

# Infectious Disease Serology Test Request\*

## Client Information (required)

Client Name		
Client Account No.		
Client Phone	Client Order No.	
Street Address		
City	State	ZIP Code

## Submitting Healthcare Professional Information (required)

Submitting/Referring Healthcare Professional Name (Last, First)
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### Fill in only if Call Back is required.

Phone (with area code)	Fax (with area code)
National Provider Identification (NPI)	

\*Fax number given must be from a fax machine that complies with applicable HIPAA regulation.

## Reason for Testing (required)

<p>_____</p> <p>_____</p> <p>_____</p>
ICD-10 Diagnosis Code

**Note:** It is the client's responsibility to maintain documentation of the order.

## Patient Information (required)

Patient ID (Medical Record No.)		
Patient Name (Last, First Middle)		
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date (mm-dd-yyyy)	
Collection Date (mm-dd-yyyy)	Time <input type="checkbox"/> am <input type="checkbox"/> pm	
Street Address		
City	State	ZIP Code
Phone		

## Reportable Disease Information

Complete information as indicated by your state requirements.

Client Name		
Client Account No.		
Client Phone	Client Order No.	
Patient Street Address		
City	State	ZIP Code
County	Race/Ethnicity	
Phone	Specimen Type <input type="checkbox"/> Venous <input type="checkbox"/> Capillary	
Parent/Guardian Name (Last, First)		

For a list of additional testing for infectious diseases, see Microbiology Test Request (MC0767).



**Ship specimens to:**  
Mayo Clinic Laboratories  
3050 Superior Drive NW  
Rochester, MN 55905

**Customer Service: 800-533-1710**

### Billing Information

- An itemized invoice will be sent each month.
- Payment terms are net 30 days.

Call the Business Office with billing-related questions:  
800-447-6424 (US and Canada)  
507-266-5490 (outside the US)

**Patient Information (required)**

Patient ID (Medical Record No.)	Client Account No.
Patient Name (Last, First Middle)	Client Order No.
Birth Date (mm-dd-yyyy)	

INFECTIOUS DISEASES	
<input type="checkbox"/> ANAP	<i>Anaplasma phagocytophilum</i> (Human Granulocytic Ehrlichiosis) Antibody, Serum
<input type="checkbox"/> ARBOP	Arbovirus Antibody Panel, IgG and IgM, Serum
<input type="checkbox"/> ABOPC	Arbovirus Antibody Panel, IgG and IgM, Spinal Fluid
<input type="checkbox"/> ASPAG	<i>Aspergillus</i> (Galactomannan) Antigen, Serum
<input type="checkbox"/> ASPBA	<i>Aspergillus</i> Antigen, Bronchoalveolar Lavage
<input type="checkbox"/> BABG	<i>Babesia microti</i> IgG Antibodies, Serum
<input type="checkbox"/> BART	<i>Bartonella</i> Antibody Panel, IgG and IgM, Serum
<input type="checkbox"/> CBL	<i>Blastomyces</i> Antibody Immunodiffusion, Spinal Fluid
<input type="checkbox"/> BLAST	<i>Blastomyces</i> Antibody, Enzyme Immunoassay, Serum
<input type="checkbox"/> BORDG	<i>Bordetella pertussis</i> Antibody, IgG, Serum
<input type="checkbox"/> BRCMG	<i>Brucella</i> Antibody Screen, IgM and IgG, ELISA, Serum
<input type="checkbox"/> BRUTA	<i>Brucella</i> Total Antibody Confirmation, Agglutination, Serum
<input type="checkbox"/> CAVPC	California Virus (La Crosse) Encephalitis Antibody Panel, IgG and IgM, Spinal Fluid
<input type="checkbox"/> CAVP	California Virus (La Crosse) IgG and IgM, Serum
<input type="checkbox"/> CHIKV	Chikungunya IgM and IgG, Antibody, Serum
<input type="checkbox"/> CHLAP	Chlamydia IgM and IgG Panel, Immunofluorescence, Serum
<input type="checkbox"/> COXIS	<i>Coccidioides</i> Antibody Screen with Reflex, Serum
<input type="checkbox"/> SCOC	<i>Coccidioides</i> Antibody, Complement Fixation and Immunodiffusion, Serum
<input type="checkbox"/> CCOC	<i>Coccidioides</i> Antibody, Complement Fixation and Immunodiffusion, Spinal Fluid
<input type="checkbox"/> SLFA	<i>Cryptococcus</i> Antigen Screen with Titer, Serum
<input type="checkbox"/> CLFA	<i>Cryptococcus</i> Antigen Screen with Titer, Spinal Fluid
<input type="checkbox"/> PLFA	<i>Cryptococcus</i> Antigen Screen, Lateral Flow Assay, Pleural Fluid
<input type="checkbox"/> ULFA	<i>Cryptococcus</i> Antigen Screen, Lateral Flow Assay, Random, Urine
<input type="checkbox"/> SLFAT	<i>Cryptococcus</i> Antigen Titer, Lateral Flow Assay, Serum
<input type="checkbox"/> CLFAT	<i>Cryptococcus</i> Antigen Titer, Lateral Flow Assay, Spinal Fluid
<input type="checkbox"/> LFACX	<i>Cryptococcus</i> Antigen with Reflex, Spinal Fluid
<input type="checkbox"/> CMVGS	Cytomegalovirus Antibody, IgG, Serum
<input type="checkbox"/> CMVAB	Cytomegalovirus Antibody, IgM and IgG, Serum
<input type="checkbox"/> CMVMS	Cytomegalovirus Antibody, IgM, Serum
<input type="checkbox"/> DENG M	Dengue Virus Antibody, IgG and IgM, Serum
<input type="checkbox"/> DENVP	Dengue Virus Antibody/Antigen Panel, Serum
<input type="checkbox"/> DNSAG	Dengue Virus NS1 Antigen, Serum
<input type="checkbox"/> DIPGS	Diphtheria Toxoid IgG Antibody, Serum
<input type="checkbox"/> DTABS	Diphtheria/Tetanus Antibody Panel, Serum
<input type="checkbox"/> ECHNG	<i>Echinococcus</i> Antibody, IgG, Serum
<input type="checkbox"/> EHRCP	<i>Ehrlichia</i> Antibody Panel, Serum
<input type="checkbox"/> EHRC	<i>Ehrlichia chaffeensis</i> (HME) Antibody, IgG, Serum
<input type="checkbox"/> EHBAP	<i>Ehrlichia/Babesia</i> Antibody Panel, Immunofluorescence, Serum
<input type="checkbox"/> EHOLG	<i>Entamoeba histolytica</i> Antibody, Serum
<input type="checkbox"/> EBVAB	Epstein-Barr Virus Antibody Profile, Serum
<input type="checkbox"/> EAEV	Epstein-Barr Virus Early Antigen, IgG, Serum
<input type="checkbox"/> TULAB	<i>Francisella tularensis</i> Antibody, IgM and IgG, ELISA, Serum
<input type="checkbox"/> HIBSG	<i>Haemophilus influenzae</i> Type B Antibody, IgG, Serum
<input type="checkbox"/> UBT	<i>Helicobacter pylori</i> Breath Test
<input type="checkbox"/> HSVG	Herpes Simplex Virus (HSV) Type 1- and Type 2-Specific Antibodies, IgG, Serum
<input type="checkbox"/> UHBAG	Histoplasma and Blastomyces Antigen, Enzyme Immunoassay, Urine
<input type="checkbox"/> HISER	Histoplasma Antibody Complement Fixation and Immunodiffusion, Serum
<input type="checkbox"/> HICSF	Histoplasma Antibody Complement Fixation and Immunodiffusion, Spinal Fluid
<input type="checkbox"/> MONOS	Infectious Mononucleosis, Rapid Test, Serum
<input type="checkbox"/> LAGU	<i>Legionella</i> Antigen, Random, Urine
<input type="checkbox"/> SLEG	<i>Legionella pneumophila</i> (Legionnaires Disease), Antibody, Serum
<input type="checkbox"/> LEIS	Leishmaniasis (Visceral) Antibody, Serum
<input type="checkbox"/> LEPDT	<i>Leptospira</i> , IgM, Serum
<input type="checkbox"/> SLYME	Lyme Antibody Modified 2-Tier with Reflex, Serum
<input type="checkbox"/> LNBAB	Lyme Central Nervous System Infection IgG with Antibody Index Reflex, Serum and Spinal Fluid
<input type="checkbox"/> LYWB	Lyme Disease Antibody, Immunoblot, Serum
<input type="checkbox"/> LYME	Lyme Disease Serology, Serum
<input type="checkbox"/> TLYME	Lyme IgM and IgG, Whole Cell Sonicate, ELISA, Serum
<input type="checkbox"/> ROPG	Measles (Rubeola) Antibodies, IgG, Serum
<input type="checkbox"/> ROM	Measles (Rubeola) Antibodies, IgM, Serum
<input type="checkbox"/> ROGM	Measles (Rubeola) Virus Antibody, IgM and IgG, Serum
<input type="checkbox"/> MMRV	Measles, Mumps, Rubella, and Varicella (MMRV) Immune Status Profile, Serum
<input type="checkbox"/> CMUMP	Mumps Virus Antibodies, IgG and IgM, Spinal Fluid
<input type="checkbox"/> MPPG	Mumps Virus Antibody, IgG, Serum
<input type="checkbox"/> MMPGM	Mumps Virus Antibody, IgM and IgG, Serum
<input type="checkbox"/> MMPM	Mumps Virus Antibody, IgM, Serum
<input type="checkbox"/> MYCO	<i>Mycoplasma pneumoniae</i> Antibodies, IgG and IgM, Serum
<input type="checkbox"/> PARVS	Parvovirus B19 Antibodies, IgG and IgM, Serum
<input type="checkbox"/> POWV	Powassan Virus, IgM, Enzyme-Linked Immunosorbent Assay, Serum
<input type="checkbox"/> QFEVR	Q Fever Antibody Screen with Titer Reflex, Serum
<input type="checkbox"/> QFT4	QuantiFERON-TB Gold Plus, Blood
<input type="checkbox"/> RPRT3	Rapid Plasma Reagin (RPR) with Reflex to <i>Treponema pallidum</i> Particle Agglutination, Serum
<input type="checkbox"/> RPRT1	Rapid Plasma Reagin (RPR) Screen with Reflex to Titer, Serum
<input type="checkbox"/> RBPG	Rubella Antibodies, IgG, Serum
<input type="checkbox"/> ROC	Rubeola (Measles) Antibodies, IgG and IgM, Spinal Fluid
<input type="checkbox"/> BILHA	<i>Schistosoma</i> species Antibody, IgG, Serum
<input type="checkbox"/> SFGP	Spotted Fever Group Antibody, IgG and IgM, Serum
<input type="checkbox"/> STLPC	St. Louis Encephalitis Antibody Panel, IgG and IgM, Spinal Fluid
<input type="checkbox"/> STLP	St. Louis Encephalitis Antibody, IgG and IgM, Serum
<input type="checkbox"/> SPNEU	<i>Streptococcus pneumoniae</i> Antigen, Random, Urine
<input type="checkbox"/> SPNC	<i>Streptococcus pneumoniae</i> Antigen, Spinal Fluid
<input type="checkbox"/> STRNG	<i>Strongyloides</i> Antibody, IgG, Serum
<input type="checkbox"/> TPPA	Syphilis Antibody, <i>Treponema pallidum</i> Particle Agglutination, Serum
<input type="checkbox"/> NSYPH	Syphilis IgG Enzyme Immunoassay, Serum
<input type="checkbox"/> SYPH1	Syphilis IgG with Reflex, Enzyme Immunoassay, Serum
<input type="checkbox"/> TTIGS	Tetanus Toxoid IgG Antibody, Serum
<input type="checkbox"/> STICK	Tick-Borne Antibodies, Modified 2-Tier, ELISA, Serum
<input type="checkbox"/> TICKS	Tick-Borne Disease Antibodies Panel, Serum

**Patient Information (required)**

Patient ID (Medical Record No.)	Client Account No.
Patient Name (Last, First Middle)	Client Order No.
Birth Date (mm-dd-yyyy)	

- TRCHG ToRCH Profile IgG, Serum
- TXPG *Toxoplasma gondii* Antibody, IgG, Serum
- TXPAB *Toxoplasma gondii* Antibody, IgM and IgG, Serum
- TXPM *Toxoplasma gondii* Antibody, IgM, Serum
- CRUZI *Trypanosoma cruzi* (Chagas) Antibody Panel, Serum
- VZPG Varicella-Zoster Antibody, IgG, Serum
- VZGM Varicella-Zoster Antibody, IgM and IgG, Serum
- VZM Varicella-Zoster Virus (VZV) Antibody, IgM, Serum
- WNS West Nile Virus Antibody, IgG and IgM, Serum
- WNC West Nile Virus Antibody, IgG and IgM, Spinal Fluid
- WEEPC Western Equine Encephalitis Antibody Panel, IgG and IgM, Spinal Fluid
- WEEP Western Equine Encephalitis Antibody, IgG and IgM, Serum
- VZIKM Zika Virus, IgM Antibody Capture ELISA, Serum

**HEPATITIS**

**Acute/Chronic**

- AHEP Acute Viral Hepatitis Profile, Serum
- CHSBP Chronic Hepatitis B Monitoring Profile, Serum
- CHBVS Chronic Hepatitis B Screen, Serum
- CRHEP Chronic Viral Hepatitis (Unknown Type), Serum
- PHEPU Previous Viral Hepatitis (Unknown Type), Serum

**Prenatal**

- HBCPR Hepatitis B Virus Core Total Antibodies Prenatal, Serum
- HBABP Hepatitis B Virus Surface Antibody Prenatal, Qualitative/Quantitative, Serum
- HBAGP Hepatitis B Virus Surface Antigen Prenatal, Serum
- HCVSP Hepatitis C Virus (HCV) Antibody Screen Prenatal, Serum
- PHSP Prenatal Hepatitis Evaluation, Serum

**Hepatitis A**

- HAVTA Hepatitis A Virus Total Antibodies, Serum
- HAIGM Hepatitis A Virus IgM Antibody, Serum

**Hepatitis B**

- HBIM Hepatitis B Virus Core IgM Antibody, Serum
- HBCSN Hepatitis B Virus Core Total Antibodies Screen, Serum
- HBC Hepatitis B Virus Core Total Antibodies, Serum
- CORAB Hepatitis B Virus Core Total Antibodies, with Reflex to Hepatitis B Virus Core IgM Antibody, Serum
- HBCRQ Hepatitis B Virus Core-Related Antigen, Quantitative, Serum
- HEAB Hepatitis B Virus e Antibody, Serum
- HEAG Hepatitis B Virus e Antigen and Hepatitis B Virus e Antibody, Serum
- EAG Hepatitis B Virus e Antigen, Serum
- HBABY Hepatitis B Virus Perinatal Exposure Follow-up Panel, Serum
- HBABT Hepatitis B Virus Surface Antibody Monitor, Post-Transplant, Serum
- HBBSN Hepatitis B Virus Surface Antibody Screen, Qualitative/Quantitative, Serum
- HBAB Hepatitis B Virus Surface Antibody, Qualitative/Quantitative, Serum
- HBAGQ Hepatitis B Virus Surface Antigen, Quantitative, Serum

**Hepatitis C**

- HCSRN Hepatitis C Virus (HCV) Antibody Screen with Reflex to HCV RNA, PCR, Asymptomatic, Serum
- HCVDX Hepatitis C Virus (HCV) Antibody with Reflex to HCV RNA, PCR, Symptomatic, Serum
- HCVL Hepatitis C Virus Antibody Confirmation, Serum
- HCCAD Hepatitis C Virus Antibody Screen, Cadaveric or Hemolyzed Specimens, Asymptomatic, Serum
- HCCDD Hepatitis C Virus Antibody, Cadaveric or Hemolyzed Specimens, Symptomatic, Serum

**Hepatitis D**

- AHDV Hepatitis D Virus (HDV) Total Antibodies with Reflex to HDV RNA Detection and Quantitation, PCR, Serum

**Hepatitis E**

- HEVG Hepatitis E Virus IgG Antibody, Serum
- HEVML Hepatitis E Virus IgM Antibody Confirmation, Serum
- HEVM Hepatitis E Virus IgM Antibody Screen with Reflex to Confirmation, Serum

**HIV**

- HIVSP HIV Antigen and Antibody Prenatal Routine Screen, Plasma
- HV1CD HIV-1 and HIV-2 Antibodies for Cadaveric or Hemolyzed Specimens, Serum
- HVPPS HIV-1 and HIV-2 Antibody Confirmation and Differentiation Prenatal, Serum
- HVDIP HIV-1 and HIV-2 Antibody Confirmation and Differentiation, Plasma
- HIVDI HIV-1 and HIV-2 Antibody Confirmation and Differentiation, Serum
- HV1CM HIV-1 and HIV-2 Antibody Screen for Hemolyzed Specimens, Serum
- HIVDX HIV-1 and HIV-2 Antigen and Antibody Diagnostic Evaluation, Plasma
- HIVDS HIV-1 and HIV-2 Antigen and Antibody Diagnostic Evaluation, Serum
- HVPRS HIV-1 and HIV-2 Antigen and Antibody Prenatal Routine Screen, Serum
- HVCOP HIV-1 and HIV-2 Antigen and Antibody Routine Screen, Plasma
- HIVSS HIV-1 and HIV-2 Antigen and Antibody Routine Screen, Serum

**HUMAN T-CELL LYMPHOTROPIC VIRUS**

- HTLLC Human T-Cell Lymphotropic Virus Types 1 and 2 (HTLV-1/-2) Antibody Confirmation, Spinal Fluid
- HTLVC Human T-Cell Lymphotropic Virus Types 1 and 2 (HTLV-1/-2) Antibody Screen with Confirmation, Spinal Fluid
- HTLVL Human T-Cell Lymphotropic Virus Types I and II (HTLV-I/-II) Antibody Confirmation, Serum
- HTLVI Human T-Cell Lymphotropic Virus Types I and II Antibody Screen with Confirmation, Serum

**ADDITIONAL TESTS (INDICATE TEST ID AND NAME)**

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