

Patient's Last Name (Required)	First (Required)	Middle	Birth Date (Required)	Legal Sex	Gender Identity
Outside Patient Number	Outside Specimen Number	Send Report To			
Ordering Provider (Required)	Address				
Diagnosis/CD-10 Code (Required)	Phone/Fax				

***EACH ORDER/COLLECTION IS LIMITED TO ≤ 20 INDIVIDUAL ALLERGENS OR 2 PANELS MAXIMUM**

ALLERGEN IgE PANELS

ASTHMA PANEL (LAB2710, 10 Allergens):

Alder, Alternaria alternata, Aspergillus fumigatus, Birch, Cat, D. farinae, D. pteronyssinus, Dog, English Plantain, Timothy Grass

WESTERN WA STATE (LAB2759, 18 Allergens):

Alder, Alternaria alternata, Aspergillus fumigatus, Birch, Cat, Cottonwood, D. farinae, D. pteronyssinus, Dog, Elm, English Plantain, Maple, Oak, Timothy Grass, Lamb's Quarter, Mountain Cedar/Juniper, White Ash, Yellow Dock

EASTERN WA STATE (LAB2724, 4 Allergens):

Common Pigweed, Mugwort, Russian Thistle, Western Ragweed

DUST MITE (LAB2723, 2 Allergens):

D. farinae, D. pteronyssinus

SEEDS (LAB2748, 3 Allergens):

Flaxseed (Linseed), Sesame, Sunflower

TREENUT (LAB2754, 9 Allergens):

Almond, Brazil, Cashew, Hazelnut, Macadamia Nut, Pecan, Pine Nut, Pistachio, Walnut (Food)

SHELLFISH (LAB2749, 8 Allergens):

Clam, Crab, Lobster, Mussel (Blue), Oyster, Scallop, Shrimp, Squid

FINFISH (LAB2725, 6 Allergens):

Atlantic Salmon, Codfish, Halibut, Tilapia, Trout, Tuna

LEGUMES (LAB2734, 5 Allergens):

Chick Pea (Garbanzo), Green Pea, Kidney Bean, Lentil, White Bean

ADDITIONAL TESTING:

Total IgE

Tryptase

Other: _____

INDIVIDUAL ALLERGENS IgE

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Alder, Grey (t2) | <input type="checkbox"/> Chick Pea (Garbanzo) (f309) | <input type="checkbox"/> Lamb's Quarter (Goosefoot) (w10) | <input type="checkbox"/> Potato (f35) |
| <input type="checkbox"/> Almond (f20) | <input type="checkbox"/> Cladosporium herbarum (m2) | <input type="checkbox"/> Lentil (f235) | <input type="checkbox"/> Sorrel, Red/Sheep (w18) |
| <input type="checkbox"/> α-Lactalbumin (Milk Comp.) | <input type="checkbox"/> Clam (f207) | <input type="checkbox"/> Lobster (f80) | <input type="checkbox"/> Ragweed, Common/Short (w1) |
| <input type="checkbox"/> Alternaria alternata/tenuis (m6) | <input type="checkbox"/> Cockroach, German (i6) | <input type="checkbox"/> Macadamia Nut (f345) | <input type="checkbox"/> Ragweed, Western (w2) |
| <input type="checkbox"/> Apple (f49) | <input type="checkbox"/> Coconut (f36) | <input type="checkbox"/> Maple/Box Elder (t1) | <input type="checkbox"/> Rice (f9) |
| <input type="checkbox"/> Ash, White (t15) | <input type="checkbox"/> Codfish (f3) | <input type="checkbox"/> Milk, Cow (f2) | <input type="checkbox"/> Russian Thistle (w11) |
| <input type="checkbox"/> Aspergillus fumigatus (m3) | <input type="checkbox"/> Corn/Maize (f8) | <input type="checkbox"/> Mountain Cedar/Juniper (t6) | <input type="checkbox"/> Rye (f5) |
| <input type="checkbox"/> Avocado (f96) | <input type="checkbox"/> Cottonwood (t14) | <input type="checkbox"/> Mouse Urine Protein (e72) | <input type="checkbox"/> Salmon, Atlantic (f41) |
| <input type="checkbox"/> Banana (f92) | <input type="checkbox"/> Crab (f23) | <input type="checkbox"/> Mugwort (w6) | <input type="checkbox"/> Scallop (f338) |
| <input type="checkbox"/> Barley (f6) | <input type="checkbox"/> D. farinae (d2) | <input type="checkbox"/> Mussel, Blue (f37) | <input type="checkbox"/> Sesame Seed (f10) |
| <input type="checkbox"/> Bean, Kidney/Red (f287) | <input type="checkbox"/> D. pteronyssinus (d1) | <input type="checkbox"/> Mustard (f89) | <input type="checkbox"/> Shrimp (f24) |
| <input type="checkbox"/> Bean, Navy/White (f15) | <input type="checkbox"/> Dog (e5) | <input type="checkbox"/> Nettle (w20) | <input type="checkbox"/> Soybean (f14) |
| <input type="checkbox"/> Beef (f27) | <input type="checkbox"/> Egg White (f1) | <input type="checkbox"/> Oak, White (t7) | <input type="checkbox"/> Squid (f258) |
| <input type="checkbox"/> β-Lactoglobulin (Milk Comp.) | <input type="checkbox"/> Egg Yolk (f75) | <input type="checkbox"/> Oat (f7) | <input type="checkbox"/> Strawberry (f44) |
| <input type="checkbox"/> Birch, Common/Silver (t3) | <input type="checkbox"/> Elm, White (t8) | <input type="checkbox"/> Orange (f33) | <input type="checkbox"/> Sunflower Seed (k84) |
| <input type="checkbox"/> Brazil Nut (f18) | <input type="checkbox"/> English Plantain (Ribwort) (w9) | <input type="checkbox"/> Ovalbumin (Egg Comp.) | <input type="checkbox"/> Tilapia (f414) |
| <input type="checkbox"/> Brazil Nut w/Reflex to Comp. | <input type="checkbox"/> Flaxseed (Linseed) (f333) | <input type="checkbox"/> Ovomucoid (Egg Comp.) | <input type="checkbox"/> Tomato (f25) |
| <input type="checkbox"/> Buckwheat (f11) | <input type="checkbox"/> Gluten (f79) | <input type="checkbox"/> Oyster (f290) | <input type="checkbox"/> Trout (Pacific Salmon) (f204) |
| <input type="checkbox"/> Cacao (f93) | <input type="checkbox"/> Grass, Bermuda (g2) | <input type="checkbox"/> Peanut (f13) | <input type="checkbox"/> Tuna (f40) |
| <input type="checkbox"/> Carrot (f31) | <input type="checkbox"/> Grass, Meadow (June/KY Blue) (g8) | <input type="checkbox"/> Peanut w/Reflex to Comp. | <input type="checkbox"/> Walnut (Food) (f256) |
| <input type="checkbox"/> Casein (Milk Comp.) | <input type="checkbox"/> Grass, Timothy (g6) | <input type="checkbox"/> Pecan (f201) | <input type="checkbox"/> Walnut, w/Reflex to Comp. |
| <input type="checkbox"/> Cashew (f202) | <input type="checkbox"/> Green Pea (f12) | <input type="checkbox"/> Penicillium chrysogenum (m1) | <input type="checkbox"/> Walnut (Tree) (t10) |
| <input type="checkbox"/> Cashew w/Reflex to Comp. | <input type="checkbox"/> Halibut (f303) | <input type="checkbox"/> Pigweed, Common/Redroot (w14) | <input type="checkbox"/> Wheat (f4) |
| <input type="checkbox"/> Cat (e1) | <input type="checkbox"/> Hazelnut (f17) | <input type="checkbox"/> Pine Nut (Pignoles) (f253) | <input type="checkbox"/> Yellow Dock (w23) |
| <input type="checkbox"/> Chestnut, Sweet (f299) | <input type="checkbox"/> Hazelnut w/Reflex to Comp. | <input type="checkbox"/> Pistachio (f203) | |
| <input type="checkbox"/> Chicken (f83) | <input type="checkbox"/> Kiwi (f84) | <input type="checkbox"/> Pork (f26) | |

BILLING INFORMATION

PHYSICIAN NOTIFICATION: Only tests that you believe are appropriate for patient care should be ordered. Medicare/Medicaid will pay only for tests that are medically necessary for the diagnosis and treatment of the patient, rather than for screening purposes.

BILLING NOTIFICATION: All samples will be billed to the referring institution unless complete billing and diagnosis information is provided on this form. Contact Seattle Children's Laboratory Client Services for additional assistance (206) 987-2617.

BILL TO:

- Referring Institution (Preferred)** - Provide billing address or stamp institution's information.
(Institutional billing will be done for all patients with Medicare except for established Seattle Children's patients.)

Billing Address:	Billing Contact Name:
Billing Contact Phone/Fax:	Billing Contact Email:

- Primary Insurance** (Attach copy of card.) **Medicaid** (Only Alaska, Idaho, Montana and Washington Medicaid are accepted.)

Patient Address		
Guarantor Name	DOB	Relationship to Patient
Guarantor Address (if different from patient's)		
Guarantor Phone (if different from patient's)	Employer	
Primary Care Physician	Phone Number	
Insurance Company/Medical Coverage		
Claims Address	Phone Number	
Policy Number	Group Number	
Subscriber	Sex	Subscriber's DOB

- Secondary Insurance** (Attach copy of card.) **Medicaid** (Only Alaska, Idaho, Montana and Washington Medicaid are accepted.)

Insurance Company/Medical Coverage		
Claims Address	Phone Number	
Policy Number	Group Number	
Subscriber	Sex	Subscriber's DOB

- Self Pay**- First, call Lab Client Services for pricing. Then, provide credit card information below or enclose a check with the sample.

Patient Address		
Guarantor Name	DOB	Relationship to Patient
Guarantor Address (if different from patient's)		
Guarantor Phone (if different from patient's)		
Name on Credit Card	Payment Amount	CVN
Card Number	Card Type	Expiration

Please visit our test catalog at <http://seattlechildrenslab.testcatalog.org> for testing information or call (206) 987-2617.