

# Biochemical Genetics Laboratory Requisition

Acceptance Policy 10-50-03: Requirements for Test Requisitions 2.1 - Fields marked with \* are mandatory and must be clearly legible or may result in specimen rejection.

ORDERING PROVIDER INFORMATION				PATIENT INFORMATION			
*Last & Full First Name:		Billing Code:		*Last/First Name: (per MB. Health Card)			
*Ordering Facility:				* Date of Birth (dd/mm/yyyy)			
Address:				*Sex: Female Male			
Critical Results Phone Number:		Fax No:		*PHIN:			
Physician Signature:		Phone No.:		*Specify Province or DND if different			
COPY REPORT TO: (if info missing, report may not be sent)							
Last & Full First Name:			Facility Name & Address:				
Fax No:		Phone No:		MRN: Encounter Number:  Patient Phone No: Patient Address:			
Last & Full First Name:			Facility Name & Address:				
Fax No:		Phone No:		Demographics verified with: <input type="checkbox"/> Prov. Health Card <input type="checkbox"/> Armband <input type="checkbox"/> eChart/CR			
<b>Fields marked with * required by person collecting sample</b>				*Collected Via: <input type="checkbox"/> Venipuncture <input type="checkbox"/> Capillary <input type="checkbox"/> Indwelling Line			
*Collector:		*Collection Date:		*Time:		<input type="checkbox"/> Above shut off IV	
# Serum vial(s) _____		# Plasma vials(p) _____		Referring Lab: # of tubes sent _____		Samples shipped frozen <input type="checkbox"/>	
BLOOD							
<input type="checkbox"/> ACYLCARNITINE Fractionation, P [Na Hep]		MISC		<input type="checkbox"/> CHOLINESTERASE PHENOTYPING, S [SST]		CEPT	
<input type="checkbox"/> AMINO ACID SCREEN, P [Li Hep no gel] <b>send on ice</b>		AAQP		<input type="checkbox"/> COPPER, P [Royal Blue - metals]		COP	
<input type="checkbox"/> PKU MONITORING, P [Li Hep no gel] <b>send on ice</b>		AAQP		<input type="checkbox"/> CERULOPLASMIN, S [SST]		CERU	
<input type="checkbox"/> AMINO ACID Quantitative, P [Li Hep no gel] <b>send on ice</b> specify AA: _____		AAQP		<input type="checkbox"/> CREATINE AND GUANIDINOACETATE, P [Li PST]		MISC	
<input type="checkbox"/> CARNITINE (Total and Free), S [SST]		CARN		<input type="checkbox"/> 7-DEHYDROCHOLESTEROL, P [Li PST]		DHC7	
<input type="checkbox"/> HOMOCYSTEINE, P [Li PST] <b>send on ice</b>		HCQ		<input type="checkbox"/> FREE FATTY ACIDS, S [no gel]		FRFA	
<input type="checkbox"/> TRANSFERRIN ISOELECTRIC FOCUSING (CDG), S [SST]		TIEF		<input type="checkbox"/> GALACTOSE-1-PHOSPHATE (GAL-1P), Whole Blood [Na Hep] <b>send on ice</b>		GALP	
<input type="checkbox"/> BIOTINIDASE, S [no gel]		MISC		<input type="checkbox"/> GALT ACTIVITY & ELECTROPHORESIS, Whole Blood [EDTA]		MISC	
<input type="checkbox"/>		MISC		<input type="checkbox"/> SUCCINYLACETONE, Whole blood DBS [Li Hep no gel]		MISC	
URINE (RANDOM ONLY)							
<input type="checkbox"/> AMINO ACIDS, U		AAQU		<input type="checkbox"/> CREATINE AND GUANIDINOACETATE, U		MISC	
<input type="checkbox"/> ORGANIC ACID SCREEN, U		OA		<input type="checkbox"/> OROTIC ACID, U		OROT	
<input type="checkbox"/> CYSTINE, U		AAQU		<input type="checkbox"/> GLUTARIC ACID, U		GLUT	
<input type="checkbox"/> HOMOCYSTINE, U		AAQU		<input type="checkbox"/> METHYLMALONIC ACID (MMA), U		MMA	
<input type="checkbox"/> MUCOPOLYSACCHARIDE FRACTIONATION, U		MPS		<input type="checkbox"/> ALPHA-AMINOADIPIC SEMIALDEHYDE, U		MISC	
<input type="checkbox"/> ACYLGLYCINES, U		MISC		<input type="checkbox"/> SIALIC ACID, FREE, U		MISC	
<input type="checkbox"/> PURINES AND PYRIMIDINES PANEL, U		MISC		<input type="checkbox"/> GLOBOTRIAOSYLCERAMINDE (GB3), U		MISC	
LYSOSOMAL - PEROXISOMAL - MITOCHONDRIAL							
<input type="checkbox"/> LYSOSOMAL ENZYME PANEL, P+S [3 x Li Hep no gel + SST] <i>(By prior arrangement with lab)</i>		LYSO		<input type="checkbox"/> MITOCHONDRIAL RCE, <b>MUSCLE</b> <b>Pre-approval required by Biochemist</b>		MISM	
<input type="checkbox"/> HEXOSAMINIDASE, S (Total, %Hex A) [SST]		SHEX		<input type="checkbox"/> mtDNA content, <b>MUSCLE, Pre-approval required by Biochemist</b>		MISC	
<input type="checkbox"/> CHITOTRIOSIDASE, S [SST]		CHIT		<input type="checkbox"/> PLASMALOGENS, Whole blood [EDTA] <b>Pre-approval required by Biochemist</b>		MISC	
<input type="checkbox"/> ALPHA-GLUCOSIDASE (POMPE DISEASE), Whole blood DBS [EDTA]		POMP		<input type="checkbox"/> LYSOSOMAL ACID LIPASE, Whole blood [EDTA]		MISC	
<input type="checkbox"/> CYSTINE, WBC, P [Na Hep no gel]		MISC		<input type="checkbox"/> mtDNA point mutations and deletions, <b>MUSCLE,</b> <b>Pre-approval required by Biochemist</b>		MISC	
<input type="checkbox"/> KRABBS ENZYME (Galactosylceramide β-Galactosidase)[Na Hep no gel] <i>(By prior arrangement with lab)</i>		KRAB		<input type="checkbox"/> OXYSTEROLS, P [EDTA]		MISC	
<input type="checkbox"/> ALPHA-GALACTOSIDASE (FABRY DISEASE), S [SST]		AGAL		<input type="checkbox"/> STEROLS, P [EDTA]		MISC	
<input type="checkbox"/> NEURONAL CEROID LIPOFUSCINOSIS - CLN1 and CLN2, Whole blood DBS [Na Hep no gel]		MISC		<input type="checkbox"/> VERY LONG CHAIN FATTY ACIDS (VLCF), P [EDTA]		MISC	
<input type="checkbox"/> THYMIDINE PHOSPHORYLASE, Whole blood [ACD A] <b>send on ice</b> <i>(By prior arrangement with lab)</i>		MISC		<input type="checkbox"/> PIPECOLIC, P [EDTA] <b>Pre-approval required by Biochemist</b>		MISC	
<input type="checkbox"/> VITAMIN B6, PYRIDOXAL PHOSPHATE, P [2 x EDTA] <b>protect from light</b>		VB6		<input type="checkbox"/> PHYTANIC ACID, P [Li PST]		MISC	
CEREBROSPINAL FLUID							
<input type="checkbox"/> AMINO ACIDS, CSF		AAQC		<input type="checkbox"/> 4-HYDROXYBUTYRATE, CSF		MISC	
<input type="checkbox"/> LACTATE, CSF		SFLA		<input type="checkbox"/> PYRIDOXYL-5-PHOSPHATE, CSF		MISC	
<input type="checkbox"/> NEUROTRANSMITTER METABOLITES, CSF [special collection tubes req'd] (NEOPTERIN, TETRAHYDROBIOPTERIN 3-O-methyl dopa, 5-HIAA, 5-MTF, HVA, Sialic Acid)		MISC		<input type="checkbox"/> SUCCINYLADENOSINE, CSF		MISC	
<input type="checkbox"/>				<input type="checkbox"/> SIALIC ACID, CSF		MISC	
<input type="checkbox"/> Other Tests:				Clinical Details			

Copy of Requisition Form must accompany samples to Lab. M5551 Thorlakson Building, 820 Sherbrook St. Winnipeg, MB, R3A 1R9