



VANDERBILT PATHOLOGY LABORATORY SERVICES

Nashville: (615) 936-0510 • Continental U.S.: (800)551-5227

SEND SPECIMEN(S) TO:

4607 The Vanderbilt Clinic
1301 Medical Center Drive
Nashville TN 37232-5310

REFERRING CLIENT/COLLECTION CENTER
(VPLS)VPLS CLIENT ACCOUNT

BILL TO: Nurse/Amb=VUH-VPLS
Client Account

Patient (Billing information must be attached.)

REFERRING PHYSICIAN PHONE NUMBER

FOR LAB-USE ONLY
3G MR #

REQUEST #

PATIENT NAME (LAST) (FIRST) (M.I.)

SEX FEMALE MALE DATE OF BIRTH PATIENT ID NUMBER (3G CLIENT)

DATE COLLECTED TIME COLLECTED AM PM SAMPLE ID (3G REFERENCE)

SERUM PLASMA URINE OTHER _____ URINE TOTAL VOLUME _____

NOTE: Complete Patient Billing Information (FACE SHEET) must be sent with sample if direct billing is desired.

ORDERING PHYSICIAN: _____ NPI #: _____

REFERRING LABORATORY: _____ PHONE: _____

CONTACT PERSON: _____ FAX: _____

DIAGNOSIS: _____ ICD CODE: _____

PLATELET STUDIES:

- PAG PLATELET AGGREGATION
- RAG RISTOCETIN INDUCED PLATELET AGGREGATION

Testing must be scheduled with Vanderbilt Esoteric Coagulation Laboratory. Patient should not take over the counter medications for 10 days prior to testing. Patient must present to Vanderbilt between 8:00 and 8:30 AM on the day of testing. Patient should be fasting. Vanderbilt Esoteric Coagulation: 615- 875-5633

COAGULATION TESTING

- AT3 Anti-thrombin III Activity
- DDI D-Dimer for DIC
- DVT D-Dimer for PE/DVT
- LUP Lupus Anticoagulant Profile
- PCA Protein C Antigen
- SAT Protein S Antigen Total
- PT2 (PROTHROMBIN)GENOTYPE
- F5 FACTOR V ACTIVITY
- FVL FACTOR V LEIDEN COAG
- F7 FACTOR VII ACTIVITY
- F8 FACTOR VIII ACTIVITY
- 8IN FACTOR VIII INHIBITOR
- F9 FACTOR IX ACTIVITY
- 9IN FACTOR IX INHIBITOR
- F10 FACTOR X ACTIVITY
- F11 FACTOR XI ACTIVITY
- F12 FACTOR XII ACTIVITY
- F13 FACTOR XIII SCREEN
- CAC PROTEIN C ACTIVITY
- PS PROTEIN S ACTIVITY
- LAS Sta-Clot LA (LUPUS ANTICOAG)
- TT THROMBIN TIME
- RVV DILUTE RUSSELL VIPER
- APA ANTICARDIOLIPIN AB

MATERNAL/FETAL TESTING

- FCF FETAL CELL ASSAY – FLOW CYTOMETRY
- FFN FETAL FIBRONECTIN

TOX TESTING

- FK5 FK-506 (TACROLIMUS) LEVEL
- SIR SIROLIMUS (RAPAMYCIN, RAPAMUNE) LEVEL
- CYO CYCLOSPORINE LEVEL

AMINO ACID TESTING

- AA PLASMA AMINO ACIDS
- CSA CSF AMINO ACIDS
- AAU URINE AMINO ACIDS

OTHER TESTS

Please List Test(s) Requested:

For more information or assistance, please call VPLS at (800)-551-5227, or visit us on-line at www.labVU.com