



**TEST REQUISITION FORM**

**PATIENT INFORMATION (Required)**

Patient Name: \_\_\_\_\_  
 Patient ID #: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Lab/order ID #: \_\_\_\_\_  
 Collection Date: \_\_\_\_\_ ICD 10 CODE: \_\_\_\_\_  
 (if needed by requestor)

**INSTITUTION CONTACT (Required)**

Contact: \_\_\_\_\_  
 Institution: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Fax no. \_\_\_\_\_ phone no. \_\_\_\_\_

**TESTS BY IMMUNODIFFUSION**

**HPPN**

HYPERSENSITIVITY PNEUMONITIS (HP) PANEL

- Aspergillus fumigatus AF102 (strain 507)
- Aspergillus fumigatus AF103 (strain 515)
- Aspergillus fumigatus AF104 (strain 534)
- Candida albicans
- Penicillium notatum
- Pigeon sera
- Saccharomonospora viridis
- Saccharopolyspora rectivirgula (Micropolyspora faeni)
- Thermoactinomyces candidus
- Thermoactinomyces vulgaris

**HPASP**

HP TO ASPERGILLUS

- Aspergillus fischeri
- Aspergillus flavus
- Aspergillus fumigatus AF102 (strain 507)
- Aspergillus fumigatus AF103 (strain 515)
- Aspergillus fumigatus AF104 (strain 534)
- Aspergillus niger
- Aspergillus ochraceus
- Aspergillus sydowii
- Aspergillus terreus
- Aspergillus versicolor

**HPAVI AVIAN HP PANEL**

*Pigeon + 3 other bird antigens \**

- |  |                                   |   |  |
|--|-----------------------------------|---|--|
| <input type="checkbox"/> Pigeon sera                   | <input type="checkbox"/> Bat      | <input type="checkbox"/> Cockatoo, Umbrella | <input type="checkbox"/> Lovebird            |
| <input type="checkbox"/> Pigeon droppings              | <input type="checkbox"/> Budgie   | <input type="checkbox"/> Dove               | <input type="checkbox"/> Macaw, African grey |
| <input type="checkbox"/> Cockatiel } * pre-selected if | <input type="checkbox"/> Canary   | <input type="checkbox"/> Duck               | <input type="checkbox"/> Macaw, Blue/gold    |
| <input type="checkbox"/> Parakeet } no specific birds  | <input type="checkbox"/> Chicken  | <input type="checkbox"/> Fighting rooster   | <input type="checkbox"/> Macaw, Green        |
| <input type="checkbox"/> Parrot } are chosen           | <input type="checkbox"/> Cockatoo | <input type="checkbox"/> Finch              | <input type="checkbox"/> Macaw, Scarlet      |
|  |                                   |   | <input type="checkbox"/> Pheasant            |
|  |                                   |   | <input type="checkbox"/> Quail               |
|  |                                   |   | <input type="checkbox"/> Turkey              |

**TESTS BY ELISA AND IMMUNODIFFUSION**

**ABPASP** SPECIFIC IgE AND IgG ANTIBODIES TO ASPERGILLUS FUMIGATUS

**SPECIFIC IgE TEST BY ELISA**

**LATIGE** SPECIFIC IgE ANTIBODIES TO LATEX ANTIGENS

**SPECIFIC IgG TO S. TYPHI TEST BY ELISA**

**STIGG** Specific IgG to Typhoid Virulence Antigen (Vi) Polysaccharide Vaccine (Typhim Vi)

To determine the specific antibody response to the Typhim Vi vaccine, please send a pre-vaccination sample and another sample 4 weeks or later after vaccination.

pre vaccination date \_\_\_\_\_ post vaccination date \_\_\_\_\_  
 pre vaccination spec. no. \_\_\_\_\_ post vaccination spec. no. \_\_\_\_\_

send to: Medical College of Wisconsin Allergy Immunology Diagnostic Lab Center MACC Fund Research Center Room 5073 8701 Watertown Plank Road Milwaukee, WI 53226	Send sera refrigerated/frozen overnight, and please provide complete institutional billing information. <b>We do not bill third parties.</b>	ALLERGY IMMUNOLOGY DIAGNOSTIC LAB CENTER Date Received: / / Report Date: / / Pre-Analytic Condition <input type="checkbox"/> satisfactory <input type="checkbox"/> unsatisfactory Deficiency Code: Corrective Action:
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