

NxGen COVID-19 Test Onboarding Form

Clinic Information

Clinic Name	
Address line1	
Line 2	
City	
Zip code	
Telephone	
Fax	

Key Contact -For any sample related follow up

Name: First, Last	
Telephone	
Extension	
E-mail	

Ordering Physician - One Physician to be used as a default provider for all samples from the clinic.

Name: First, Last	
NPI	

Portal Access for on-line results

Name, First, Last	
E-mail	

EMAIL completed form to: COVID.ONBOARD@nxgenmdx.com

For any follow up questions please contact:

Naveen Kamireddi
Vice President of Operations
nkamireddi@nxgenmdx.com
Cell: 616-516-3103