


**IMMUNOCHEMISTRY AND SPECIAL STAIN REQUISITION FORM**
**PATIENT INFORMATION**

 Name \_\_\_\_\_  
LAST FIRST MIDDLE

 DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender at birth  Male  Female

 Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
MRN/Pt. ID/SSN # \_\_\_\_\_ Phone # \_\_\_\_\_
**CLINICAL/SPECIMEN INFORMATION**

 Collection date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time  AM  PM

 Fixative  10% Neutral Buffered Formalin

 Body Site/Description \_\_\_\_\_  Other

 Specimen ID#(s) \_\_\_\_\_  See Previous Case History

 Paraffin Block(s)#  Choose Best Block (Default)  Stained Slides#

 Paraffin Block(s) (# \_\_\_\_\_)  Stained Slides (# \_\_\_\_\_)  
 Choose Best Block (Default)  Unstained Slides (# \_\_\_\_\_)  
 Other (# \_\_\_\_\_)  Perform Test on All Blocks

Diagnosis/Clinical Data \_\_\_\_\_

 All Diagnosis should be provided by the ordering physician or an authorized designee.  
 Diagnosis/Signs/Symptoms in ICD-CM format in effect at Date of Service (Highest Specificity Required)

ICD-CM \_\_\_\_\_ ICD-CM \_\_\_\_\_ ICD-CM \_\_\_\_\_

**PHYSICIAN INFORMATION**

Referring MD \_\_\_\_\_

Account information \_\_\_\_\_

Next appointment date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**BILLING INFORMATION**
 Insurance  Client  Patient  Hospital Inpatient  
 Hospital Outpatient  Non-Hospital Patient

 Please attach an Advance Beneficiary Notice (ABN) for all Medicare patients  
 (Form can be downloaded from www.siparadigm.com)

**CLINICAL INFORMATION**

ICD-10 \_\_\_\_\_

RACE &amp; ETHNICITY (Only required for CA patients) \_\_\_\_\_



Attach clinical notes, patient information, CBC, and insurance card

I am certified to order the test(s) listed below, such that these test(s) are medically necessary and I have obtained informed consent for the requested test(s) when pertinent

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SIPARADIGM IMMUNOHISTOCHEMISTRY AND SPECIAL STAINS MENU**
 IHC stain - Technical Component only (slides)  IHC stain with Virtual Image - Technical Component only  IHC Stain with Manual Interpretation

- Actin (muscle specific)
- Actin (smooth muscle)
- ADH-5
- AFB
- ALK-1
- ALK D5F3
- Alpha-1 Fetoprotein
- Amyloid-A
- Annexin A1
- Arginase
- Alcian Blue
- B72.3 / TAG-72
- Bcl1
- Bcl-2
- Bcl-6
- BerEP4
- Beta HCG
- Beta-Catenin
- BRAF
- Bg8
- Bob.1
- CA 125
- CA19-9
- Caldesmon
- Calponin
- Calretinin polyclonal
- CAM 5.2/CK8&18
- CD10
- CD103
- CD117
- CD138
- CD163
- CD15
- CD1a
- CD2
- CD20
- CD21
- CD23
- CD3
- CD30
- CD31

- CD34
- CD4
- CD43
- CD45 (LCA)
- CD5
- CD56
- CD57
- CD61
- CD68
- CD7
- CD71
- CD79α
- CD8
- CD99
- CDX2
- CEA, polyclonal
- CEA, monoclonal
- Chromagranin A
- CK17
- CK19
- CK20
- CK 5/6
- CK7
- CK903
- Congo Red
- CMV
- C-Myc
- D2-40
- Desmin
- DOG-1
- EBER
- E-Cadherin
- EMA
- Estrogen Receptor
- Fascin
- FVIII (von Willebrand)
- FXIIIa
- GATA3
- GCDFFP-15
- GFAP
- GMS

- GlycophorinA
- Glypican-3
- Granzyme B
- H. pylori
- HBME-1
- Hepatocyte (HepPar1)
- HER2-neu
- HSV type II
- HHV-8
- HMB45
- HNF1-1 BETA
- HPV-6/11
- HPV-16/18
- HPV-31/33
- HSV type I
- IgA
- IgG
- IgG4
- IgM
- Inhibin
- Kappa light chain
- Kappa ISH
- Ki-67
- Lambda light chain
- Lambda ISH
- Lysozyme
- Mammaglobin
- Mucicarmine
- MELAN-A
- MiTF-1
- MLH-1
- MSH-2
- MSH-6
- MOC-31
- MUM1
- Myeloperoxidase
- NSE
- Napsin
- 2-Oct
- 4-Oct
- PAS

- P120 Catinin
- P16
- P40
- P504s
- P53
- P57
- P63
- PAX-5
- PIN-4
- PLAP
- PMS-2
- PAX-8
- PCK, AE1/AE3
- PD-1
- PD-L1 22C3
- PD-L1 28-8
- PD-L1 SP142
- PD-L1 SP263
- PR
- PSA
- PSAP
- PSMA
- RCC
- Reticulum
- S100, polyclonal
- SMMS-1
- SOX-10
- SOX-11
- STAT-6
- Synaptophysin
- TdT
- Thrombomodulin
- Thyroglobulin
- TIA-1
- TRAcP
- Trichrome
- TTF-1
- Tyrosinase
- Uroplakin
- Vimentin
- Wilms' Tumor 1 (WT1)

 Other: \_\_\_\_\_