

Immunology Diagnostics Requisition

1. PATIENT INFORMATION					
Patient Name (Last, First)		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutral		DOB _____ / _____ / _____	
Address		City		State Zip	
Phone		Ethnicity		Race	
2. BILLING INFORMATION - INSTITUTIONAL BILLING ONLY			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		
Address		City		State Zip	
City		State		Zip	
Phone		Phone		Secure Fax	
Secure Fax		<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:					
Submitted By		Phone		Fax	
Submitter Specimen #		Actual Specimen Collection Date		Collection Time	
5. AUTOANTIBODY MEASUREMENTS					
<input type="checkbox"/> ACAM & ACAG	Anti-cardiolipin antibodies (IgG and IgM)	<input type="checkbox"/> CD203	Anti-IgE receptor antibodies	<input type="checkbox"/> MYOS	Myositis autoantibody panel (Mi-2, Ku, PM-Scl100, PM-Scl75, Jo-1, SRP, PL-7, PL-12, EJ, OJ, Ro-52)
<input type="checkbox"/> ANA	Anti-nuclear antibodies (pattern and titer)	<input type="checkbox"/> COVDG	COVID-19 IgG antibody detection by ELISA	<input type="checkbox"/> PR3	
<input type="checkbox"/> ANCA	Anti-neutrophil cytoplasmic antibodies (ANCA)	<input type="checkbox"/> COVDM	COVID-19 IgM antibody detection by ELISA	<input type="checkbox"/> SCL70	Anti-Scl-70 antibody
<input type="checkbox"/> BGLYA	Beta-2 glycoprotein 1 (IgA)	<input type="checkbox"/> DSDNA	Anti-double stranded dsDNA antibody	<input type="checkbox"/> SSA	Anti-SSA antibody
<input type="checkbox"/> BGLYG & BGLYM	Beta-2 glycoprotein 1 (IgG and IgM)	<input type="checkbox"/> ENA4	Antibodies to extractable nuclear antigens and dsDNA	<input type="checkbox"/> SSB	Anti-SSB antibody
<input type="checkbox"/> CCP	Anti-cyclic citrullinated peptide	<input type="checkbox"/> MPO	Anti-myeloperoxidase (MPO) antibody	<input type="checkbox"/> THYR	Anti-thyroglobulin antibody
<input type="checkbox"/> TPO				<input type="checkbox"/> TPO	Anti-thyroid peroxidase antibody
6. IMMUNOGLOBULIN LEVELS					
<input type="checkbox"/> IGA	Immunoglobulin A	<input type="checkbox"/> IGG1	Immunoglobulin G subclasses (IgG1, IgG2, IgG3, IgG4 and total IgG)		
		<input type="checkbox"/> IGM	Immunoglobulin M		
<input type="checkbox"/> IGG	Immunoglobulin G	<input type="checkbox"/> TIGE	Immunoglobulin E		
7. MISCELLANEOUS ANTIBODY TITERS					
<input type="checkbox"/> ABPAP	ABPA panel (Total IgE, specific IgG and IgE to A. fumigatus, precipitating IgG to A. fumigatus)	<input type="checkbox"/> CRYOS	Cryoglobulin screen (Cryocrit) <i>If positive, will reflex to Cryoglobulin quantitative with identification (Test code: CRYFQ)</i>		
<input type="checkbox"/> AIAT	Alpha-1-antitrypsin level	<input type="checkbox"/> HSCR	C-reactive protein		
8. SERUM ANTIBODY TITERS			9. OTHER		
<input type="checkbox"/> RF	Rheumatoid factor	<input type="checkbox"/> TRYPT	Tryptase		
10. COMMENTS					
INTERNAL USE					
Received By	Date	Account#	MRUN	Accession	