



Children's Hospital Colorado

**Children's Hospital Colorado**  
**Department of Pathology & Laboratory Medicine**  
**EM & AP Lab Requisition**  
**Phone (720) 777-6711**  
**Fax (720) 777-7118**

**Specimen Shipping Address:**

Children's Hospital Colorado  
 Clinical Laboratory - Room B0200  
 13123 E. 16th Ave  
 Aurora, CO 80045

**FAILURE TO COMPLETE BELOW FIELDS WILL DELAY RESULTS****\*\*\*PLEASE PROVIDE COMPLETE BILLING INFORMATION ON THE BACK OF THIS FORM\*\*\*****Contact Information**

Ordering Institution Name		Ordering Institution Address	
		Street _____	
		City, State, Zip	
Ordering Provider (Last, First, and Middle Initial)		Ordering Provider Phone	
Result Contact Name	Result Phone	Result Fax	

**Patient Information**

Last Name	First Name	Middle I	Birthdate (MM/DD/YYYY)	Sex
Client Medical Record Number	Client Specimen Number		Diagnosis/ICD-10 Code (optional)	

**Electron Microscopy Specimen Information**

Date Collected (MM/DD/YY) _____	Site of Biopsy
Time Collected (HHMM) _____ AM / PM	Email Address for Receipt Confirmation and Results (EM Only)

**Electron Microscopy Test Information**

<input type="checkbox"/> Transmission Electron Microscopy with Interp	<input type="checkbox"/> Scanning Electron Microscopy with Interp
<input type="checkbox"/> Transmission Electron Microscopy without Interp	<input type="checkbox"/> Scanning Electron Microscopy without Interp

Differential Diagnosis (or specific question being asked):

**Anatomic Pathology Test Information**

IHC			Immunofluorescence	Special Stains	
<input type="checkbox"/> Adenovirus <input type="checkbox"/> AFP <input type="checkbox"/> ALK-1/cd246 (alk1) <input type="checkbox"/> ATRX (Bsb-108) <input type="checkbox"/> BAF47/INI-1 <input type="checkbox"/> BCL-2 (124) <input type="checkbox"/> BCL-6 (gi191e/a8) <input type="checkbox"/> Beta-Catenin (14) <input type="checkbox"/> Beta-HCG (m94138) <input type="checkbox"/> BK/JC Virus <input type="checkbox"/> BOB-1 (sp92) <input type="checkbox"/> Bombesin <input type="checkbox"/> BRAF V600E <input type="checkbox"/> Calretinin <input type="checkbox"/> C4D <input type="checkbox"/> CD1a (ep3622) <input type="checkbox"/> CD3 <input type="checkbox"/> CD4 (sp35) <input type="checkbox"/> CD8 (68/144b) <input type="checkbox"/> CD10 (sp67) <input type="checkbox"/> CD15 (mma) <input type="checkbox"/> CD20 (126)	<input type="checkbox"/> CD21 <input type="checkbox"/> CD30 <input type="checkbox"/> CD31 (jc70a) <input type="checkbox"/> CD34 (QBEnd/10) <input type="checkbox"/> CD43 (df-t1) <input type="checkbox"/> CD45/LCA (2b11,p07/26) <input type="checkbox"/> CD56 <input type="checkbox"/> CD61 <input type="checkbox"/> CD68 (pg-m1) <input type="checkbox"/> CD79a (11E3) <input type="checkbox"/> CD99 (12e7) <input type="checkbox"/> CD117 (C-Kit) <input type="checkbox"/> CD138 (b-a38) <input type="checkbox"/> CD163 <input type="checkbox"/> Chromogranin (1k2h10) <input type="checkbox"/> CMV <input type="checkbox"/> D240 <input type="checkbox"/> DUX4 <input type="checkbox"/> Desmin (d33) <input type="checkbox"/> EMA (e29) <input type="checkbox"/> Factor VIII/8 <input type="checkbox"/> Factor XIIIa/13 (ac-1a1)	<input type="checkbox"/> Fascin (55k-2) <input type="checkbox"/> GFAP <input type="checkbox"/> GLUT-1 <input type="checkbox"/> H.Pylori <input type="checkbox"/> HHF35/MSA <input type="checkbox"/> HMB-45/MAA (HMB45) <input type="checkbox"/> HSV I&II <input type="checkbox"/> HHV8 (13B10) <input type="checkbox"/> IGG <input type="checkbox"/> IGG4 <input type="checkbox"/> Inhibin (R1) <input type="checkbox"/> Lysozyme (ec3.2.1.17) <input type="checkbox"/> Mast Cell/Tryptase (aa1) <input type="checkbox"/> MIB-1/KI67 <input type="checkbox"/> MPO <input type="checkbox"/> MYOD1 (ep212) <input type="checkbox"/> Myogenin (f5d) <input type="checkbox"/> NEU-N <input type="checkbox"/> NFP (2f11) <input type="checkbox"/> NSE (mrq55) <input type="checkbox"/> OCT2 (mrq-2) <input type="checkbox"/> P53 (do-7)	<input type="checkbox"/> PAN CK (ae1/ae3) <input type="checkbox"/> PAX-5 (sp34) <input type="checkbox"/> PLAP (pl8-f6) <input type="checkbox"/> SALL4 <input type="checkbox"/> S100 <input type="checkbox"/> SMA (1a4) <input type="checkbox"/> SMMS <input type="checkbox"/> Smoothelin <input type="checkbox"/> SOX10 (SP267) <input type="checkbox"/> Synaptophysin (srp88) <input type="checkbox"/> TDT <input type="checkbox"/> Tyrosine Hydroxylase <input type="checkbox"/> Vimentin (v9) <input type="checkbox"/> WT1  <div style="text-align: center;"><b>Dystrophin Panel</b></div> <input type="checkbox"/> Dystrophin 1 <input type="checkbox"/> Dystrophin 2 <input type="checkbox"/> Dystrophin 3 <input type="checkbox"/> Merosin <input type="checkbox"/> Sarcoglycan <input type="checkbox"/> Spectrin 1	<input type="checkbox"/> Albumin <input type="checkbox"/> C1Q <input type="checkbox"/> C3 <input type="checkbox"/> Fibrinogen <input type="checkbox"/> IGA <input type="checkbox"/> IGG <input type="checkbox"/> IGM  <div style="text-align: center;"><b>Special Stains</b></div> <input type="checkbox"/> 88313 - Microorganisms <input type="checkbox"/> AFB -ZN/Kinyoun's <input type="checkbox"/> AFB - Fite <input type="checkbox"/> GMS <input type="checkbox"/> GRAM <input type="checkbox"/> PAS for Fungus <input type="checkbox"/> Warthin-Starry/Steiner <input type="checkbox"/> 88312 - Special Stains <input type="checkbox"/> Alcian Blue pH 2.5 <input type="checkbox"/> Alcian Blue/PASH <input type="checkbox"/> Colloidal Iron <input type="checkbox"/> Congo Red <input type="checkbox"/> Copper/Rhodanine <input type="checkbox"/> Fontana - Masson	<input type="checkbox"/> Iron <input type="checkbox"/> JMS/Jones <input type="checkbox"/> LFB <input type="checkbox"/> Mucicarmine <input type="checkbox"/> Myelin <input type="checkbox"/> Nissl <input type="checkbox"/> Oil Red O <input type="checkbox"/> PAS <input type="checkbox"/> PAS with diastase <input type="checkbox"/> Pentachrome <input type="checkbox"/> Retic <input type="checkbox"/> Sudan Black B <input type="checkbox"/> Toluidine Blue <input type="checkbox"/> Trichrome <input type="checkbox"/> Von Kossa <input type="checkbox"/> VVG - Elastic Stain <input type="checkbox"/> Wright/Giemsa <input type="checkbox"/> 88319 - Enzyme Stains <input type="checkbox"/> MPO <input type="checkbox"/> NSE  <div style="text-align: center;"><b>In-Situ Hybridization</b></div> <input type="checkbox"/> EBER - RNA

Specimen requirements and shipping and handling information can be found on our website at [www.childrenscolorado.org/lab](http://www.childrenscolorado.org/lab)  
 By submitting this document you agree to the terms and conditions listed on our website



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Aurora, CO 80045

**Please do not send patient insurance. We bill clients only, referring provider will be held responsible for payment if no billing information is provided.**

**FAILURE TO COMPLETE WILL DELAY RESULTS**

**Bill To:**  **Billing Facility and Address same as listed on page 1**

**Institution Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Billing Contact Information:**

**Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_