



Ancillary Testing Requisition

Form#: F.CD.H.104

Ordering Location		Celligent Lab Staff		CELLIGENT Barcode Here				
Ordering Location:		Date Received: _____						
Ordering Physician:		# of Blocks: ___ ID: _____ LN: _____						
		# of Slides: ___ ID: _____ LN: _____						
Patient Information			Billing Information					
Last Name:		First Name:		<input type="checkbox"/> Technical <input type="checkbox"/> Global <input type="checkbox"/> Client Bill <input type="checkbox"/> Insurance				
DOB:	Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Client Accession#:		ICD10 Code(s): <input type="text"/>				
Specimen Information								
<input type="checkbox"/> Block(s)	ID#:	<input type="checkbox"/> Slide(s)	ID#:	Collection Date: _____ Specimen Site: _____				
<input type="checkbox"/> Block(s)	ID#:	<input type="checkbox"/> Slide(s)	ID#:	Collection Date: _____ Specimen Site: _____				
Requested Testing								
Immunostains			Multiplex Stains					
<input type="checkbox"/> Actin-Muscle specific (HHF 35) <input type="checkbox"/> Adipophilin <input type="checkbox"/> ALK-1 (ALK01) <input type="checkbox"/> Arginase 1 (SP156) <input type="checkbox"/> ATRX <input type="checkbox"/> BAP-1 (C-4) <input type="checkbox"/> BCL-2 (124) <input type="checkbox"/> BCL-6 (GL191E/A8) <input type="checkbox"/> BerEP4 <input type="checkbox"/> Beta Catenin (14) <input type="checkbox"/> BOB-1 (TG14) <input type="checkbox"/> BRAF (V600E) <input type="checkbox"/> Calretinin (Poly) <input type="checkbox"/> CAIX (MRQ-54) <input type="checkbox"/> CAM5.2 (CAM5.2) <input type="checkbox"/> CD1a (010) <input type="checkbox"/> CD2 (AB75) <input type="checkbox"/> CD3 (2GV6) <input type="checkbox"/> CD4 (SP35) <input type="checkbox"/> CD5 (SP19) <input type="checkbox"/> CD7 (LP-15) <input type="checkbox"/> CD8 (C8/144B) <input type="checkbox"/> CD10 (56C6) <input type="checkbox"/> CD15 (LeuM1) <input type="checkbox"/> CD19 (BT51E) <input type="checkbox"/> CD20 (L26) <input type="checkbox"/> CD23 (SP23) <input type="checkbox"/> CD30 (Ber-H2) <input type="checkbox"/> CD31 (1A10) <input type="checkbox"/> CD33 (PWS44) <input type="checkbox"/> CD34 (QBEnd/10) <input type="checkbox"/> CD43 (L60) <input type="checkbox"/> CD45 (RP2/18) <input type="checkbox"/> CD56 (123C3) <input type="checkbox"/> CD68 (KP-1) <input type="checkbox"/> CD117 (YR145) <input type="checkbox"/> CD138 (B-A38) <input type="checkbox"/> CD163 (MRQ-26) <input type="checkbox"/> CDX2 (EPR2764Y) <input type="checkbox"/> CEA (CD66e) <input type="checkbox"/> Chromogranin (LK2H10) <input type="checkbox"/> CK (Pan)(AE1/AE3) <input type="checkbox"/> CK5/6 (D5/16B4) <input type="checkbox"/> CK7 (OV-TL 12/30) <input type="checkbox"/> CK8/18 (B22.1/B23.1) <input type="checkbox"/> CK20 (SP33) <input type="checkbox"/> CK34 (betaE12) <input type="checkbox"/> Claudin-4 (3E2C1) <input type="checkbox"/> CMV (DD59/CCH2) <input type="checkbox"/> C-Myc (EP121) <input type="checkbox"/> Cyclin D1 (SP4) <input type="checkbox"/> D2-40 (Podoplanin) <input type="checkbox"/> Desmin (D E-R-11) <input type="checkbox"/> DOG-1 (SP31)			<input type="checkbox"/> E-Cadherin (36) <input type="checkbox"/> EMA (E29) <input type="checkbox"/> ER (qualitative) (6F11) <input type="checkbox"/> ERG (9FY) <input type="checkbox"/> Factor-13a (EP3372) <input type="checkbox"/> Fascin (55-K2) <input type="checkbox"/> Gastrin <input type="checkbox"/> GATA-3 (L50-823) <input type="checkbox"/> GCDFP-15 (23A3) <input type="checkbox"/> GFAP (G-A-5) <input type="checkbox"/> Granzyme-B (11F1) <input type="checkbox"/> H. Pylori (Poly) <input type="checkbox"/> Hemoglobin A (EPR3608) <input type="checkbox"/> Hepar-1 (OCH1E5) <input type="checkbox"/> HER2neu (4B5) <input type="checkbox"/> HHV8 (13B10) <input type="checkbox"/> HMB45 (HMB45) <input type="checkbox"/> HSV1& 2 Cocktail (Poly) <input type="checkbox"/> ICOS (RM417) <input type="checkbox"/> IDH1 (R132H) <input type="checkbox"/> Inhibin, Alpha BC/R1 <input type="checkbox"/> INSM1 (A-8) <input type="checkbox"/> INI-1 (MRQ-27) <input type="checkbox"/> Ki-67 (K2) <input type="checkbox"/> Mammaglobin (31A5) <input type="checkbox"/> Mart-1/Melan A (A103) <input type="checkbox"/> MITF-1 (C5/D5) <input type="checkbox"/> MOC-31 (MOC-31) <input type="checkbox"/> MUM-1 (BC5) <input type="checkbox"/> Myeloperoxidase (MPO-7) <input type="checkbox"/> Napsin (IP64) <input type="checkbox"/> NKX3.1 (Poly) <input type="checkbox"/> Oct-2 (MRQ-2) <input type="checkbox"/> OSCAR (OSCAR) <input type="checkbox"/> P16 (P16ink4a) <input type="checkbox"/> P40 (BC28) <input type="checkbox"/> P504s Only (AMACR) <input type="checkbox"/> P53 (D0-7) <input type="checkbox"/> P57 (KIP2) <input type="checkbox"/> P63 (4A4) <input type="checkbox"/> P120 (MRQ-5) <input type="checkbox"/> PAX-5 (1EW) <input type="checkbox"/> PAX-8 (MRQ-50) <input type="checkbox"/> PD1 (MRQ-22) <input type="checkbox"/> Perforin (5B10) <input type="checkbox"/> PR (qualitative) (16) <input type="checkbox"/> PRAME (EPR20330) <input type="checkbox"/> PSA (35H9) <input type="checkbox"/> PSAP (PASE/4LJ) <input type="checkbox"/> ROS-1 (D4D6) <input type="checkbox"/> SALL-4 (6E3) <input type="checkbox"/> SATB2 (EP-281) <input type="checkbox"/> S-100 (Poly) <input type="checkbox"/> SF-1 (EP434)		<input type="checkbox"/> SMM-heavy chain (SMMS-1) <input type="checkbox"/> Smooth Muscle Actin (IA4) <input type="checkbox"/> SOX-10 (EP268) <input type="checkbox"/> SOX-11 (C1) <input type="checkbox"/> Spirochete (Poly) <input type="checkbox"/> Synaptophysin (27612) <input type="checkbox"/> TCR – Beta (BSB117) <input type="checkbox"/> TCR – Delta (BSB-127) <input type="checkbox"/> TIA -1 (TIA-1) <input type="checkbox"/> TTF – 1 (BG7G31) <input type="checkbox"/> Vimentin (V9) <input type="checkbox"/> VZV <input type="checkbox"/> WT-1 (WT49)		<input type="checkbox"/> p16/Ki-67 P16 (B) Ki-67 (R) <input type="checkbox"/> Ki-67/CK (pan) Ki-67(B) CK (pan) (R) <input type="checkbox"/> Ki-67/MART-1 Ki-67(B) MART-1 (R) <input type="checkbox"/> Ki-67/SYNAPTOPHYSIN Ki-67(B) Synapto (R) <input type="checkbox"/> PAN/DES PanKeratin (B) Desmin (R) <input type="checkbox"/> PIN-4 P63 (B) 34BE12 (Red) P504s (R) <input type="checkbox"/> CK-ENDO PanKeratin (B) CD31 (R) D2-40 (R) <input type="checkbox"/> SYNAPTOPHYSIN/D2-40 Synapto (B) D2-40 (R) * DAB Chromogen (Brown) * Alk Phos Chromogen (Red)	
			ISH/Probes <input type="checkbox"/> Albumin ISH <input type="checkbox"/> EBER (EBV) ASR <input type="checkbox"/> HPV-LR10 mRNA <input type="checkbox"/> HPV-HR18 mRNA <input type="checkbox"/> Kappa ASR <input type="checkbox"/> Lambda ASR					
			Special Stains <input type="checkbox"/> AB/PAS (Alcian Blue) <input type="checkbox"/> AFB <input type="checkbox"/> Colloidal Iron <input type="checkbox"/> Colloidal Iron w/Kidney Control <input type="checkbox"/> Congo Red <input type="checkbox"/> Diff Quik <input type="checkbox"/> Elastic <input type="checkbox"/> Fite <input type="checkbox"/> Giemsa <input type="checkbox"/> Gomori's Meth Silver <input type="checkbox"/> Gram (B&B) <input type="checkbox"/> Iron <input type="checkbox"/> Masson's Trichrome <input type="checkbox"/> Mayer's Mucicarmine <input type="checkbox"/> PAS Fungus <input type="checkbox"/> PAS w/wo Diatase <input type="checkbox"/> PAS/Basement <input type="checkbox"/> Retic <input type="checkbox"/> Other _____					
			Hematoxylin & EOSIN <input type="checkbox"/> Recut (one section) <input type="checkbox"/> Levels 1 - 3 <input type="checkbox"/> Levels 4 - 6 <input type="checkbox"/> Unstained _____ (quantity)					
			Unlisted Tests					
LAB TECH USE ONLY		PHYSICIAN USE ONLY						
CD Tech Verification: <input type="checkbox"/>		Technical Quality Control: _____ Comments: _____						
Block/Slide ID <input type="checkbox"/>		<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory						
Control Review Initials: _____ Date: _____		Signed By: _____						
		BioMarkers Technical and Interpretation <input type="checkbox"/> Breast Panel <input type="checkbox"/> ER <input type="checkbox"/> ER/PR <input type="checkbox"/> ER/PR/Her2 <input type="checkbox"/> Her2neu <input type="checkbox"/> Breast <input type="checkbox"/> Gastric <input type="checkbox"/> ER/PR/Her2 – SMC – Tech Only <input type="checkbox"/> PDL-1 22C3 PHARMA DX Keytruda <input type="checkbox"/> MMR <input type="checkbox"/> MMR – Tech Only (MSH6, MSH2, MLH1, PMS2)						
		Comments						

