



USER GUIDE

IdentiLinkSM

dnaidentilink.labcorp.com



Login

IdentiLinkSM is a secure, user-friendly system that allows you to request scheduling for DNA collection, check the status of a case, view/print/download results and much more.

This is the first screen that will appear when logging in to IdentiLink. You may return to this screen by selecting the Home tab from any page.

The screenshot shows the IdentiLink Account Inquiry Application home screen. At the top left is the Labcorp logo. On the top right, there is a dropdown menu showing "NC - Web Demo Account" and a "Logout" button. Below the header is a navigation bar with tabs: Home, Accounts, Case Search, Schedule, Create CA, Reports, Order Supplies, and Collection Demo. The main content area has a heading "Welcome to Labcorp's IdentiLinkSM Account Inquiry Application" and a sub-heading "Welcome, Admin User". A red message states "You have new Broadcast Messages as of 10/05/2022 02:24 PM!". Below this are eight function tiles arranged in a 2x4 grid:

- View Account**: Allows for viewing of user accounts.
- Case Search**: Allows for the retrieval of previously tested cases.
- Schedule / Reschedule Search**: Allows the user to inquire on submitted schedules.
- Schedule Collection**: Allows the user to submit party(ies) to be drawn for testing.
- Create Client Authorization**: Allows the user to create and populate a Client Authorization Form.
- User Maintenance**: Allows a user to disable another user.
- Change Password**: Allows the user to change his/her password.
- Order Supplies**: Allows the user to order supplies.

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Main Menu



NC - Web Demo Account

Logout

Home

Accounts

Case Search

Schedule ▾

Create CA

Reports ▾

Order Supplies

Collection Demo

Print

This menu will remain on the top of your screen while you are in IdentiLinkSM to help you easily navigate from one function to another.

Home: Provides a description of the most commonly used functions on IdentiLink. You may access this screen from any page by clicking the Home tab.

Accounts: Provides a listing of accounts you are authorized to access. All active cases under the selected account will be displayed.

Case Search: Search case status, final genetic reports and specimen collection status. Case and specimen information is archived for seven (7) years.

Schedule: Submit a request for specimen collection, reschedule missed appointments, view scheduled appointments and check collection status.

Create CA: Create and print a Client Authorization/Chain of Custody form. Labcorp will generate all Client Authorization/Chain of Custody documents for specimen collections scheduled by Labcorp.

Reports: Generate specimen and case information reports.

Order Supplies: Place an order for collection supplies.

Collection Demo: Provides a step-by-step demonstration of the buccal swab collection process.

Print: Borders and table of contents will be removed automatically, providing an easy-to-read format.

Logout: Terminates your session and protects access to your IdentiLink account.

Accounts

< Account List for Web Demo Account

Account Number	Account Name ↑
1 12001596	Identilink Test Account / Attn John - Belleville

Select the account number to generate a list of all active cases.

Select a Labcorp case number to display case details such as specimen collection date and case status. You may also view/print/download results from this screen.

< Case Detail Information for (C00-199902)

[Revise Case](#)

General Case Information

Case Status	Reference 1	Estimated Due Date
Full		Pending

Result Information

Prob. of Paternity	Final Result	Schedule Number
0.00%	Excluded	S210728-109

Party Information

Relationship	Name	Draw Date	Received Date
M	Mother Demo	10/02/2022	10/06/2022
C	Child Demo2	10/02/2022	10/06/2022
AF	Father Demo2	10/02/2022	10/06/2022

Lab Status - Finalized

Procedure	Started	Completed
Awaiting Additional Party(s)	10/06/2022	10/13/2022
Testing	10/10/2022	

Case Search

Search samples that have been previously collected or search case results by entering Party Name, Case Number or Reference 1.

Case Search

Search By *

Name

Labcorp Case Number

Case Reference Number

Last 4 Digits of SSN

Party Reference Number

First Name *

Last Name *

Search

ame provided that at least 3 characters are entered prior to the wild card character.

Choose the appropriate search option to locate a previously collected specimen. Select the Case Number link to view the Case Detail information.

1 Match(es) for Labcorp Case Number: C00999902

Reference 1	Reference 2	Reference 3	Labcorp Case Number	Relationship	Name
1			C00-999902	M	Demo, Mother
				C	Demo2, Child
				AF	Demo2, Father

Schedule

Schedule **Create CA**

Schedule/Reschedule Search

Schedule Collection

Select the desired Schedule Request link to view detailed scheduling information:

- Request a DNA collection
- Schedule an appointment
- Check the status of a scheduled collection

View the status of a sample collection by selecting one of these search options.

Schedule Search

Search By *

Name

Schedule Number

Reference Number

Last 4 Digits of SSN


First Name *

Last Name *

Search

ame provided that at least 3 characters are entered prior to the wild card character. In order to retrieve all schedules for a er followed by an *. Example: Entering S110601* will return all schedules for June 1, 2011.

12 Match(es) for First Name: Mother Last Name: Demo1

Schedule Request	Relationship	Name	Status
S210519-043 Reschedule 	M1	Demo1, Mary C	Print Paperwork
	C1	Demo1, Mother M	

Schedule

Schedule Detail Information for S210519-043

Revise Schedule Request View/Attach Documents

General Schedule Information

Schedule Request: S210519-043	Account: 12001596	Status: Print Paperwork	Active/Inactive: Active
Deceased: Yes	Stat: No	Comments: No	Start Date: 10/02/2022
Labcorp Case Number(s): C00-899901	Caller Name: Admin User	Phone: 555.555.5555	Fax: 999.999.9999
Email Address: amyperson@emailserver.com	Reference 1: -	Reference 2: -	Reference 3: -
Submitted Date: 10/02/2022 10:02 AM			

Schedule Party Information

Name	Relationship	To Be Scheduled	Deceased	Inmate	Sample
Demo1, Mary C	M1	See Deceased Info	Yes	No	No
Demo1, Mother M	C1	No	No	No	Yes

Collection Information

Child C Demo1 (Mother 1)

Appointment Date: Collection Appointment Pending

Collection Site: Any Collection Site, Any Street, Any Suite/Floor, Any City, ST #####, Any County, ###.###.####

Close

Click on Yes to view collection appointment details. If No is displayed, a scheduling request has not yet been received for that individual.

To create a new schedule request

Schedule Account Information

Account: 12001596 - IdentiLink Test Account / Admin John - Baller...

Contact First Name: Admin Contact Last Name: User

Phone Number: 5555555555 Ext: Fax Number: 5555555555

Email: john@labcorp.us@gmail.com

Reference 1: Reference 2: Reference 3:

Continue Additional Copies

Schedule Party Information

Party 1

Relationship: Select To Be Collected: ☐ Use Previous Sample: ☐

First Name: Last Name: MI

Address: City: State: Zip:

DOB: SSN: Race:

Provide all reference numbers such as case and docket numbers when submitting a scheduling request to ensure this information is included in the final genetic report.

Select Additional Copies and provide the party's mailing address to request that a copy of the final genetic report be sent to an additional party in the case.

Select Continue and enter the party's information.

Who should be scheduled for collection?

- Parties in a case that have not had a sample previously collected.
- Parties that will not be collected on your regularly scheduled collection date or at your designated collection facility.

Note: First name, last name and relationship of all parties in a case must be provided, even if Labcorp is not providing the collection service. Do **not** select To Be Collected if the sample collection will not be performed by Labcorp.

Schedule

If the mother's sample will not be provided for testing, enter the letters MNT (mother not tested) for the mother's first and last name.

If a party's sample has been previously collected and you wish to use their existing sample in this case, you may select Use Previous Sample. Once this selection is made, you will be directed to Find Sample which will enable you to locate the sample on file.

If a party is deceased or incarcerated, select the appropriate option and enter the additional information requested.

If the case involves multiple children or alleged fathers, select Add Party and enter the additional information requested.

Schedule Party Information

* Required fields if party is collected
** Gender should be entered for the child instead of Race. NOTE: This is not a required field.
Relationship, First and Last Names are required if not collected.

Party 1

Relationship ^{*} ☐ To be Collected ☐ Use Previous Sample

First Name ^{*} Last Name ^{*} MI

Address

City ^{*} State ^{*} Zip

DOB SSN Race

[Delete](#)

Party 2

Relationship ^{*} ☐ To be Collected ☐ Use Previous Sample

First Name ^{*} Last Name ^{*} MI

Address

City ^{*} State ^{*} Zip

DOB SSN Race

[Delete](#)

Party 3

Relationship ^{*} ☒ To be Collected ☐ Use Previous Sample

First Name ^{*} Last Name ^{*} MI

Address

City ^{*} State ^{*} Zip

DOB SSN Race

[Delete](#) [Deceased](#) [Inmate](#)

[Add Party](#) [Continue](#) [Reset](#)

Collection Schedule Information Verification

Account Contact Information

Account Number 12001596	Contact Person Admin User	Phone 555.555.5555	Fax 989.898.9898
Email anyperson@emailserver.com	Reference 1	Reference 2	Reference 3

Schedule Party Information

Relationship	Name	Address	DOB	SSN	Race/Gender	Collect	Deceased	Inmate	Previous Sample
AF1	Fred Smith	Any Street, Any Town, ST 000000				yes	No	No	No
CI	Child Demo2	Any Street, Any Town, ST 000000			Male	No	No	No	No
MI	Mother Demo1	Any Street, Any Town, ST 000000				No	No	No	No

[Edit Information](#) [Save](#) [Comments](#)

Select continue and review the Collection Schedule Information Verification screen carefully to ensure all information is correct.

Thank you for your schedule submittal.

The Scheduling information has been received and a Labcorp Scheduling Request number assigned.

Confirmation Number : S211121-001

MI	Mother Demo1
CI	Child Demo2
AF1	Fred Smith

For inquiries on this schedule, refer to the above confirmation number.
If there are any questions concerning this Schedule, contact Paternity Testing Services.
Phone: 800.742.3944 / Fax: 800.821.9102

[Schedule Party Drawsites/Appointments](#) [View/Attach Documents](#) [Submit Another Schedule](#)

Select Comments to provide additional information regarding the case. For example, "The mother will need an appointment after 2 p.m." or "The alleged father is responsible for payment."

Select save to submit your scheduling request. A confirmation email will be sent upon receipt. Labcorp appointment details will be provided via email within two business days.

Create CA

Generate a Client Authorization/Chain of Custody form by utilizing the Create CA option.

Enter the letters MNT (mother not tested) for the mother's first and last name if the mother's sample will not be provided for testing.

Enter the four digit year for all parties' dates of birth.

Select Copy if the party's last name is the same as the mother's.

Select Collected at Account Address only if samples are collected at the address associated with your account.

Select Copy if the party's address is the same as the mother's.

Enter the mailing address for each party within the case that should receive a copy of the final genetic report. Leave these fields blank if no copies are to be mailed.

List all parties that will be tested in the case, even if their samples will not be collected at the same time. This ensures that the parties' samples are entered into the designated case when they are received at the laboratory.

Create Client Authorization Form

Party Information | Account & Collection Information | Address & Photo

Mother's Information

Last Name First Name MI

Address City

State Zip DOB

SSN

Reset

Child's Information

☐ Copy Last Name from previous party ☐ Copy Address from previous party

Last Name First Name MI Gender

Address City

State Zip DOB

SSN

Reset

Alleged Father's Information

☐ Copy Last Name from previous party ☐ Copy Address from previous party

Last Name First Name MI

Address City

State Zip DOB

SSN

Reset

All Parties

Mother^{*} Child^{*} Alleged Father^{*}

Next Cancel

Upload digital photos if available.

Photos will print on the Client Authorization/Chain of Custody form.

Select Next to add additional information.

Select Submit to generate and print the completed form.

Reports

Custom reports may be generated to include number of specimens submitted, average turnaround time and number of full cases reported

Reports ▾

Order Supplies

Account Case Summary

Client Case Status

Account Case Summary

provides information regarding case history, number of cases submitted and the average turnaround time of results for a specific date range.

Client Case Status

provides a list of cases (full, partial or both) submitted for your account for a specified date range.

Account Case Summary Report

Select your account number from the drop down and enter a date range. Select Submit to generate the Account Case Summary Report.

Account Case Summary

Account: From: To:

Account Case Summary																																	
Laboratory Corporation Of America Holdings Burlington, NC Paternity Department																Jun 01, 2022 to Jun 30, 2022 TAT Calculated by Start Billing Date																	
Number of Full Cases Reported: 0																Number of Specimens Collected: 0																	
Number of Partial Cases Reported: 0																Number of Specimens Received: 0																	
Total: 0																																	
Calendar Days		0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	>31
# of Cases		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Number Non-exclusions: 0																Routine Average TAT: 0.00																	
Number Exclusions: 0																Average Probability: 0.00																	
Full Cases Received: 0																% of Exclusions: 0.00%																	
Partial Cases Received: 0																Total Full Cases Outstanding: 114																	
																Total Partial Cases Outstanding: 0																	
Number Redraws Reported: 0																Total Redraws Outstanding: 0																	
Number Redraws Requested: 0																Total Redraws Pending: 0																	
Cases still waiting for Redraws in prev months: 0																																	
Total Parties Scheduled: 0																Total Inmates Scheduled: 0																	
Total Scheduled Parties Collected: 0																Total Scheduled Inmates Collected: 0																	
Total 'No Shows': 0																Total Inmate 'No Shows': 0																	

Client Case Status Report

Select the account number from the drop down and enter a date range. Select Submit to generate the Client Case Status Report.

Client Case Status

Account: From: To:

Include: ☒ Full ☐ Partial ☐ Both

Client Case Status Report											
Account: 12001596						Cases Between: 10/01/2022 to 10/31/2022 Cases Included: Full/Partial					
Case #	Relationship	Name	Reference I	Full/Partial	Date Sent	Collect Date	DOB	SSN	Father Excluded		
C00-999901	C	CHILD DEMO	123456 ABCDEFG	Full		10/03/2022					
	AF	FATHER DEMO				10/03/2022					
C00-999902	C	CHILD DEMO2		Full		10/03/2022					
	AF	FATHER DEMO2				10/03/2022					

Revisions

Revise a schedule before the specimen(s) has been received or revise a case after the specimen(s) has been received.

← Schedule Detail Information for S210519-043 Revise Schedule Request View/Attach Documents

General Schedule Information

Schedule Request : S210519-043	Account : 12001596	Status : Print Paperwork	Active/Inactive : Active
Deceased : Yes	Stat : No	Comments : No	Start Date : 10/02/2022
Labcorp Case Number(s) : C00-999901	Caller Name : Admin User	Phone : 555.555.5555	Fax : 989.898.9898
Email Address : anyperson@emailserver.com	Reference 1 : -	Reference 2 : -	Reference 3 : -
Submitted Date : 10/02/2022 10:02 AM			

Schedule Party Information

Name	Relationship	To Be Scheduled	Deceased	Inmate	Sample	Status
Demo1, Mary C	M1	See Deceased Info	Yes	No	No	Print Paperwork
Demo1, Mother M	C1	No	No	No	Yes	Not To Be Drawn

Select **Revise Schedule Request** from the schedule detail page to make a revision to an existing scheduling request. Select the appropriate revision.

Schedule Revision (S200221-158)**Revision Type ***

Select

Select

- Make this case motherless
- Make name correction
- Add a sample from another case
- Close this case
- Other

Select **Revise Case** and choose the appropriate revision for the case.

← Case Detail Information for (C00-199902) Revise Case

General Case Information

Case Status	Reference 1	Estimated Due Date
Full		Pending

Result Information

Prob. of Paternity	Final Result	Schedule Number
0.00%	Excluded	S210728-109

Party Information

Relationship	Name	Draw Date	Received Date
M	Mother Demo	10/02/2022	10/06/2022
C	Child Demo2	10/02/2022	10/06/2022
AF	Father Demo2	10/02/2022	10/06/2022

Lab Status - Finalized

Procedure	Started	Completed
Awaiting Additional Party(s)	10/06/2022	10/13/2022
Testing	10/10/2022	

Case Revision (C00-999902)**Revision Type ***

Select


Select

- Make this case motherless**
- Make name correction
- Add a sample from another case
- Close this case
- This case does not belong to my office

Additional Information

- If requesting a two-party case and the mother will not be tested, enter the letters MNT as the mother's first AND last name. This informs our laboratory technicians that testing should proceed without the mother's sample.
- If requesting collection at a facility (prison, jail, hospital, etc.), use the View/Attach Document feature on the schedule confirmation page to upload a court order. This is required as many facilities will not allow access without this documentation.
- Appointments for each party are scheduled at a Labcorp location closest to the address provided. If scheduling is needed in a different city or state, notate the desired collection location in the comments section.

Contact customer service (800-742-3944) or your account manager to request an IdentiLink application.

	IDENTILINKSM INTERNET ACCESS ACCOUNT APPLICATION AND SECURITY FORM (Fillable Form) LC-BN-DNA-AM-FORM-012/REV4	Page 1 of 1
		DNA Identity

IDENTILINK SM INTERNET ACCESS ACCOUNT APPLICATION AND SECURITY FORM			
Using a black or blue ballpoint pen , please PRINT information requested below. Complete ALL items.			
Labcorp Client Account Number:	Labcorp Client Name:	Applicant's Phone Number (Include Area Code):	
Applicant's Last Name:	Applicant's First Name:	Applicant's Unique E-Mail Address: (New User ID)	
Phone	Fax	Correspondence E-mail: (For scheduling information exchange – can be the same as applicant's E-Mail address)	
Street Address:		City:	State:
Type of Access Requested: <input type="checkbox"/> Client Administrator Account (authorized to add, delete, and/or change users) <input type="checkbox"/> User Account			
To ensure the security of information accessed through the Labcorp IdentiLink SM system, the following guidelines highlight the responsibilities of the authorized person and/or his or her authorized designee associated with accepting a user identification and password to access the Labcorp e-Result System. Your access to and use of the Labcorp e-Result System is subject to the terms and conditions of the Labcorp Internet Access Agreement.			
1. Information accessed through the Labcorp e-Result system is CONFIDENTIAL and PROPRIETARY. Users must not attempt to access unauthorized information or make changes to the accessed information. 2. Authorized information accessed through the Labcorp e-Result system will be used for only the express purpose of its intent: Test Inquiry, Status of Test, Test Results Inquiry. 3. The Client is responsible for all actions of each individual user resulting in the use/misuse of their user identification and password. 4. It is recommended that users change their passwords every ninety (90) days. 5. A user must never give their user identification and password to an unauthorized person for any reason and must take all precautions to ensure that their user identification and password are always secure. 6. Users may not disclose to unauthorized persons any information accessed on the Labcorp IdentiLink SM System. 7. In the event that a user's password is lost/stolen or upon the user's termination of employment, the Client Administrator must immediately revoke the user identification's e-Result privileges. If the Client Administrator's password is lost/stolen or upon his or her termination of employment, Labcorp must be notified immediately.			
I hereby certify that I have read and understand my responsibilities as related to obtaining a Labcorp IdentiLink SM User Identification and password.			
Authorized Person Signature (defined as an individual under Federal and/or State Law to order tests or receive results):		Applicant's Signature:	
Authorized Person's Printed Name:		Applicant's Printed Name:	
Authorized Person's Title:		Applicant's Title:	
Date:		Date:	
Account Number Access: (Note: Access to accounts in this section will require the approval of an authorized person)			
Account Number (Other than above)	Signature of Authorized Person (defined as an individual authorized under Federal and/or State Law to order tests or receive results, or both)		
Upon completion of this form, please forward to your Labcorp Account Manager. Please allow at least 3 business days upon receipt for processing			

