

Coagulation Test Request

Client Information (required)

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

Submitting Provider Information (required)

Submitting/Referring Provider 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		

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

Reason for Testing (required)

ICD-10 Diagnosis Code		
ICD TO Diagnosis Code		

New York State Patients: Informed Consent for Genetic Testing

"I hereby confirm that informed consent has been signed by an individual legally authorized to do so and is on file with this office or the individual's provider's office."

Signature

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



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

Customer Service: 800-533-1710

Patient Information (required)

Patient ID (Medical Record No.)		
Patient Name (Last, First Middle)		
Sex	Birth Date (mm-	dd-yyyy)
🗆 Male 🛛 Female		
Collection Date (mm-dd-yyyy)	Time	🗆 am
		🗆 pm
Street Address		
City	State	ZIP Code
Phone		

Insurance Information

Subscriber Name (if different than patient)			
Patient Relationship			
Medicare HIC Number (if applicable)			
Medicare Number (if applicable)	Medicare Number (if applicable)		
Insurance Company Name (if applicable)			
Insurance Company Street Address			
City	State	ZIP Code	
Policy Number			
Group Number			
MCL Internal Use Only			

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)

Visit www.MayoClinicLabs.com for the most up-to-date test and shipping information.

Patient Information (required)

Patient ID (Medical Record No.)		Client Account No.	
Patient Name (Last, First Middle)		Client Order No.	
Birth Date (mm-dd-yyyy)			
SPECIAL COAGULATION PROFILES	SEX Protein S Activ	vity Plasma	Esoteric Platelet Testing

SP	ECIAL C	COAGULATION PROFILES
	ADAMP	ADAMTS13 Activity with Reflex Inhibitor Profile, Plasma
	ALBLD	Bleeding Diathesis Profile, Limited, Plasma
	CHF8P	Chromogenic Factor VIII Inhibitor Bethesda Profile, Plasma
	ADIC	Disseminated Intravascular Coagulation/ Intravascular Coagulation and Fibrinolysis (DIC/ICF) Profile, Plasma
	ALUPP	Lupus Anticoagulant Profile, Plasma
	APROL	Prolonged Clot Time Profile, Plasma
	AATHR	Thrombophilia Profile, Plasma and Whole Blood
	AVWPR	von Willebrand Disease Profile, Plasma
SP	ECIAL C	OAGULATION TESTS
Co	agulatio	n Factor Activity Testing
	F_2	Coagulation Factor II Activity Assay, Plasma
	FACTV	Coagulation Factor V Activity Assay, Plasma
	F_7	Coagulation Factor VII Activity Assay, Plasma
	F8A	Coagulation Factor VIII Activity Assay,
		Plasma
	F_9	Coagulation Factor IX Activity Assay, Plasma
	F_10	Coagulation Factor X Activity Assay, Plasma
	F_11	Coagulation Factor XI Activity Assay, Plasma
	F_12	Coagulation Factor XII Activity Assay, Plasma
Co	agulatio	n Factor Inhibitor Profiles
	2INHE	Factor II Inhibitor Evaluation, Plasma
	5INHE	Factor V Inhibitor Evaluation, Plasma
	7INHE	Factor VII Inhibitor Evaluation, Plasma
	8INHE	Factor VIII Inhibitor Evaluation, Plasma
	9INHE	Factor IX Inhibitor Evaluation, Plasma
	10INE	Factor X Inhibitor Evaluation, Plasma
	11INE	Factor XI Inhibitor Evaluation, Plasma
Inc	dividual 1	lests
	APCRV	Activated Protein C Resistance V (APCRV), Plasma
	ADAMS	ADAMTS13 Activity Assay, Plasma
	A2PI	Alpha-2 Plasmin Inhibitor, Plasma
	ATTF	Antithrombin Activity, Plasma
	ATTI	Antithrombin Antigen, Plasma
	FXCH	Coagulation Factor X Chromogenic Activity Assay, Plasma
	HITIG	Heparin-PF4 IgG Antibody, Serum
	PAI1	Plasminogen Activator Inhibitor Antigen, Plasma
	CFX	Protein C Activity, Plasma
_	PCAG	Protein C Antigen, Plasma

□ SFX	Protein S Activity, Plasma	
D PSTF	Protein S Antigen, Plasma	
□ RTSC	Reptilase Time, Plasma	
□ SRAU	Serotonin Release Assay, Unfractionated Heparin, Mass Spectrometry, Serum	
□ TTSC	Thrombin Time (Bovine), Plasma	
□ VWACT	von Willebrand Factor Activity, Plasma	
□ VWAG	von Willebrand Factor Antigen, Plasma	
	von Willebrand Factor Multimer Analysis, Plasma	
U VWD8B	von Willebrand Disease 2N	
	(Subtype Normandy), Plasma	
HEREDITA	RY THROMBOPHILIA	
Profiles		
	Activated Protein C Resistance V, with Reflex to Factor V Leiden, Blood and Plasma	
	Thrombophilia Profile, Plasma and Whole Blood	
Individual ⁻	Tests	
□ ATTF	Antithrombin Activity, Plasma	
🗆 ATTI	Antithrombin Antigen, Plasma	
	Activated Protein C Resistance V (APCRV), Plasma	
□ CFX	Protein C Activity, Plasma	
D PCAG	Protein C Antigen, Plasma	
□ SFX	Protein S Activity, Plasma	
D PSTF	Protein S Antigen, Plasma	
ACQUIRED THROMBOPHILIA		
Profiles		
□ ALUPP	Lupus Anticoagulant Profile, Plasma	
Individual Tests		

□ B2GMG	Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum
D DRVI1	Dilute Russell Viper Venom Time (DRVVT), with Reflex, Plasma
🗆 HITIG	Heparin-PF4 IgG Antibody (HIT), Serum
CLPMG	Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum
BLEEDING	DISORDERS

Profiles

AI BI D	Bleeding Diathesis Profile, Limited, Plasma	
ALDLD	Dieceanig Diatricolo i rome, Ennicea, riaonna	

- APROL Prolonged Clot Time Profile, Plasma
- AVWPR von Willebrand Disease Profile, Plasma

Esoteric Pl	atelet Testing
🗆 PLAFL	Platelet Surface Glycoprotein by Flow Cytometry, Blood
D PTEM	Platelet Transmission Electron Microscopic Study, Whole Blood
von Willeb	rand Disease
□ AVWPR	von Willebrand Disease Profile, Plasma
U VWACT	von Willebrand Factor Activity, Plasma
U VWAG	von Willebrand Factor Antigen, Plasma
	von Willebrand Factor Multimer Analysis, Plasma
Individual	Tests
□ F8A	Coagulation Factor VIII Activity Assay, Plasma
□ F_9	Coagulation Factor IX Activity Assay, Plasma
Chromoge	nic Tests
CHF8	Chromogenic Factor VIII Activity Assay, Plasma
🗆 СН9	Chromogenic Factor IX Activity Assay, Plasma
□ FXCH	Coagulation Factor X Chromogenic Activity Assay, Plasma
SDECIAL	
	COAGULATION DRUG ASSAYS
	Apixaban, Anti-Xa, Plasma
APIXA BIVAL	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma
	Apixaban, Anti-Xa, Plasma
APIXA BIVAL	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay
APIXA BIVAL EMICZ RIVAR	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma
APIXA BIVAL EMICZ RIVAR	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma
APIXA BIVAL EMICZ RIVAR SUPPORT B2GMG	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies,
APIXA APIXA BIVAL EMICZ RIVAR SUPPORT B2GMG CLPMG	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum
APIXA APIXA BIVAL RIVAR SUPPORT B2GMG CLPMG	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies,
APIXA APIXA BIVAL CHICZ RIVAR SUPPORT B2GMG CLPMG THROMBO	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum DTIC MICROANGIOPATHY (TMA) ADAMTS13 Activity and Inhibitor Profile,
APIXA APIXA BIVAL EMICZ RIVAR SUPPORT B2GMG CLPMG THROMBG ADM13	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum DTIC MICROANGIOPATHY (TMA) ADAMTS13 Activity and Inhibitor Profile, Plasma Atypical Hemolytic Uremic Syndrome
APIXA APIXA APIXA BIVAL C RIVAR C SUPPORT B2GMG C CLPMG ADM13 AHUSD	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum DTIC MICROANGIOPATHY (TMA) ADAMTS13 Activity and Inhibitor Profile, Plasma Atypical Hemolytic Uremic Syndrome Complement Panel, Serum and Plasma
APIXA APIXA BIVAL EMICZ RIVAR SUPPORT B2GMG CLPMG THROMBG ADM13 AHUSD ECMP	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum DTIC MICROANGIOPATHY (TMA) ADAMTS13 Activity and Inhibitor Profile, Plasma Atypical Hemolytic Uremic Syndrome Complement Panel, Serum and Plasma Eculizumab Monitoring Panel, Serum
APIXA APIXA BIVAL EMICZ RIVAR SUPPORT B2GMG CLPMG THROMBG ADM13 AHUSD ECMP ECULI	Apixaban, Anti-Xa, Plasma Bivalirudin, Ecarin, Plasma Emicizumab, Modified One Stage Assay Factor VIII, Plasma Rivaroxaban, Anti-Xa, Plasma IVE COAGULATION TESTING Beta-2 Glycoprotein 1 Antibodies, IgG and IgM, Serum Phospholipid (Cardiolipin) Antibodies, IgG and IgM, Serum DTIC MICROANGIOPATHY (TMA) ADAMTS13 Activity and Inhibitor Profile, Plasma Atypical Hemolytic Uremic Syndrome Complement Panel, Serum and Plasma Eculizumab Monitoring Panel, Serum Eculizumab, 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)	

COAGULA	TION DNA TESTING
□ FMTT	Familial Variant, Targeted Testing, Varies
🗆 F8INV	Hemophilia A F8 Gene, Intron 1 and 22 Inversion Mutation Analysis, Whole Blood
□ F81B	Hemophilia A F8 Gene, Intron 1 Inversion Known Mutation, Whole Blood
□ F822B	Hemophilia A F8 Gene, Intron 22 Inversion Known Mutation, Whole Blood
□ F8INP	Hemophilia A F8 Gene, Intron 1 and 22 Inversion Mutation Analysis, Prenatal
□ F81P	Hemophilia A F8 Gene, Intron 1 Inversion Known Mutation Analysis, Prenatal
□ F822P	Hemophilia A F8 Gene, Intron 22 Inversion Mutation Analysis, Prenatal
NGS TEST	
□ GNANT	Antithrombin Deficiency, SERPINC1 Gene, Next-Generation Sequencing, Varies
GNBLC	Bleeding Disorders, Comprehensive Gene Panel, Next-Generation Sequencing, Varies
□ GNBLF	Bleeding Disorders, Focused Gene Panel, Next-Generation Sequencing, Varies
□ GNFIB	Congenital Fibrinogen Disorders, FGA, FGB, and FGG Genes, Next-Generation Sequencing, Varies
GNF7	Factor VII Deficiency, F7 Gene, Next-Generation Sequencing, Varies
GNF13	Factor XIII Deficiency, F13A1 and F13B Genes, Next-Generation Sequencing, Varies
□ GNHMA	Hemophilia A, F8 Gene, Next-Generation Sequencing, Varies
GNHMB	Hemophilia B, F9 Gene, Next-Generation Sequencing, Varies
GNF11	Hemophilia C (Factor XI Deficiency), F11 Gene, Next-Generation Sequencing, Varies
□ GNANG	Hereditary Angioedema Focused Gene Panel, Next-Generation Sequencing, Varies
GNHTC	Hereditary Thrombocytopenia Gene Panel, Next-Generation Sequencing, Varies
□ GNADM	Hereditary Thrombotic Thrombocytopenic Purpura, <i>ADAMTS13</i> Gene, Next-Generation Sequencing, Varies
	Macro/Microthrombocytopenia Gene Panel, Next-Generation Sequencing, Varies
GNMY9	MYH9-Related Disorders, MYH9 Gene, Next-Generation Sequencing, Varies

GNPLT	Platelet Disorders, Comprehensive Gene Panel, Next-Generation Sequencing, Varies
□ GNPFD	Platelet Function Defect Gene Panel, Next-Generation Sequencing, Varies
□ GNSPD	Platelet Storage Pool Deficiency Gene Panel, Next-Generation Sequencing, Varies
	Protein C Deficiency, <i>PROC</i> Gene, Next-Generation Sequencing, Varies
□ GNPRS	Protein S Deficiency, <i>PROS1</i> Gene, Next-Generation Sequencing, Varies
□ GNTHR	Thrombosis Disorders, Comprehensive Gene Panel, Next-Generation Sequencing, Varies
GNVWD	von Willebrand Disease, <i>VWF</i> and <i>GP1BA</i> Genes, Next-Generation Sequencing, Varies
	IAL TESTS E TEST CODE AND NAME)