Complete, print and submit

Reset Form

MAYO CLINIC
Mayo Medical Laboratories

Hematopathology/Cytogenetics Test Request Form

Client Information (required)

Client Name		
Client Account No.		
Client Phone	Client Order No.	
Address		
City	State	Zip Code

Submitting Provider/Provider Name Information (required)

Submitting/Referring Provider *(Last, First)*
Fill in only if Call Back is required. Phone ( ) _____ – _____ Fax* ( ) _____ – _____
Provider's National I.D. (NPI)

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

Pathology/Clinical Diagnosis (required)

(Include a brief history, pertinent laboratory results, suspected diagnosis, and reason for referral.)
Bone marrow transplant: ☐ Autologous ☐ Allogeneic ☐ Sex mis-match
Disease stage: ☐ New diagnosis ☐ Relapse ☐ MRD
ICD-10 Diagnosis Code

Patient Information (required)

Patient ID *(Medical Record No.)*	
Patient Name *(Last, First, Middle)*	
Gender ☐ Male ☐ Female	Birth Date *(Month DD, YYYY)*
Collection Date *(Month DD, YYYY)*	Time ☐ a.m. ☐ p.m

Specimens Provided (required)

☐ Blood	☐ Paraffin block	☐ Tisue
☐ Bone Marrow	No. sent:	No. sent:
☐ Fixed Cells	Indicate source:	☐ Frozen
☐ Cultured Cells		☐ Fixed Formalin
☐ DNA		☐ Wet Tissue
☐ Lymph Node	☐ Slides	☐ Other Fixative, type:
☐ Spleen	No. sent:	☐ Other
		Anatomic site:

Please submit pathology report

CBC results:
HB _____ RBC _____ VBC _____
HCT _____ MCV _____ PLT _____

Pathologist's Name (required)

Submitting/Referring Pathologist *(Last, First)*
Phone ( ) _____ – _____ Fax* ( ) _____ – _____

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

MML Internal Use Only

Ship specimens to:
Mayo Medical Laboratories
3050 Superior Drive NW
Rochester, MN 55901

Customer Service: 855-516-8404

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

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)

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T726
MC0767-05Arev0817

Patient Information (required)

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Patient Name *(Last, First, Middle)*	Client Order No.
Birth Date *(Month DD, YYYY)*	

Hematopathology Consultation †

- ☐ PATHC — Pathology Consultation (submit stained slides and block)
- ☐ HPWET — Hematopathology Consultation, MML Embed (submit core biopsy, clot section and bone marrow aspirate)
- ☐ HPCUT — Hematopathology Consultation, Client Embed (submit bone marrow aspirate and embedded core biopsy and clot section)

Hematologic Disorders Hold Service

- ☐ HOLDC — Chromosome Hold
- ☐ HOLDF — FISH Hold
- ☐ HLLFH — Leukemia/Lymphoma Flow Hold*
- ☐ EXHD — DNA Extract and Hold
- ☐ EXHR — DNA and RNA Extract and Hold

Flow Cytometry

Leukemia/Lymphoma Immunophenotyping

- ☐ LCMS — Blood/Bone marrow*
- ☐ LLPT — Tissue
- ☐ LLTOF — Technical Only
- ☐ MYEFL — Myelodysplastic Syndrome by Flow Cytometry, Bone Marrow
- ☐ PLINK — PNH, PI-Linked Antigen, Blood
- ☐ SZDIA — Sezary Diagnostic Flow Cytometry, Blood
- ☐ SZMON — Sezary Monitory Flow Cytometry, Blood
- ☐ TAE — Therapeutic Antibody by Flow Cytometry

  Indicate antibody: ☐ CD20 ☐ CD49d ☐ CD52

Chromosome Analysis

- ☐ CHRBM — Bone Marrow
- ☐ CHRHB — Hematologic Blood
- ☐ CHRLN — Lymphoid Tissue
- ☐ CHRBF — Body Fluid
- ☐ BLOOM — Sister Chromatid Exchange (SCE) for Bloom Syndrome
- ☐ CRAT — Rearrangement in Ataxia Telangiectasia, Blood

Next-Generation Sequencing (NGS)

- ☐ NGAML — NGS, Acute Myeloid Leukemia, 8-Gene Panel
- ☐ NGSHM — OncoHeme NGS Hematologic Neoplasms
- ☐ NGSMM — NGS, Multiple Myeloma

Chromosomal Microarray

- ☐ CMAH — Chromosomal Microarray, Hematologic Disorders

Mate Pair Targeted Rearrangement

- ☐ MTRBM — Blood/Bone Marrow
- ☐ MTRTI — Fresh Tissue

ACUTE MYELOID LEUKEMIA (AML)/ MYELODYSPLASTIC SYNDROME (MDS)

Acute Myeloid Leukemia (AML)

- ☐ PMLR — PML/RARA Quantitative, PCR
- ☐ CEBPA — CEBPA Mutations, Gene Sequencing
- ☐ FLT — FLT3 Mutation Analysis, Varies
- ☐ NPM1 — Nucleophosmin (NPM1) Mutation Analysis
- ☐ KITE — KIT Mutation Exons 8-11 and 17, Hematologic Neoplasms, Sequencing

☐ AMLF — Acute Myeloid Leukemia (AML), FISH

Must select probes listed below or entire panel

☐ RUNX1T1/RUNX1	t(8;21)(q22;q22)
reflex: MECOM/RUNX1	t(3;21)(q26.2;q22)
☐ PML/RARA	t(15;17)(q24.1;q21.2)
☐ MYH11/CBFB	inv(16)(p13q22) or t(16;16)
☐ DEK/NUP214	t(6;9)(p23;q34)
☐ KAT6A/CREBBP	t(8;16)(p11.2;p13.3)
☐ MLL (KMT2A) BAP	11q23 rearrangement
reflex: AFF1/MLL	t(4;11)(q21;q23)
reflex: MLLT4/MLL	t(6;11)(q27;q23)
reflex: MLLT3/MLL	t(9;11)(p22;q23)
reflex: MLLT10/MLL	t(10;11)(p13;q23)
reflex: MLL/CREBBP	t(11;16)(q23;p13.3)
reflex: MLL/MLLT1	t(11;19)(q23;p13.3)
reflex: MLL/ELL	t(11;19)(q23;p13.1)
☐ BCR/ABL1	t(9;22)(q34;q11.2)
☐ MLF1/NPM1	t(3;5)(q25;q34)
☐ RBM15/MKL1	t(1;22)(p13.3;q13.1)
☐ RPN1/MECOM	inv(3)(q21.3q26.2) or t(3;3)
reflex: PRDM16/RPN1	t(1;3)(p36.3;q21.3)
reflex: MECOM/RUNX1	t(3;21)(q26.2;q22)
☐ D5S630/EGR1	-5/5q deletion
☐ D7Z1/D7S486	-7/7q deletion
☐ D8Z2/MYC	+8
☐ D13S319/LAMP1	13q deletion
☐ TP53/D17Z1	-17/17p deletion
☐ D20S108/20qter	20q deletion/ider(20q)

☐ **Perform entire panel**

Myelodysplasia Syndromes (MDS)

- ☐ MYEFL — Myelodysplastic Syndrome by Flow Cytometry, Bone Marrow
- ☐ PLINK — PNH, PI-Linked Antigen, Blood

☐ MDSF — Myelodysplastic Syndrome (MDS), FISH

Must select probes listed below or entire panel

☐ RPN1/MECOM	inv(3) or t(3;3)
reflex: MECOM/RUNX1	t(3;21)(q26.2;q22)
reflex: PRDM16/RPN1	t(1;3)(p36.3;q21.3)
☐ D5S630/EGR1	-5/5q deletion
☐ D7Z1/D7S486	-7/7q deletion
☐ D8Z2/MYC	+8
☐ D13S319/LAMP1	13q deletion
☐ TP53/D17Z1	-17/17p deletion
☐ D20S108/20qter	20q deletion/ider(20q)
☐ MLL (KMT2A) BAP	11q23 rearrangement
reflex: AFF1/MLL	t(4;11)(q21;q23)
reflex: MLLT4/MLL	t(6;11)(q27;q23)
reflex: MLLT3/MLL	t(9;11)(p22;q23)
reflex: MLLT10/MLL	t(10;11)(p13;q23)
reflex: MLL/CREBBP	t(11;16)(q23;p13.3)
reflex: MLL/MLLT1	t(11;19)(q23;p13.3)
reflex: MLL/ELL	t(11;19)(q23;p13.1)

☐ **Perform entire panel**

☐ MSTF — Myeloid Sarcoma, FISH, Tissue

Must select probes listed below or entire panel

☐ RUNX1T1/RUNX1	t(8;21)(q22;q22)
☐ BCR/ABL1	t(9;22)(q34;q11.2)
☐ MLL (KMT2A) BAP	11q23 rearrangement
☐ PML/RARA	t(15;17)(q24.1;q21.2)
☐ MYH11/CBFB	inv(16)(p13q22) or t(16;16)

☐ **Perform entire panel**

☐ IMRGF — Imatinib Mesylate Responsive Genes, FISH

Must select probes listed below or entire panel

☐ ABL2 BAP	1q25 rearrangement
☐ FIP1L1/CHIC2/ PDGFRA	4q12 deletion/ rearrangement
☐ PDGFRB BAP	5q33 rearrangement
☐ ABL1 BAP	9q34 rearrangement

☐ **Perform entire panel**

MYELOPROLIFERATIVE NEOPLASM (MPN)

BCR/ABL1 testing

- ☐ BCRFX — Qualitative Diagnostic with Reflex to p210 or p190 Quantitative
- ☐ BADX — mRNA Detection, RT-PCR, Qualitative Diagnostic*
- ☐ BCRAB — p210 Quantitative Monitoring, CML
- ☐ BA190 — p190 Qualitative Monitoring
- ☐ BAKDM — Tyrosine Kinase Inhibitor Resistance, Kinase Domain Mutation Screen
- ☐ 922F — BCR/ABL1 t(9;22), FISH

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JAK2-CALR-MPL-JAK2V671F testing

- ☐ MPNR — Myeloproliferative Neoplasm (MPN), JAK2 V617F with reflex to CALR and MPL

JAK2 V617F Mutation Detection

- ☐ JAK2B — Blood*
- ☐ JAK2M — Bone Marrow*
- ☐ JAK2V — Varies

- ☐ CALR — CALR Mutation Analysis, Myeloproliferative Neoplasm (MPN)*

MPL Exon 10 Mutation Detection

- ☐ MPLB — Blood*
- ☐ MPLM — Bone Marrow*
- ☐ MPLVA — Varies

- ☐ MPNCM — Myeloproliferative Neoplasm (MPN), CALR with Reflex to MPL

JAK2 Exon 12 and Other Non-V617F Mutation

- ☐ JAKXB — Blood*
- ☐ JAKXM — Varies

- ☐ PVJAK — Polycythemia Vera, JAK2 V617F with Reflex to JAK2 Exon 12-15, Sequencing for Erythrocytosis

- ☐ CSF3R — CSF3R Exon 14 and 17 Mutation Detection by Sanger Sequencing
- ☐ CHICF — CHIC2 (4q12) Deletion (FIP1L1 and PDGFRA Fusion), FISH
- ☐ 512F — PDGFRB/TEL t(5;12) for Chronic Myelomonocytic Leukemia (CMML), FISH
- ☐ FGFRF — FGFR1 (8p11.2) Rearrangement, FISH

- ☐ IMRGF — Imatinib Mesylate Responsive Genes, FISH

Must select probes listed below or entire panel

- ☐ ABL2 BAP — 1q25 rearrangement
- ☐ FIP1L1/CHIC2/PDGFRA — 4q12 deletion/ rearrangement
- ☐ PDGFRB BAP — 5q33 rearrangement
- ☐ ABL1 BAP — 9q34 rearrangement
- ☐ **Perform entire panel**

KIT Mutation testing

KIT Asp816Val Mutation Analysis

- ☐ KITB — Blood
- ☐ KITBM — Bone Marrow
- ☐ KITAS — Varies

- ☐ KITE — KIT Mutation Exons 8-11 and 17, Hematologic Neoplasms, Sequencing

T-Cell Receptor Gene Rearrangement, PCR

- ☐ TCGR — Blood
- ☐ TCGBM — Bone Marrow*
- ☐ TCGRV — Varies

- ☐ MUR — Lysozyme (Muramidase), Plasma
- ☐ SZDIA — Sezary Diagnostic Flow Cytometry, Blood
- ☐ SZMON — Sezary Monitoring Flow Cytometry, Blood

LYMPHOID DISORDERS

B-Cell

- ☐ ALLM — B-ALL Monitoring, MRD Detection, Bone Marrow

Immunoglobulin Gene Rearrangement

- ☐ BCGR — Blood
- ☐ BCGBM — Bone Marrow
- ☐ BCGRV — Varies

- ☐ MYD88 — MYD88, L265P, Somatic Gene Mutation, DNA Allele-Specific PCR
- ☐ VISCS — Viscosity, Serum

- ☐ BALLF — B-Cell Acute Lymphoblastic Leukemia (B-ALL), FISH

Must select EITHER Individual Probes desired or
-Diagnostic B-ALL Panel or
-BCR-ABL1(Ph)-like ALL Panel or
-BOTH Diagnostic and BCR-ABL(Ph)-like panels

Diagnostic Panel

- ☐ PBX1/TCF3 — t(1;19)(q23;p13.3)
- ☐ ETV6/RUNX1 — t(12;21)(p13;q22)
- ☐ BCR/ABL1 — t(9;22) (q34;q11.2)
- ☐ MLL (KMT2A) BAP — 11q23 rearrangement
  - reflex: AFF1/MLL — t(4;11)(q21;q23)
  - reflex: MLLT4/MLL — t(6;11)(q27;q23)
  - reflex: MLLT3/MLL — t(9;11)(p22;q23)
  - reflex: MLLT10/MLL — t(10;11)(p13;q23)
  - reflex: MLL/MLLT1 — t(11;19)(q23;p13.3)
  - reflex: MLL/ELL — t(11;19)(q23;p13.1)
- ☐ CDKN2A/D9Z1 — -9/9p deletion or +9
- ☐ D4Z1/D10Z1/D17Z1 — +4,+10,+17, hyper-or hypodiploidy
- ☐ TP53/D17Z1 — -17/17p deletion
- ☐ IGH BAP — 14q32 rearrangement
  - reflex: CRLF2/IGH — t(X;14) or t(Y;14)
- ☐ P2RY8 BAP — t(Xp22.3;var) or t(Yp11.32;var)

- ☐ **Perform entire diagnostic panel**

BCR-ABL1(Ph)-like Panel

- ☐ ABL2 BAP — 1q25rearrangement
- ☐ PDGFRB BAP — 5q33 rearrangement
- ☐ JAK2 BAP — 9p24.1 rearrangement
- ☐ ABL1 BAP — 9q34 rearrangement
- ☐ CRLF2/IGH — t(X;14) or t(Y;14)
- ☐ P2RY8 BAP — t(Xp22.3;var) or t(Yp11.32;var)

- ☐ **Perform entire BCR-ABL1(Ph)-like panel**

- ☐ **Diagnostic+BCR-ABL1(Ph)-like Panels** (includes probes listed above; reflex probes and ABL1 as needed)

- ☐ BLPF — B-Cell Lymphoma, FISH, Blood or Bone Marrow (includes fresh tissue)
- ☐ BLYMF — B-Cell Lymphoma, FISH, Tissue

Must select lymphoma subtype

Burkitt (pediatric)

Must select probes listed below or entire panel

- ☐ MYC BAP — 8q24.1 rearrangement
- ☐ IGK/MYC — t(2;8)(p12;q24.1)
- ☐ MYC/IGH — t(8;14)(q24.1;q32)
- ☐ MYC/IGL — t(8;22)(q24.1;q11.2)
- ☐ BCL6 BAP — 3q27 rearrangement
- ☐ BCL2 BAP — 18q21 rearrangement

- ☐ **Perform entire Burkitt panel**

Diffuse large B-cell, Burkitt-like "double-hit"

Must select probes listed below or entire panel

- ☐ MYC BAP — 8q24.1 rearrangement
  - reflex: IGK/MYC — t(2;8)(p12;q24.1)
  - reflex: MYC/IGH — t(8;14)(q24.1;q32)
  - reflex: MYC/IGL — t(8;22)(q24.1;q11.2)
  - reflex: BCL6 BAP — 3q27 rearrangement
  - reflex: BCL2 BAP — 18q21 rearrangement

- ☐ **Perform entire panel (MYC BAP, BCL6 and BCL2)**

Follicular

Must select probes listed below or entire panel

- ☐ BCL2 BAP — 18q21 rearrangement
- ☐ BCL6 BAP — 3q27 rearrangement

- ☐ **Perform entire follicular panel**

Mantle cell

Must select probes listed below or entire panel

- ☐ CCND1/IGH — t(11;14)(q13;q32)
- ☐ CCND1 BAP — reflex: 11q13 rearrangement
- ☐ TP53/D17Z1 — Blastoid subtype only: deletion of 17p
- ☐ MYC BAP — Blastoid subtype only: 8q24.1 rearrangement

- ☐ **Perform entire mantle cell panel**

Mucosa-associated lymphoid tissue (MALT)

- ☐ MALT1 BAP — 18q21 rearrangement

Splenic marginal zone lymphoma (SMZL)

Must select probes listed below or entire panel

- ☐ D7Z1/7q32 — deletion 7q
- ☐ TP53/D17Z1 — deletion 17p

- ☐ **Perform entire SMZL panel**

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Chronic Lymphocytic Leukemia (CLL)

- ☐ CLLMV — CLL Monitoring, MRD Detection, Varies
- ☐ BCLL — IGH for B-Cell Chronic Lymphocytic Leukemia (B-CLL), Somatic Hypermutation Analysis
- ☐ P53CA — Hematologic Neoplasms, TP53 Somatic Mutation, DNA Sequencing Exons 4-9

- ☐ CLLF — Chronic Lymphocytic Leukemia (CLL), FISH
- ☐ SLLF — Small Lymphocytic Lymphoma, FISH, Tissue

Must select probes listed below or entire panel

- ☐ D6Z1/MYB — -6/6q deletion
- ☐ D11Z1/ATM — -11/11q deletion
- ☐ D12Z3/MDM2 — +12
- ☐ D13S319/LAMP1 — -13/13q deletion
- ☐ TP53/D17Z1 — -17/17p deletion
- ☐ CCND1/IGH — t(11;14)(q13;q32)
  - reflex: IGH/BCL2 — t(14;18)(q32;q21)
  - reflex: IGH/BCL3 — t(14;19)(q32;q13)
- ☐ **Perform entire panel**

- ☐ IRF4F — Cutaneous Anaplastic Large Cell Lymphoma, 6p25.3 (DUSP22 or IRF4) Rearrangement, FISH, Tissue

T-Cell

T-Cell Receptor Gene Rearrangement

- ☐ TCGR — PCR, Blood
- ☐ TCGBM — Bone Marrow*
- ☐ TCGRV — Varies

- ☐ TP63F — Peripheral T-Cell Lymphoma (PTCL), TP63 (3q28) Rearrangement, FISH, Tissue

- ☐ TALLF — T-Cell Acute Lymphoblastic Leukemia (T-ALL), FISH

Must select probes listed below or entire panel

- ☐ BCR/ABL1 — t(9;22) and ABL1 amplification
- ☐ MLL (KMT2A) BAP — 11q23 rearrangement
  - reflex: AFF1/MLL — t(4;11)(q21;q23)
  - reflex: MLLT4/MLL — t(6;11)(q27;q23)
  - reflex: MLLT3/MLL — t(9;11)(p22;q23)
  - reflex: MLLT10/MLL — t(10;11)(p13;q23)
  - reflex: MLL/MLLT1 — t(11;19)(q23;p13.3)
  - reflex: MLL/ELL — t(11;19)(q23;p13.1)

Probe list continued in next column

T-ALL FISH probes (cont.)

- ☐ CDKN2A/D9Z1 — -9/9p deletion or +9
- ☐ STIL/TAL1 — 1p33 rearrangement
- ☐ TLX3/BCL11B — t(5;14)(q35;q32)
- ☐ TRB BAP — 7q34 rearrangement
  - reflex: MYB/TRB — t(6;7)(q23;q34)
  - reflex: TRB/TLX1 — t(7;10)(q34;q24)
  - reflex: TRB/LMO1 — t(7;11)(q34;p15)
  - reflex: TRB/LMO2 — t(7;11)(q34;p13)
- ☐ MLLT10/PICALM — t(10;11)(p12;q14)
- ☐ TRAD BAP — 14q11.2 rearrangement
  - reflex: MYC/TRAD — t(8;14)(q24.1;q11.2)
  - reflex: TLX1/TRAD — t(10;14)(q24;q11.2)
  - reflex: LMO1/TRAD — t(11;14)(p15;q11.2)
  - reflex: LMO2/TRAD — t(11;14)(p13;q11.2)
- ☐ **Perform entire panel**

- ☐ TLPF — T-Cell Lymphoma, FISH, Blood or Bone Marrow
- ☐ TLYMF — T-Cell Lymphoma, FISH, Tissue

Must select probes listed or entire panel

- ☐ TCL1A BAP — 14q32 rearrangement
- ☐ D7Z1/D7S486 and D8Z2/MYC — -7/iso(7q) and +8
- ☐ ALK BAP (tissue only) — 2p23 rearrangement
- ☐ **Perform entire panel**

MYELOMA, AMYLOIDOSIS & DYSPROTEINEMIA

Amyloid

- ☐ FABP — Amyloid Beta-Protein
- ☐ AMPIP — Amyloid Protein Identification, Paraffin, LC-MS/MS
- ☐ ATTRZ — TTR Gene, Full Gene Analysis
- ☐ FMTT — Familial Mutation, Targeted Testing
- ☐ TTRX — Amyloidosis, Transthyretin-Associated Familial, Reflex, Blood
- ☐ FATAS — Subcutaneous Fat Aspirate

Myeloma

Is patient on CD38 Therapy? ☐ Yes ☐ No

- ☐ MSMRT — Mayo Algorithmic Approach for Stratification of Myeloma and Risk-Adapted Therapy Report (mSMART)
- ☐ PBLI — Plasma Cell Assessment, Blood
- ☐ PCPRO — Plasma Cell DNA Content and Proliferation, Bone Marrow

- ☐ PCPDF — Plasma Cell Proliferative Disorder (PCPD), FISH (bone marrow)
- ☐ MFCF — Myeloma, FISH, Fixed Cells (fixed cell pellet only)
- ☐ PLASF — Plasma Cell Proliferative Disorder, FISH, Tissue

Must select probes listed below or entire panel

- ☐ CCND1/IGH — t(11;14)(q13;q32)/+11
- ☐ IGH BAP — 14q32 rearrangement
  - reflex: IGH/MAF — t(14;16)(q32;q23)
  - reflex: IGH/MAFB — t(14;20)(q32;q12)
  - reflex: FGFR3/IGH — t(4;14)(p16.3;q32)
  - reflex: CCND3/IGH — t(6;14)(p21;q32)
- ☐ RB1/LAMP1 — -13/13q deletion
- ☐ D3Z1/D7Z1 — +3 and +7
- ☐ D9Z1/D15Z4 — +9 and +15
- ☐ TP53/D17Z1 — -17/17p deletion/+17
- ☐ TP73/1q22 — 1q gain
- ☐ MYC BAP — 8q24 rearrangement
- ☐ **Perform entire panel**

BONE MARROW TRANSPLANT

- ☐ ALLM — B-ALL Monitoring, MRD Detection, Bone Marrow
- ☐ CHIDB — Chimerism-Donor
- ☐ CHRGB — Chimerism-Recipient Germline (Pre)
- ☐ CHIMU — Chimerism Transplant No Cell Sort
- ☐ CHIMS — Chimerism Transplant Sorted Cells
- ☐ CLLMV — CLL Monitoring, MRD Detection, Varies
- ☐ DISI — HLA Class I Molecular Typing Disease Association
- ☐ DIS2 — HLA Class II Molecular Typing Disease Association
- ☐ BMTF — XX/XY in Opposite Sex Bone Marrow Transplantation, FISH

MISCELLANEOUS

- ☐ ETVBF — ETV6 (12p13.2) Rearrangement, FISH
- ☐ JAK2F — JAK2 (9p24.1) Rearrangement for Hematologic Disorders, FISH

ADDITIONAL TESTS (INDICATE TEST CODE AND NAME)

BAP= break apart probes

*Algorithms are available online for these tests. Visit www.MayoMedicalLaboratories.com

† It is essential that the pathology/diagnostic report, brief history, and physician name and number are provided. Patient information sheets are recommended-refer to the test catalog at www.mayomedicallaboratories.com

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