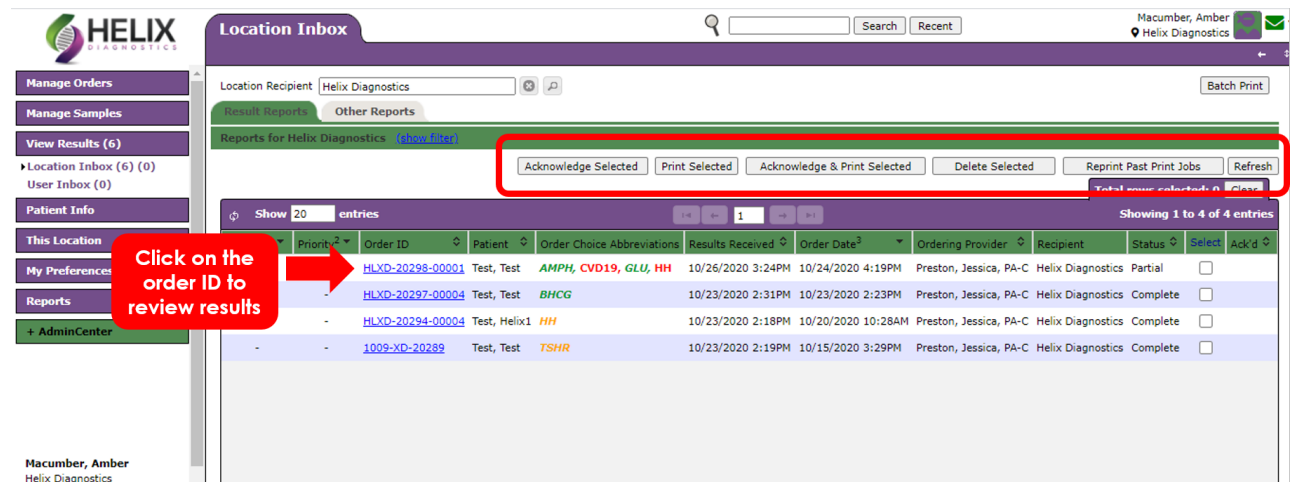
Section 8 Viewing Results - Inbox

To view results in your inbox, on the left side of the screen click on “**View Results.**”
 You have the choice of **Location Inbox** or **User Inbox**. The user inbox is specific to the results ordered by the specific provider. The location inbox is all results ordered under that location.

The screenshot shows the Helix Diagnostics Client Portal interface. On the left is a navigation menu with items: Manage Orders, Manage Samples, View Results (6), Location Inbox (6) (0), User Inbox (0), Patient Info, This Location, My Preferences, Reports, and + AdminCenter. The main content area is titled 'New Order' and contains a form for creating a new order. The form includes fields for Ordering Location*, Patient*, Ordering Provider*, Collection Location*, Order Date, and Fasting (No, 0.00 Hours). There are also checkboxes for Standing Order and Recurrence Pattern. A table for Medications is shown below, with columns for Select, Name, Aliases, Class, and a search icon. The table currently shows 'No records selected'.

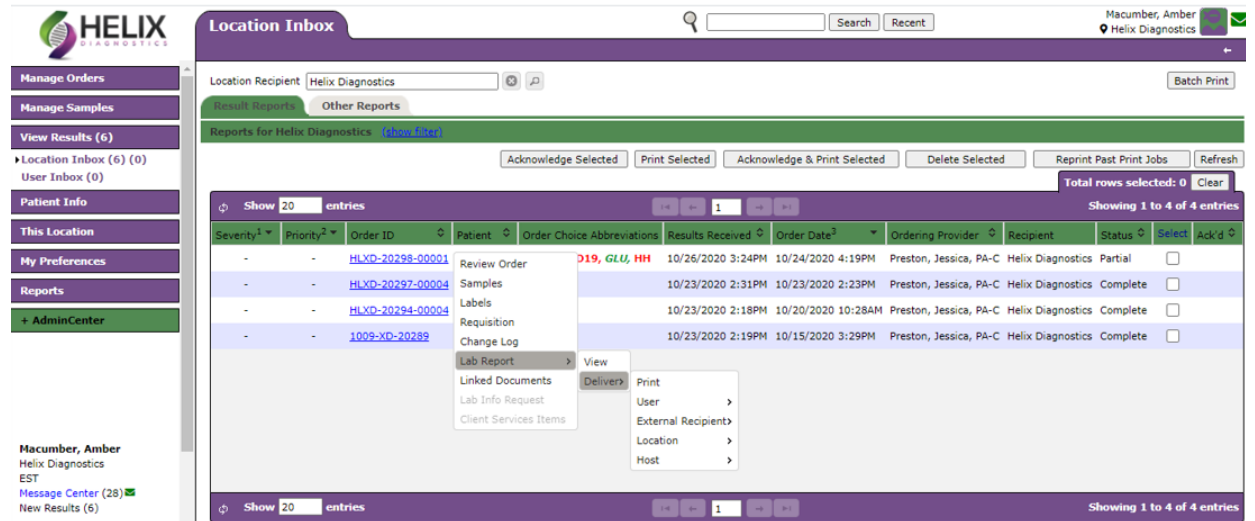
Click on the **Order ID** to review a result. Once a result is reviewed/acknowledged it will no longer appear in the inbox but is still available under the specific patient. If you do not acknowledge the results your inbox will build up.



The screenshot shows the 'Location Inbox' page. At the top, there is a search bar and a 'Recent' button. Below the search bar, there are tabs for 'Result Reports' and 'Other Reports'. A table of reports is displayed, with columns for Priority, Order ID, Patient, Order Choice Abbreviations, Results Received, Order Date, Ordering Provider, Recipient, Status, Select, and Ack'd. The table shows 4 entries. A red box highlights the action buttons at the top of the table: Acknowledge Selected, Print Selected, Acknowledge & Print Selected, Delete Selected, Reprint Past Print Jobs, and Refresh. A red callout box with an arrow points to the 'Order ID' column header, with the text 'Click on the order ID to review results'.

Priority	Order ID	Patient	Order Choice Abbreviations	Results Received	Order Date	Ordering Provider	Recipient	Status	Select	Ack'd
-	HLXD-20298-00001	Test, Test	AMPH, CVD19, GLU, HH	10/26/2020 3:24PM	10/24/2020 4:19PM	Preston, Jessica, PA-C	Helix Diagnostics	Partial	<input type="checkbox"/>	<input type="checkbox"/>
-	HLXD-20297-00004	Test, Test	BHCG	10/23/2020 2:31PM	10/23/2020 2:23PM	Preston, Jessica, PA-C	Helix Diagnostics	Complete	<input type="checkbox"/>	<input type="checkbox"/>
-	HLXD-20294-00004	Test, Helix1	HH	10/23/2020 2:18PM	10/20/2020 10:28AM	Preston, Jessica, PA-C	Helix Diagnostics	Complete	<input type="checkbox"/>	<input type="checkbox"/>
-	1009-XD-20289	Test, Test	YSHR	10/23/2020 2:19PM	10/15/2020 3:29PM	Preston, Jessica, PA-C	Helix Diagnostics	Complete	<input type="checkbox"/>	<input type="checkbox"/>

When you click on the **Order ID** you will be given more options. You have the ability to view the report, print the result, or even send to an external recipient.

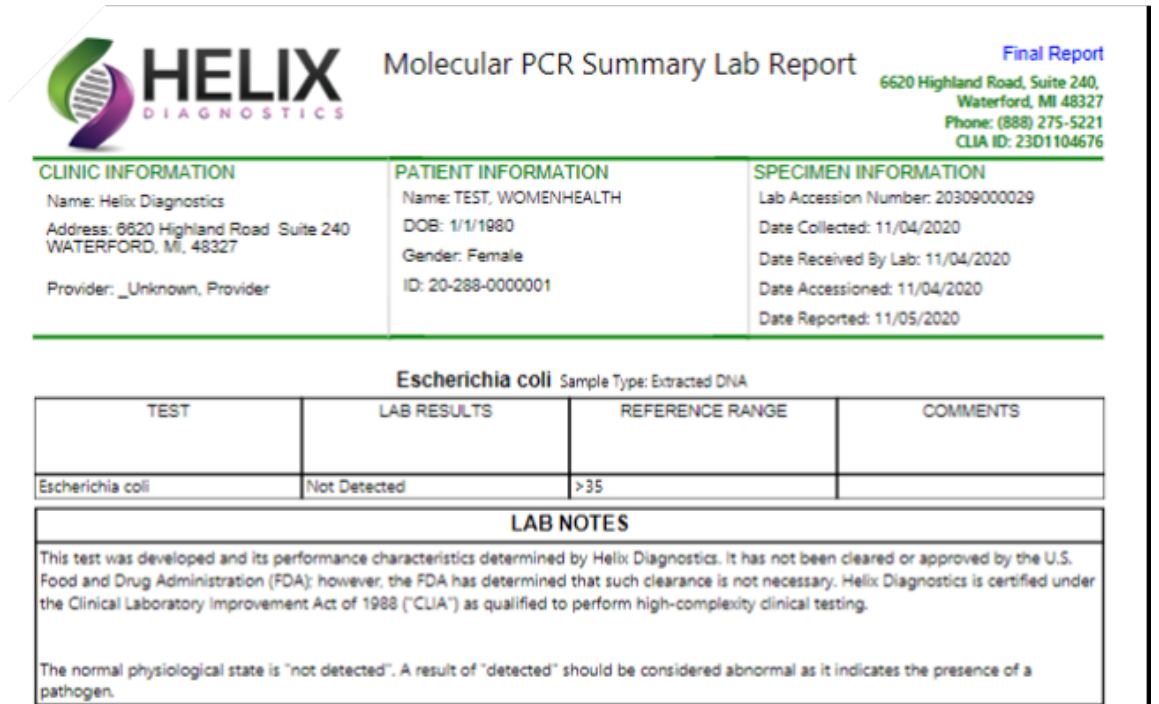


Location Recipient: Helix Diagnostics

Reports for Helix Diagnostics

Severity ¹	Priority ²	Order ID	Patient	Order Choice Abbreviations	Results Received	Order Date ³	Ordering Provider	Recipient	Status	Ack/d
-	-	HLXD-20298-00001		D19, GLU, HH	10/26/2020 3:24PM	10/24/2020 4:19PM	Preston, Jessica, PA-C	Helix Diagnostics	Partial	<input type="checkbox"/>
-	-	HLXD-20297-00004			10/23/2020 2:31PM	10/23/2020 2:23PM	Preston, Jessica, PA-C	Helix Diagnostics	Complete	<input type="checkbox"/>
-	-	HLXD-20294-00004			10/23/2020 2:18PM	10/20/2020 10:28AM	Preston, Jessica, PA-C	Helix Diagnostics	Complete	<input type="checkbox"/>
-	-	1009-XD-20289			10/23/2020 2:19PM	10/15/2020 3:29PM	Preston, Jessica, PA-C	Helix Diagnostics	Complete	<input type="checkbox"/>

Example of a patient report



HELIX DIAGNOSTICS Molecular PCR Summary Lab Report Final Report
6620 Highland Road, Suite 240,
Waterford, MI 48327
Phone: (888) 275-5221
CLIA ID: 23D1104676

CLINIC INFORMATION	PATIENT INFORMATION	SPECIMEN INFORMATION
Name: Helix Diagnostics Address: 6620 Highland Road Suite 240 WATERFORD, MI, 48327 Provider: _Unknown, Provider	Name: TEST, WOMENHEALTH DOB: 1/1/1980 Gender: Female ID: 20-288-0000001	Lab Accession Number: 20309000029 Date Collected: 11/04/2020 Date Received By Lab: 11/04/2020 Date Accessioned: 11/04/2020 Date Reported: 11/05/2020

Escherichia coli Sample Type: Extracted DNA

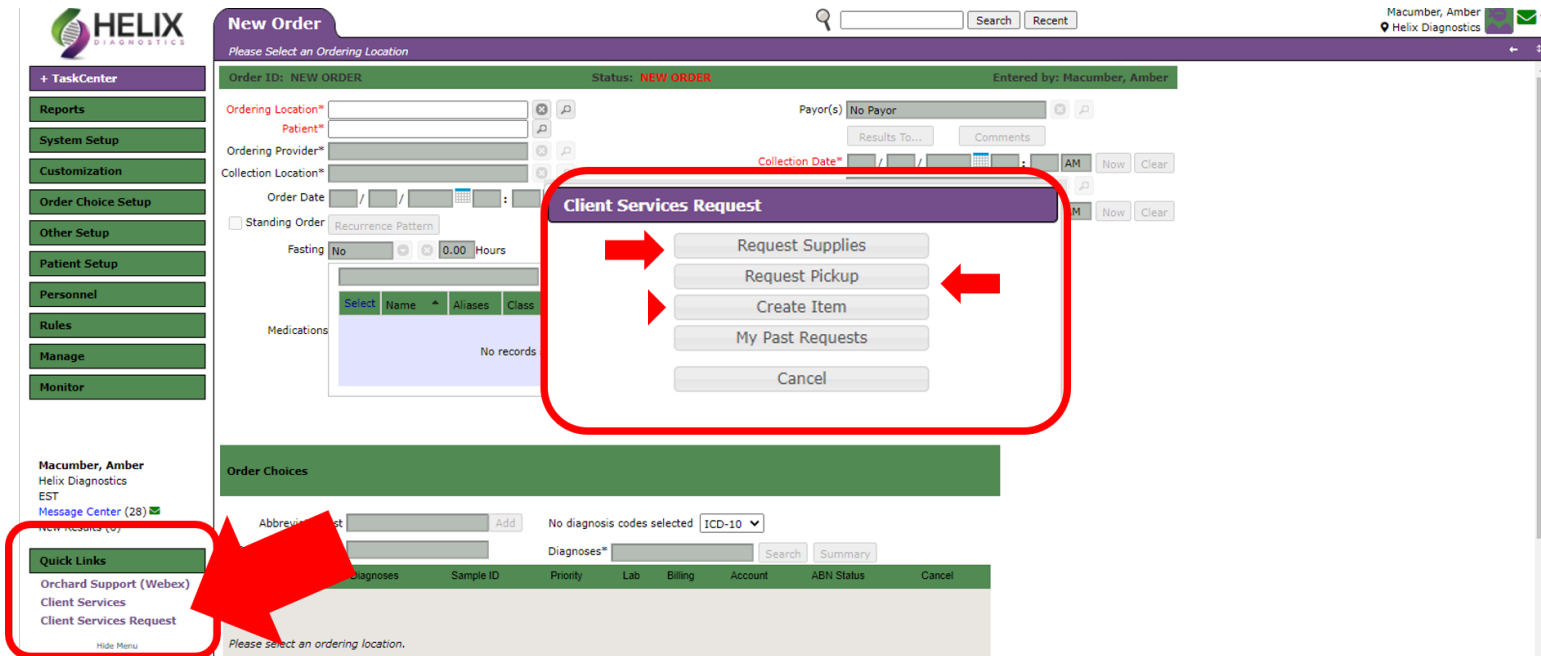
TEST	LAB RESULTS	REFERENCE RANGE	COMMENTS
Escherichia coli	Not Detected	>35	

LAB NOTES

This test was developed and its performance characteristics determined by Helix Diagnostics. It has not been cleared or approved by the U.S. Food and Drug Administration (FDA); however, the FDA has determined that such clearance is not necessary. Helix Diagnostics is certified under the Clinical Laboratory Improvement Act of 1988 ("CLIA") as qualified to perform high-complexity clinical testing.

The normal physiological state is "not detected". A result of "detected" should be considered abnormal as it indicates the presence of a pathogen.

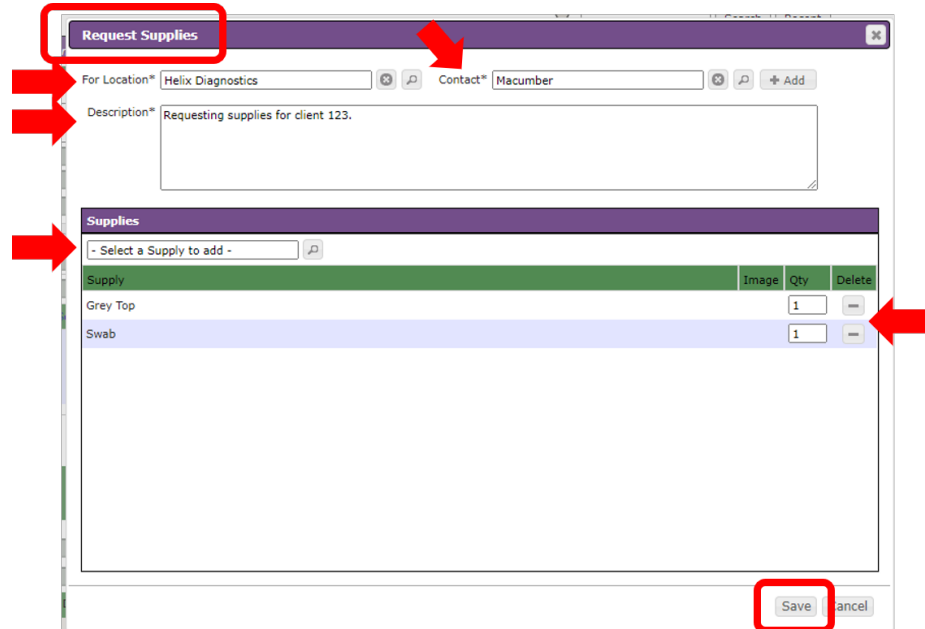
Section 9 Client Service Request



The screenshot displays the Helix Diagnostics Client Portal interface. The main content area is titled "New Order" and contains a form for creating a new order. The form includes fields for "Ordering Location*", "Patient*", "Ordering Provider*", "Collection Location*", "Order Date", "Fasting" (set to No), and "Recurrence Pattern". A "Client Services Request" modal is open, showing options to "Request Supplies", "Request Pickup", "Create Item", "My Past Requests", and "Cancel". Red arrows indicate the flow from the "Quick Links" menu in the bottom left to the "Client Services Request" modal, and from the modal to the "Request Supplies" and "Request Pickup" buttons.

Copia also allows for you to input client service requests for supplies and pickups. This feature is located on the bottom left of your screen under “**Quick Links**.” Click on “**Client Services Request**” and a box will pop up. You can click on “**Request Supplies**” or “**Request Pickup**.”

Client Service Request - Supply Request



Request Supplies

For Location* Helix Diagnostics Contact* Macumber + Add

Description* Requesting supplies for client 123.

Supplies

- Select a Supply to add -

Supply	Image	Qty	Delete
Grey Top		1	-
Swab		1	-

Save Cancel

helixorchard.netsmartcloud.com says

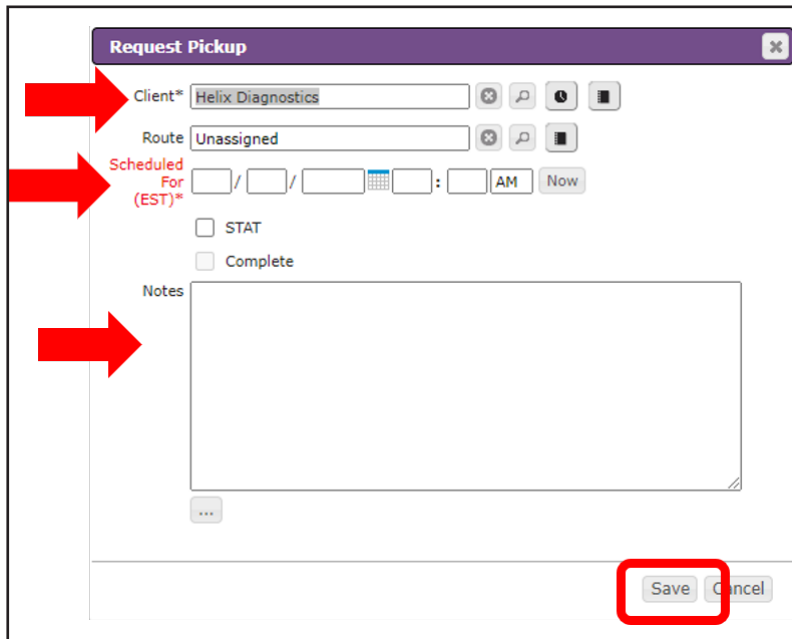
Thank you. Your request has been submitted.
 For your reference, here is your ticket #: Case-00000110
 Summary: Supply Request for Client: Helix Diagnostics

OK

Once the request has been saved a message will pop-up displaying a summary of your request and a case number

Click on “**Request Supplies.**” The box above will pop up. Items with an asterisks and highlighted in **red** are required. Choose your location and enter your name in the contact field. Search the supplies by typing in the name or once you click in the the search field a supply list will pop up. Click on the desired supply and then put in the quantity. In the description field you can type in notes about the order or if you do not see a supply type in this box. When done click “**Save.**”

Client Service Request - Pickup Request

A screenshot of a web application window titled "Request Pickup". The window contains several input fields and checkboxes. Three red arrows point to the "Client*" field (containing "Helix Diagnostics"), the "Scheduled For (EST)" field (with a date and time picker), and the "Notes" text area. A red box highlights the "Save" button at the bottom right of the form. The "Route" field is set to "Unassigned". There are also checkboxes for "STAT" and "Complete".

Click on **"Request Pickup."** The box to the left will pop up. Items with an asterik and in **red** are required. Choose your location choose the date and enter any notes needed. (*ex. specimens in the box after 5pm*)

Click **"Save"**