

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)

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)

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 ☐ Male ☐ Female	Birth Date (mm-dd-yyyy)	
Collection Date (mm-dd-yyyy)	Time	☐ am ☐ 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 ☐ Venous ☐ 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.
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Birth Date (mm-dd-yyyy)	

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

☐ STICK	Tick-Borne Antibodies, Modified 2-Tier, ELISA, Serum
☐ TICKS	Tick-Borne Disease Antibodies Panel, Serum
☐ TRCHG	ToRCH Profile IgG, Serum
☐ TOXGP	<i>Toxoplasma gondii</i> Antibody, IgG, Serum
☐ TXMGP	<i>Toxoplasma gondii</i> Antibody, IgM and IgG, Serum
☐ TXM	<i>Toxoplasma gondii</i> Antibody, IgM, Serum
☐ TRCNG	<i>Trichinella</i> Antibody, IgG, Serum
☐ CRUZI	<i>Trypanosoma cruzi</i> (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
☐ CRHEP	Chronic Viral Hepatitis (Unknown Type), Serum
☐ CHBVS	Chronic Hepatitis B Screen, Serum
☐ CHSBP	Chronic Hepatitis B Monitoring Profile, 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 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
☐ 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
☐ HBCRQ	Hepatitis B Virus Core-Related Antigen, Quantitative, Serum
☐ HBAGQ	Hepatitis B Virus Surface Antigen, Quantitative, Serum

Hepatitis C	
☐ HCVL	Hepatitis C Virus Antibody Confirmation, Serum
☐ HCVSP	Hepatitis C Virus (HCV) Antibody Screen Prenatal, Serum
☐ 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
☐ HCCDD	Hepatitis C Virus Antibody in Cadaveric or Hemolyzed Specimens, Symptomatic, Serum
☐ HCCAD	Hepatitis C Virus Antibody Screen for Cadaveric or Hemolyzed Specimens, Asymptomatic, Serum

Hepatitis D	
☐ AHDV	Hepatitis D Virus Total Antibodies, 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)	

