

**Specific IgE – Grass & Tree**

| 1. PATIENT INFORMATION   |                             |       |                                |   |                                |                         |                                |                             |
|--|-----------------------------|-------|--------------------------------|---|--------------------------------|-------------------------|--------------------------------|-----------------------------|
| Patient Name (Last, First)   |                             |       |                                |   |                                | DOB ____ / ____ / _____ |                                |                             |
| <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutral/Other <input type="checkbox"/> Unknown  |                             |       |                                |   |                                |                         |                                |                             |
| Address  |                             |       |                                | City  |                                | State                   | Zip                            |                             |
| Phone  |                             |       | Ethnicity                      |   | Race                           |                         |                                |                             |
| 2. BILLING INFORMATION   |                             |       |                                | 3. REPORT DELIVERY INFORMATION                      |                                |                         |                                |                             |
| National Jewish Health Advanced Diagnostic Laboratories does not bill patients directly or third-party health insurance. Visit njlabs.org or call for details.               |                             |       |                                | <input type="checkbox"/> Same as Billing Address    |                                |                         |                                |                             |
|  |                             |       |                                | Client ID   |                                |                         |                                |                             |
| Client ID  |                             |       |                                | Client Name   |                                |                         |                                |                             |
| Client Name  |                             |       |                                | Address   |                                |                         |                                |                             |
| Address  |                             |       |                                | City  |                                | State                   | Zip                            |                             |
| City   |                             | State | Zip                            | Phone   |                                | Secure Fax:             |                                |                             |
| Phone  |                             |       |                                | <input type="checkbox"/> Duplicate Report Requested |                                | Attn:                   |                                |                             |
| Secure Fax   |                             |       |                                | Phone   |                                | Secure Fax              |                                |                             |
| 4. SPECIMEN INFORMATION  |                             |       |                                |   |                                |                         |                                |                             |
| Specimen Source: <input type="checkbox"/> Serum <input type="checkbox"/> Plasma <input type="checkbox"/> Blood <input type="checkbox"/> Urine <input type="checkbox"/> Other |                             |       |                                |   | Collect Date                   |                         | Collect Time                   |                             |
| <input type="checkbox"/> Raw Specimen   OR <input type="checkbox"/> Culture Medium   |                             |       |                                |   | Submitter Specimen #           |                         |                                |                             |
| Form completed by  |                             |       |                                | Date  |                                | Phone                   |                                |                             |
| 5. GRASS ALLERGENS   |                             |       | 6. TREE ALLERGENS              |   |                                |                         |                                |                             |
| <input type="checkbox"/> RG17  | Bahia grass                 |       | <input type="checkbox"/> RT19  | Acacia  | <input type="checkbox"/> RT8   | Elm, white              | <input type="checkbox"/> RT213 | Pine                        |
| <input type="checkbox"/> RG201   | Barley grass                |       | <input type="checkbox"/> RT2   | Alder, grey   | <input type="checkbox"/> RT18  | Eucalyptus (gum-tree)   | <input type="checkbox"/> RT73  | Pine, Australian            |
| <input type="checkbox"/> RG2   | Bermuda grass               |       | <input type="checkbox"/> RT37  | Bald cypress  | <input type="checkbox"/> RT25  | European, ash           | <input type="checkbox"/> RT210 | Privet                      |
| <input type="checkbox"/> RG11  | Brome grass                 |       | <input type="checkbox"/> RT56  | Bayberry  | <input type="checkbox"/> RT44  | Hackberry               | <input type="checkbox"/> RT72  | Queen palm                  |
| <input type="checkbox"/> RG71  | Canary grass                |       | <input type="checkbox"/> RT5   | Beech, American                                     | <input type="checkbox"/> RT4   | Hazel                   | <input type="checkbox"/> RT57  | Red cedar                   |
| <input type="checkbox"/> RG7   | Common reed                 |       | <input type="checkbox"/> RT1   | Box-elder maple                                     | <input type="checkbox"/> RT209 | Horn beam               | <input type="checkbox"/> RT71  | Red mulberry                |
| <input type="checkbox"/> RG10  | Johnson grass               |       | <input type="checkbox"/> RT6   | Cedar mountain (juniper)                            | <input type="checkbox"/> RT17  | Japanese cedar          | <input type="checkbox"/> RT201 | Spruce                      |
| <input type="checkbox"/> RG202   | Maize, corn (grass)         |       | <input type="checkbox"/> RT212 | Cedar, white  | <input type="checkbox"/> RT208 | Linden                  | <input type="checkbox"/> RT211 | Sweet gum                   |
| <input type="checkbox"/> RG4   | Meadow fescue               |       | <input type="checkbox"/> RT206 | Chestnut  | <input type="checkbox"/> RT21  | Melaleuca tree          | <input type="checkbox"/> RT11  | Sycamore (London planetree) |
| <input type="checkbox"/> RG16  | Meadow foxtail              |       | <input type="checkbox"/> RT3   | Common silver birch                                 | <input type="checkbox"/> RT20  | Mesquite                |                                |                             |
| <input type="checkbox"/> RG8   | Meadow grass, Kentucky blue |       | <input type="checkbox"/> RT14  | Cottonwood  | <input type="checkbox"/> RT70  | Mulberry                | <input type="checkbox"/> RT10  | Walnut tree                 |
| <input type="checkbox"/> RG14  | Oat, cultivated             |       | <input type="checkbox"/> RT222 | Cypress   | <input type="checkbox"/> RT218 | Oak, Virginia live      | <input type="checkbox"/> RT15  | White ash                   |
| <input type="checkbox"/> RG3   | Orchard grass (cocksfoot)   |       | <input type="checkbox"/> RT23  | Cypress, Italian                                    | <input type="checkbox"/> RT7   | Oak, white              | <input type="checkbox"/> RT41  | White hickory               |
| <input type="checkbox"/> RG9   | Redtop (bentgrass)          |       | <input type="checkbox"/> RT214 | Date  | <input type="checkbox"/> RT9   | Olive (mediterranean)   | <input type="checkbox"/> RT16  | White pine                  |
| <input type="checkbox"/> RG5   | Rye grass                   |       | <input type="checkbox"/> RT207 | Douglas fir   | <input type="checkbox"/> RT22  | Pecan (hickory)         | <input type="checkbox"/> RT12  | Willow                      |
| <input type="checkbox"/> RG12  | Rye grass, cultivated       |       | <input type="checkbox"/> RT205 | Elder tree  | <input type="checkbox"/> RT217 | Peppertree              |                                |                             |
| <input type="checkbox"/> RG1   | Sweet vernal grass          |       | <b>7. GRASS MIXES</b>          |   |                                | <b>9. COMMENTS</b>      |                                |                             |
| <input type="checkbox"/> RG6   | Timothy grass               |       | <input type="checkbox"/> RGX1  | Grass mix 1 (RG3, RG4, RG5, RG6 RG8)                |                                |                         |                                |                             |
| <input type="checkbox"/> RG13  | Velvet grass                |       | <input type="checkbox"/> RGX2  | Grass mix 2 (RG2, RG5, RG6, RG8, RG10, RG17)        |                                |                         |                                |                             |
| <input type="checkbox"/> RG15  | Wheat, cultivated           |       | <b>8. TREE MIXES</b>           |   |                                |                         |                                |                             |
| <input type="checkbox"/> RG70  | Wild rye grass              |       | <input type="checkbox"/> RTX1  | Tree mix 1 (RT1, RT3, RT7 ,RT8)                     |                                |                         |                                |                             |
| INTERNAL USE ONLY  |                             |       |                                |   |                                |                         |                                |                             |
| Received By  |                             | Date  |                                | Account#  |                                | MRUN#                   | Accession                      |                             |