

Ordering Facility		Patient Information (Apply label if available)	
Facility:	Facility ID:	Last Name:	
Address:		First Name:	
City: State/Zip:		Middle Name:	
E-mail:		DOB:	Accession ID#:
Phone:		Specimen Collection Date:	
Fax:		Specimen Storage Temperature: STORED AMBIENT STORED FROZEN STORED REFRIGERATED	
Laboratory Contact:		Ordering Physician:	

**Submitting multiple sample types for a single test will incur an additional charge per test performed unless ordering a panel assay.*

**Discrepancies between the information on the requisition and information on the specimen may cause testing delays*

ANTIGEN TEST

310 Histoplasma EIA	UR	SER	PLS	CSF	BAL	309 Aspergillus EIA	SER	CSF	BAL
316 Blastomyces EIA	UR	SER	PLS	CSF	BAL	311 MycoMEIA® Aspergillus Galf Antigen EIA	UR		
315 Coccidioides EIA	UR	SER	PLS	CSF	BAL	319 Cryptococcus LA	SER	CSF	
						317 Beta-D-Glucan (BDG)	SER	CSF	

ANTIBODY TEST

326 Histoplasma IgG/IgM EIA	SER	PLS	CSF			321 Histoplasma ID	SER	PLS	CSF
331 Blastomyces IgG EIA	SER	PLS				322 Blastomyces ID	SER	PLS	CSF
325 Coccidioides IgG/IgM EIA	SER	PLS	CSF			320 Coccidioides ID	SER	PLS	CSF
						324 Aspergillus ID	SER	PLS	CSF

MOLECULAR TEST

403 Histoplasma PCR	BAL					405 Coccidioides PCR	BAL		
404 Blastomyces PCR	BAL					402 Pneumocystis PCR	BAL		

PANEL TEST

1000 Pulmonary Fungal PCR	BAL								
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ADDITIONAL INFORMATION

Abbreviations: UR=urine; SER=serum; PLS=plasma; CSF=cerebral spinal fluid; BAL=lung lavage fluid; EIA=enzyme immunoassay; LA=latex agglutination; ID=immunodiffusion

Please see Reference Page for Additional Ordering Information

ASSAY INFORMATION

ANTIGEN TEST	Min. Sample (mL)	ANTIBODY TEST	Min. Sample (mL)
310 Histoplasma EIA	0.8 mL URN, SER, PLS, CSF, BAL, or other body fluids*	326 Histoplasma IgG/IgM EIA	0.25 mL SER, PLS*, or CSF*
316 Blastomyces EIA	0.8 mL URN, SER, PLS, CSF, BAL, or other body fluids*	331 Blastomyces IgG EIA	0.25 mL SER, PLS*
315 Coccidioides EIA	0.8 mL URN, SER, PLS, CSF, BAL, or other body fluids*	325 Coccidioides IgG/IgM EIA	0.25 mL SER, PLS*, or CSF*
309 Aspergillus EIA	0.8 mL SER, EDTA PLS*, CSF, BAL, or other body fluids*	321 Histoplasma ID	0.25 mL SER, PLS*, or CSF*
311 MycoMEIA® Aspergillus Galf Antigen EIA	0.15 mL URN	322 Blastomyces ID	0.25 mL SER, PLS*, or CSF*
319 Cryptococcus LA	0.25 mL SER or CSF	320 Coccidioides ID	0.25 mL SER, PLS*, or CSF*
317 Beta-D-Glucan (BDG)	0.25 mL SER or CSF	324 Aspergillus ID	0.25 mL SER, PLS*, or CSF*
MOLECULAR TEST	Min. Sample (mL)	<i>*Reported with Rare Comment applied</i>	
403 Histoplasma PCR	0.5 mL BAL or other pulmonary specimens* (such as Tracheal aspirate or Bronchial Wash)		
404 Blastomyces PCR			
405 Coccidioides PCR			
402 Pneumocystis PCR			

PANEL INFORMATION

PANEL ASSAY	Included Tests and Samples (see volume needs above)
1000 Pulmonary Fungal PCR	Histo 403; Blasto 404; Cocci 405; Pneumo 402