



CLIENT INFORMATION

ORDERING PHYSICIAN	NPI#
TREATING PHYSICIAN	NPI#

CONSULTATION

- Consult on referred slides (88321)
- Consult on referred slides with slide preparation (88323)
- Consult, comprehensive, with review of records (88325)

*IMMUNOHISTOCHEMISTRY LEVELS OF SERVICE - PICK ONE

- Interpretation (Manual Score) (88342 or 88360, marker dependent)
- Interpretation Quantitative Image Analysis (88361)
- IHC Stain Only (88342 TC or 88360 TC, marker dependent)
- Virtual IHC – IHC Stain and Scanned (88360 TC)
- Virtual Image – IHC Stain and Image Analysis* (88361, stain dependent)

PATIENT INFORMATION (all white areas are required to be filled in completely)

Name (LAST, FIRST, MIDDLE) _____
 Address _____
 City, State, Zip _____
 Date of Birth: MM / DD / YYYY _____ Sex M F
 Phone Number _____ Social Security # _____
 Med Rec # / Patient # _____

BILLING INFORMATION (face sheet & front and back of insurance card must be attached)

Bill: My Account Insurance Medicare Medicaid Patient Workers Comp
 Patient Status: Hospital Inpatient Hospital Outpatient Non-Hospital Patient
 Ordering Physician UPIN: _____
 Insurance Information: See attached
 Insured Information: Name _____
 Relationship to Patient (circle one) Self Spouse Child Other: _____
 Primary Insurance Co: _____ Authorization # _____
 Billing Address _____ Insured # _____
 Billing City, State, Zip _____ Group # _____
 Secondary Insurance Co: _____ Insured # _____
 Billing Address _____ Group # _____
 Billing City, State, Zip _____

CLINICAL/SPECIMEN INFORMATION

Collection Date: _____ Fixative: Formalin Other: _____
 Body Site: _____
 Specimen ID#(s): _____ See Previous Case History
 Narrative Diagnosis/Clinical Data (please attach CBC, previous test results, if applicable): _____

REQUIRED INFORMATION	ICD-9	ICD-9
ICD-9	ICD-9	ICD-9

Paraffin Block(s):# _____ Fixative: _____ Other: _____
 Air Dried Smears:# _____ Fixed Smears:# _____ Stained Smears:# _____
 Unstained Slides:# _____ Stained Slides:# _____

*Additional testing may be performed if determined to be medically necessary to render a diagnosis in the opinion of the reviewing pathologist.

AUTHORIZED SIGNATURE: _____

Patient, Client and Billing Information is requested for timely processing of this case. Medicare and other third party payors require that services be medically necessary for coverage, and generally do not cover routine screening tests.
NOTE: ABN ON BACK OF SECOND PAGE

SPECIMEN LABEL INSTRUCTIONS:

- 1.) Complete the requisition with all requested information.
- 2.) Remove the required number of labels from the front of this sheet.
- 3.) Place one (1) label on each specimen container (not on the lid).

PLEASE DISPOSE OF UNUSED LABELS.

DIAGNOSTIC, PROGNOSTIC AND THERAPEUTIC ANALYSIS

BREAST:

- ER*
- PR*
- HercepTest**
- Ki67*
- p53*
- DNA*
- ER*, PR*
- ER*, PR*, HercepTest**
- ER*, PR*, HercepTest** and Ki67*
- ER*, PR*, HercepTest**, Ki67*, p53*
- ER*, PR*, HercepTest**, Ki67*, p53*, DNA*
- Her2 by FISH
- HercepTest, Reflex to Her2 by FISH if 1+ 2+ 3+

COLON:

- MLH1 MSH2 MSH6 EGFR TS p21 p27 Ki67 p53 DNA
- MLH1/MSH2/MSH6 IHC. Reflex to Microsatellite Instability by PCR if necessary,
- Microsatellite Instability by PCR (block with normal and tumor tissue required)

PROSTATE:

- TrView™ Prostate Triple Stain AR DNA* Ki67 p53 p21 p27

*Designates antibodies that can be performed by Image Analysis

TUMOR ANALYSIS PROFILES BY IHC

- Melanocytic Markers
- in situ vs. Invasive Breast Carcinoma
- Undifferentiated Malignant Tumor
- Adenocarcinoma vs. Mesothelioma
- Carcinoma unknown primary - Female
- Carcinoma unknown primary - Male
- Mantle Cell vs. CLL/SLL
- Prostate Carcinoma vs. Non-Neoplastic Glands
- Breast: Ductal vs. Lobular Neoplasia
- Breast: Basal-Like Carcinoma
- Breast Metaplastic Carcinoma
- See back for additional antibodies

ADDITIONAL STAINS:

DIFFERENTIAL DIAGNOSIS:

MOLECULAR AND FISH

- B Cell Gene Rearrangement (PCR)
- T Cell Gene Rearrangement (PCR)
- B & T Cell Gene Rearrangement (PCR)
- BCL-1 (FISH)
- BCL-2 (FISH)
- BCL-1 & BCL-2 (FISH)
- CUP (PCR) (Cancer of Unknown Primary)
- Other: _____

OTHER TESTS

- Other: _____



Primary Antibody Menu

Updated list available on US LinX™ online services @ www.uslabs.net

CHOOSE SELECTED ANTIBODIES BELOW

ANTIBODY	ANTIBODY	ANTIBODY	ANTIBODY	ANTIBODY
<input type="checkbox"/> ACTIN-muscle specific (HHF-35)	<input type="checkbox"/> CD25*	<input type="checkbox"/> E-Cadherin	<input type="checkbox"/> Kappa	<input type="checkbox"/> PAX5/CD5* (DOUBLE)
<input type="checkbox"/> ACTIN-smooth muscle (SMA)	<input type="checkbox"/> CD30 (Ber-H2)	<input type="checkbox"/> EGFR** (Epithelial growth factor receptor)	<input type="checkbox"/> Kappa (ish)	<input type="checkbox"/> Perforin
<input type="checkbox"/> Adrenocorticotrophic Hormone (ACTH)	<input type="checkbox"/> CD31 (Pecam-1)	<input type="checkbox"/> Epithelial Membrane Antigen (EMA)	<input type="checkbox"/> KER, PAN* (Pan-Cytokeratin, AE1/AE3)	<input type="checkbox"/> Placental Alkaline Phosphatase (PLAP)
<input type="checkbox"/> AE-1 (Keratins 40,48,50,50.6 kD)	<input type="checkbox"/> CD33	<input type="checkbox"/> Epithelial Related Antigen (MOC 31)	<input type="checkbox"/> Ki-67 (MIB-1)	<input type="checkbox"/> Platelet Derived Growth Factor Receptor - Alpha* (PDGF-Alpha C20)
<input type="checkbox"/> AE-1/AE3 (Keratin Cocktail)	<input type="checkbox"/> CD34 (HPCA)	<input type="checkbox"/> Epstein Barr Virus Latent Membrane Protein (EBV-LMP)	<input type="checkbox"/> Lambda	<input type="checkbox"/> Platelet Derived Growth Factor Receptor - Beta (PDGF-Beta P20)*
<input type="checkbox"/> AE-3 (Keratins 58,65.5 kD)	<input type="checkbox"/> CD35 (C3b receptor)	<input type="checkbox"/> ERCC1* (Excision Repair Cross Complementing)	<input type="checkbox"/> Lambda (ish)	<input type="checkbox"/> Pneumocystis carinii
<input type="checkbox"/> ALK-1 protein (p80)	<input type="checkbox"/> CD38	<input type="checkbox"/> Estrogen Receptor (ER)	<input type="checkbox"/> Luteinizing Hormone (LH)	<input type="checkbox"/> Progesterone Receptor (PR)
<input type="checkbox"/> Alpha 1-Antichymotrypsin (A-ACT)	<input type="checkbox"/> CD43	<input type="checkbox"/> Factor VIII (von Willebrand Factor)	<input type="checkbox"/> Lysozyme (Muramidase)	<input type="checkbox"/> Prolactin
<input type="checkbox"/> Alpha Fetoprotein (AFP)	<input type="checkbox"/> CD45 (LCA, Leucocyte Common Antigen)	<input type="checkbox"/> Factor XIIIa	<input type="checkbox"/> Mammaglobin	<input type="checkbox"/> Proliferating Cell Nuclear Antigen (PCNA)
<input type="checkbox"/> Alpha-1-Antitrypsin (A-AT)	<input type="checkbox"/> CD45RA	<input type="checkbox"/> Fascin	<input type="checkbox"/> MDR-1 (CD245)	<input type="checkbox"/> Prostate Specific Antigen (PSA)
<input type="checkbox"/> Amyloid A	<input type="checkbox"/> CD45RO (UCHL-1)	<input type="checkbox"/> Fil-1	<input type="checkbox"/> Melan A/Ki67 (DOUBLE)	<input type="checkbox"/> Prostatic Acid Phosphatase (PSAP)
<input type="checkbox"/> Androgen Receptor	<input type="checkbox"/> CD56	<input type="checkbox"/> Follicular stimulating hormone (FSH)	<input type="checkbox"/> Melan-A (MART-1)	<input type="checkbox"/> Renal Cell Carcinoma
<input type="checkbox"/> B72.3 (TAG72, Breast-3)	<input type="checkbox"/> CD57	<input type="checkbox"/> Gastrin	<input type="checkbox"/> Melanoma Associated Antigen* (NKI C3)	<input type="checkbox"/> S-100
<input type="checkbox"/> Beta F1 (TCR alpha/beta)	<input type="checkbox"/> CD61	<input type="checkbox"/> Glial Fibrillary Acidic Protein (GFAP)	<input type="checkbox"/> Mesothelin	<input type="checkbox"/> Serotonin
<input type="checkbox"/> BCA-225	<input type="checkbox"/> CD68	<input type="checkbox"/> Glucagon	<input type="checkbox"/> MLH-1	<input type="checkbox"/> Somatostatin
<input type="checkbox"/> BCL-1 (Cyclin-D1)	<input type="checkbox"/> CD74 (LN2)	<input type="checkbox"/> Glutathione S Transferase p	<input type="checkbox"/> MOC 31 (Epithelial Related Antigen)	<input type="checkbox"/> Synaptophysin (monoclonal)
<input type="checkbox"/> BCL-1/CD20 (DOUBLE)	<input type="checkbox"/> CD79a	<input type="checkbox"/> Glycophorin A	<input type="checkbox"/> MSH-2	<input type="checkbox"/> Synaptophysin (polyclonal)
<input type="checkbox"/> BCL-2	<input type="checkbox"/> CD99 (O13)	<input type="checkbox"/> Granzyme B	<input type="checkbox"/> MSH-6	<input type="checkbox"/> Synuclein
<input type="checkbox"/> BCL-2/BCL-6 (DOUBLE)	<input type="checkbox"/> CD117 (C-kit)	<input type="checkbox"/> Gross Cystic Disease Fluid Protein (GCDFF-15; BRST-2)	<input type="checkbox"/> MUC-1 (Mucicarmine 1)	<input type="checkbox"/> Tau
<input type="checkbox"/> BCL-6	<input type="checkbox"/> CD123	<input type="checkbox"/> Growth Hormone (GH)	<input type="checkbox"/> MUC-2	<input type="checkbox"/> TCL-1
<input type="checkbox"/> Ber-EP4 (Epithelial Antigen)	<input type="checkbox"/> CD138	<input type="checkbox"/> HAM-56	<input type="checkbox"/> Multi-drug Resistance Marker	<input type="checkbox"/> TdT
<input type="checkbox"/> Beta Amyloid A (AA)	<input type="checkbox"/> CD163 (M130, Ber-MAC3, Ki-M8, SMA4)	<input type="checkbox"/> HCG beta (Human Chorionic Gonadotropin)	<input type="checkbox"/> MUM-1 (Multiple Myeloma Oncogene 1)	<input type="checkbox"/> Thrombomodulin
<input type="checkbox"/> Beta Catenin	<input type="checkbox"/> CDw75	<input type="checkbox"/> Helicobacter Pylori (H.Pylori or HBP)	<input type="checkbox"/> Myelin Basic Protein (MBP)	<input type="checkbox"/> Thymidilate Synthase
<input type="checkbox"/> Bg-8*	<input type="checkbox"/> CDx2/CK7 (DOUBLE)	<input type="checkbox"/> Hemoglobin A	<input type="checkbox"/> Myeloperoxidase (MPO)	<input type="checkbox"/> Thyroglobulin
<input type="checkbox"/> BOB1*	<input type="checkbox"/> CEA (CD66e)	<input type="checkbox"/> Hemoglobin A	<input type="checkbox"/> Myo D1	<input type="checkbox"/> Thyroid stimulating hormone (TSH)
<input type="checkbox"/> CA 15.3	<input type="checkbox"/> CEA (p)	<input type="checkbox"/> Hepatitis B Core Antigen (HBcAg)	<input type="checkbox"/> Myogenin	<input type="checkbox"/> Thyroid transcription factor -1 (TTF-1)
<input type="checkbox"/> CA 19.9	<input type="checkbox"/> Chromogranin A (CG - A)	<input type="checkbox"/> Hepatitis B Surface Antigen (HBsAg)	<input type="checkbox"/> Myoglobin	<input type="checkbox"/> TIA-1
<input type="checkbox"/> CA125 (OC125)	<input type="checkbox"/> CK Pan-Cytokeratin	<input type="checkbox"/> HepPar 1	<input type="checkbox"/> Myosin-heavy chain	<input type="checkbox"/> Topoisomerase II Alpha (TOPO II)
<input type="checkbox"/> Calcitonin	<input type="checkbox"/> CK HMW/LMW	<input type="checkbox"/> HER-2/neu	<input type="checkbox"/> Neurofilament (NFI)	<input type="checkbox"/> Toxoplasmosis
<input type="checkbox"/> Caldesmon	<input type="checkbox"/> CK5/6	<input type="checkbox"/> HERCEPT™ **	<input type="checkbox"/> NKI C3* (Melanoma Associated Antigen)	<input type="checkbox"/> TRAcP
<input type="checkbox"/> Calponin	<input type="checkbox"/> CK7	<input type="checkbox"/> Herpes Simplex Virus, Type I & II (HSV I & HSV II)	<input type="checkbox"/> NPM (Nucleophosmin)	<input type="checkbox"/> TriView™ Breast (CK5/6, p63, CK8/18) (microinvasion) (TRIPLE)
<input type="checkbox"/> Calretinin	<input type="checkbox"/> CK14	<input type="checkbox"/> Herpes Virus Type 8 (HHV 8)	<input type="checkbox"/> NSE (Neuron Specific Enolase)	<input type="checkbox"/> TriView™ Prostate (p504s, p63, CK903) (TRIPLE)
<input type="checkbox"/> CAM 5.2	<input type="checkbox"/> CK17	<input type="checkbox"/> HLA-DR	<input type="checkbox"/> OCT 3/4	<input type="checkbox"/> Tryptase
<input type="checkbox"/> Cathepsin D	<input type="checkbox"/> CK18	<input type="checkbox"/> HMB-45	<input type="checkbox"/> OCT2*	<input type="checkbox"/> Tyrosinase
<input type="checkbox"/> CD1a	<input type="checkbox"/> CK19	<input type="checkbox"/> Human Mesothelial Cell	<input type="checkbox"/> p16	<input type="checkbox"/> Ubiquitin
<input type="checkbox"/> CD2	<input type="checkbox"/> CK20	<input type="checkbox"/> Human Milk Fat Globule Protein	<input type="checkbox"/> p21	<input type="checkbox"/> Ulex europaeus
<input type="checkbox"/> CD3 monoclonal	<input type="checkbox"/> CK-Hi MW (CK high molecular weight)	<input type="checkbox"/> Human Papilloma Virus (HPV)	<input type="checkbox"/> p27	<input type="checkbox"/> Uroplakin*
<input type="checkbox"/> CD3 polyclonal	<input type="checkbox"/> C-kit (CD117)	<input type="checkbox"/> Human Papilloma Virus High Risk (HPV HR)	<input type="checkbox"/> p504s	<input type="checkbox"/> Vascular Endothelial Growth Factor (VEGF)
<input type="checkbox"/> CD3/CD20 (DOUBLE)	<input type="checkbox"/> CK-Low MW (CK low molecular weight)	<input type="checkbox"/> Human Papilloma Virus Low Risk (HPV LR)	<input type="checkbox"/> p53	<input type="checkbox"/> Vasoactive Intestinal Polypeptide (VIP)
<input type="checkbox"/> CD4	<input type="checkbox"/> Collagen IV (Type 4 Collagen)	<input type="checkbox"/> Human Placental Lactogen (HPL)	<input type="checkbox"/> p63	<input type="checkbox"/> Villin
<input type="checkbox"/> CD5	<input type="checkbox"/> Cyclin D1 (BCL-1/PRAD-1)	<input type="checkbox"/> IgA Immunoglobulin A	<input type="checkbox"/> Pancreatic Polypeptide (Panc Poly)	<input type="checkbox"/> Vimentin (VIM)
<input type="checkbox"/> CD7	<input type="checkbox"/> Cyclin E*	<input type="checkbox"/> IgD Immunoglobulin D	<input type="checkbox"/> Pan-Cytokeratin* (KER, PAN, AE1/AE3)	<input type="checkbox"/> von Willebrand Factor (vWF; Factor VIII)
<input type="checkbox"/> CD8	<input type="checkbox"/> Cyclooxygenase-2 (COX-2)	<input type="checkbox"/> IgG Immunoglobulin G	<input type="checkbox"/> Pan-Melanoma (MART-1, S-100, Tyrosinase) (TRIPLE)	<input type="checkbox"/> WT-1
<input type="checkbox"/> CD10 (CALLA)	<input type="checkbox"/> Cytokeratin-Pan	<input type="checkbox"/> IgM Immunoglobulin M	<input type="checkbox"/> Parathormone (PTH)	
<input type="checkbox"/> CD14	<input type="checkbox"/> Cytomegalovirus (CMV)	<input type="checkbox"/> Inhibin	<input type="checkbox"/> Parvovirus	
<input type="checkbox"/> CD15 (Leu M1)	<input type="checkbox"/> D2-40	<input type="checkbox"/> Insulin	<input type="checkbox"/> PAX2	
<input type="checkbox"/> CD20 (L-26)	<input type="checkbox"/> DBA.44		<input type="checkbox"/> PAX5	
<input type="checkbox"/> CD21	<input type="checkbox"/> Desmin		<input type="checkbox"/> PAX5/BCL2 (DOUBLE)	
<input type="checkbox"/> CD22	<input type="checkbox"/> EBER (ish) (EBV)		<input type="checkbox"/> PAX5/CD43 (DOUBLE)	
<input type="checkbox"/> CD23				

For sentinel lymph node biopsies for carcinoma, an AE1/AE3 antibody will be used unless a specific request is made by the ordering institution.

Tumor Analysis Profiles

CHOOSE FULL PROFILES OR INDIVIDUAL ANTIBODIES BELOW

<p><input type="checkbox"/> MELANOCYTIC MARKERS</p> <ul style="list-style-type: none"> <input type="checkbox"/> S-100 <input type="checkbox"/> HMB-45 <input type="checkbox"/> Melan A <input type="checkbox"/> Tyrosinase <input type="checkbox"/> NKI-C3 <p><input type="checkbox"/> in situ vs. INVASIVE BREAST CARCINOMA</p> <ul style="list-style-type: none"> <input type="checkbox"/> TriView Breast triple stain (CK5/6 + p63 + CK8/18) <p><input type="checkbox"/> UNDIFFERENTIATED MALIGNANT TUMOR</p> <ul style="list-style-type: none"> <input type="checkbox"/> Pan-Cytokeratin* (AE1/AE3) <input type="checkbox"/> CAM 5.2 <input type="checkbox"/> S-100 <input type="checkbox"/> Vimentin <input type="checkbox"/> CD45 <input type="checkbox"/> CD30 <input type="checkbox"/> Other: _____ 	<p><input type="checkbox"/> ADENOCARCINOMA VS. MESOTHELIOMA</p> <ul style="list-style-type: none"> <input type="checkbox"/> CK 5/6 <input type="checkbox"/> CEA (m) <input type="checkbox"/> Ber-EP4 <input type="checkbox"/> Calretinin <input type="checkbox"/> WT-1 <input type="checkbox"/> TTF-1 <input type="checkbox"/> B72.3 (TAG 72) <input type="checkbox"/> BG-8 <input type="checkbox"/> MOC-31 <input type="checkbox"/> D2-40 <p><input type="checkbox"/> CARCINOMA UNKNOWN PRIMARY - FEMALE</p> <ul style="list-style-type: none"> <input type="checkbox"/> CK7/CDx2 <input type="checkbox"/> CK20 <input type="checkbox"/> ER <input type="checkbox"/> GCDFP <input type="checkbox"/> TTF-1 <input type="checkbox"/> CEA (m) <input type="checkbox"/> WT-1 <input type="checkbox"/> S-100 <input type="checkbox"/> CA-125 <input type="checkbox"/> Mammaglobin 	<p><input type="checkbox"/> CARCINOMA UNKNOWN PRIMARY - MALE</p> <ul style="list-style-type: none"> <input type="checkbox"/> CK7/CDx2 <input type="checkbox"/> CK20 <input type="checkbox"/> PSA <input type="checkbox"/> PSAP <input type="checkbox"/> TTF-1 <input type="checkbox"/> CEA (m) <p><input type="checkbox"/> MANTLE CELL VS. CLL/SLL</p> <ul style="list-style-type: none"> <input type="checkbox"/> CD20 <input type="checkbox"/> CD23 <input type="checkbox"/> Cyclin D1 <input type="checkbox"/> CD43 <input type="checkbox"/> CD3 <input type="checkbox"/> PAX5/CD5 <p><input type="checkbox"/> PROSTATE CARCINOMA VS. NON-NEOPLASTIC GLANDS</p> <ul style="list-style-type: none"> <input type="checkbox"/> TriView™ Prostate (p504s, p63, CK903) <p><input type="checkbox"/> BREAST: DUCTAL VS. LOBULAR NEOPLASIA</p> <ul style="list-style-type: none"> <input type="checkbox"/> E-cadherin <input type="checkbox"/> P120 catenin 	<p><input type="checkbox"/> BREAST: BASAL-LIKE CARCINOMA</p> <ul style="list-style-type: none"> <input type="checkbox"/> CK 5/6 <input type="checkbox"/> CK14 <input type="checkbox"/> Vimentin <input type="checkbox"/> CK17 <input type="checkbox"/> EGFR <input type="checkbox"/> ER/PR/Her2 <p><input type="checkbox"/> BREAST METAPLASTIC CARCINOMA</p> <ul style="list-style-type: none"> <input type="checkbox"/> AE1/AE3 <input type="checkbox"/> Cam 5.2 <input type="checkbox"/> CK 5/6 <input type="checkbox"/> CK14 <input type="checkbox"/> CK17 <input type="checkbox"/> CK7 <input type="checkbox"/> p63 <input type="checkbox"/> Vimentin <input type="checkbox"/> ER
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THE ABOVE PROFILES ARE SUGGESTED LIMITED MARKERS. THEY ARE TO BE INTERPRETED ONLY IN THE CONTEXT OF CLINICAL DATA, MORPHOLOGIC FINDINGS AND THE RESULTS OF OTHER PERTINENT IMMUNOHISTOCHEMICAL STAINS.