## **Advanced Diagnostic Laboratories** National Jewish Health® Client Services | 800.550.6227 | 303.270.2175 fax | njlabs.org

**Complement Testing** 

**SHIP TO: National Jewish Health** 

**Complement Laboratory** 1400 Jackson Street, Room D201 Denver, CO 80206

				I. PAHENI II	ALOUIA	IATION					
Patient Name (Last, First) D						//		☐ Male	Female	■Neutral	
2.	BILLING INFORMATION - INSTI	3. REPOR	T DELIVERY INFORM	ATION							
National Jewish Health Advanced Diagnostic Laboratories does not bill patients											
directly or third-party health insurance. Visit nilabs orgor call for details.						Client ID					
Client ID						Client Name					
Client Name						Address					
Address						City State Zip					
City State Zip						Phone Secure Fax					
Phone						□Duplicate Report Requested Attn:					
Secure Fax						Phone Secure Fax					
4. SPECIMEN INFORMATION											
Specimen Source: ☐ Serum ☐ Plasma ☐ Blood ☐ Urine ☐ Other Collect Date								Collect Time			
Form completed by						Submitter Specimen #					
Date Phone							•				
5. TOTAL COMPLEMENT ACTIVITY ASSAYS							10. CONCENTRATIONS OF INDIVIDUAL COMPONENTS				
SERUM REQUIRED - ONE ALIQUOT PER TEST REQUESTED							PLASMA REQUIRED - ONE ALIQUOT PER TEST REQUESTED				
☐CH50						by	C1QL C1q level by RID			_	
hemolytic titration hemolytic titration							□C1RL	C1r level by RID			
6. FUNCTIONAL ASSAYS FOR INDIVIDUAL COMPONENTS							□C1SL	C1s level by RID			
SERUM REQUIRED - ONE ALIQUOT PER TEST REQUESTED							□C2L	C2 level by RID			
□C1QF	C1q function by hemolytic assay C8F C8 function I			ction by hemolytic assay		□C5L	C5 level by RID				
□C1F	C1 function by hemolytic assay			nction by hemolytic		□C6L	C6 level by RID				
□C2F	C2 function by hemolytic assay				nolytic a	issay	□C7L	C7 level by RID			
□C3F	C3 function by hemolytic assay				nolytic a	issay	□C8L	. C8 level by RID			
□C4F	C4 function by hemolytic assay	□INHF	C1 es	terase inhibitor fun	ction, C	hromogenic	□C9L	C9 level by RID			
□C5F	C5 function by hemolytic assay	□C59S	Rapid	screen for C5F, C6F	, C7F, C8	BF, C9F, CH50	□CIC	Circulating immune complexes (C1q-binding and C3d)			
□C6F	C6 function by hemolytic assay	□FHF	Facto	r H function by hen	nolytic a	issay	□INHLP	C1-esterase inhibitor level by Turbidimetric (C1-INH)			
□C7F	C7 function by hemolytic assay						□FHL	Factor H level by RID			
7. AUTOANTIBODIES TO COMPLEMENT COMPONENTS							□FIL	Factor I level by RID			
SERUM REQUIRED - ONE ALIQUOT PER TEST REQUESTED							□FBL	☐FBL Factor B level by RID			
□C3NF	□C3NF C3 nephritic factor by Immunofixation □ INHA Autoantibody					o C1-inhibitor		SERUM REQUIRED - ONE ALIQUOT PER TEST REQUESTED			
Electrophoresis			by ELISA				□С3	C3 level			
☐C1QAB	Autoantibody to <i>C1q</i> by ELISA (C1q-CLR)			AB Autoantibody to Factor H by ELISA			<b>□</b> C4	C4 level			
8. COMPLEMENT KIDNEY PANELS							□INHLS	C1-esterase inhibitor le	evel by Turbidir	netric (C1-INH)	
SEE INDIVIDUAL TESTS FOR SPECIMEN SOURCE REQUIREMENTS								INTERNAL U	SE ONLY		
□C3GN	C3 Glomerulopathy C3GN, DDD or Unknown Subclass Panel includes AH50, CH50, FBL, BbL, C3NEF, FHL, FIL, CD46, sC5b9 Specimen sources required: serum, plasma and whole blood										
LNP	Lupus Nephritis Panel includes C3NEF , CIC, C1QAB Specimen sources required: serum and plasma			aHUS Panel include Specimen sources r serum and whole b	equired	, ,					
9. INDIVIDUAL COMPLEMENT SPLIT PRODUCT											
PLASMA REQUIRED - ONE ALIQUOT PER TEST REQUESTED											
□C3AR	C3a desArg level by RIA		☐BBL Bb level by ELISA								
□C4AR	C4a desArg level by RIA		SC5B9 sC5b-9 level by E		ISA						
□C5AR	C5a desArg level by RIA										