

ADA1 and PNP testing

(whole blood EDTA samples)

Check List:

1. Patient name _____
2. Patient date of birth (MM/DD/YYYY) _____
3. Date of sample (MM/DD/YYYY) _____
4. Packed red blood cell transfusion in the last 3 months? Yes No
5. On PEG-ADA enzyme replacement therapy (i.e. Revcov) ? Yes No N/A
ERT Dose_____
6. Has the patient received gene therapy for ADA-SCID? Yes No N/A
7. Has the patient received a hematopoietic stem cell transplant? Yes No N/A
8. Name of the ordering provider _____
9. Email and fax number where completed report should be sent
10. Additional relevant clinical information:

Instructions for sending the sample:

1. THE ORDERING PHYSICIAN MUST EMAIL IN ADVANCE TO REQUEST TESTING to michael.hershfield@duke.edu AND teresa.tarrant@duke.edu
2. Obtain fresh EDTA whole blood (2 mL minimum) and label tube with patient name, DOB, and date of sample
3. Ship blood at ambient temperature and send by FedEx Priority Overnight service for delivery by 10:30AM .

Samples will only be received and run Monday – Fridays
(no weekends or holidays).

4. Mail FedEx sample to this address:

Purine Metabolic and Immunodeficiency Lab
Michael Hershfield, M.D. and Teresa Tarrant,
MD DUMC 3049, Rm. 235 Sands Building
303 Research Dr, Duke Univ Med Cent Durham,
North Carolina 27710 USA
Tel: 919-684-4184

SEND THIS COMPLETED FORM WITH YOUR SAMPLE

If you have further questions or need to speak with someone in the lab, *Lab tel: 919-684-2622 (lab contacts Pawan Bali, Rishi Rampersad, Kees Frelinger)*