

CLINICAL LAB REQUEST
UW MEDICINE
REFERENCE LABORATORY SERVICES

University of Washington Medical Center
1959 NE Pacific St, NW 220
Seattle, WA, 98195
(206) 520-4600 Specimen Questions, Pick-up, Results/Billing
<http://depts.washington.edu/rspvirus>
<http://depts.washington.edu/labweb>

UW LAB ACC. #	
LOGGED IN BY:	PROCESSED BY:

Virology

1. Universal transport media (liquid) recommended. No microbiology gel for viral cultures.
2. Flocked swabs (mini-tipped for NP swab) recommended. No foam swabs for viral cultures.
3. Culturette recommended for PCR detection from mucosal surfaces.
4. Reflex tests * instructions can be found on back. Additional charges will be incurred for reflex testing.

MOLECULAR VIROLOGY

Herpes Viruses (serum, plasma, fluids)

- ___ CMV by PCR Quant. Blood Spot CMVBSP
- ___ CMV by PCR, Quant. Eye Fluid** CMVEYE
- ___ CMV Resist. UL56 CMVDRL
- ___ CMV Resist. UL97 and UL54 CMVDR
- ___ CMV Resist. UL97, UL54 and UL56 CMVULR
- ___ CMV by PCR, Quant. CMVQN
- ___ W/ Reflex UL97 and UL54 Seq* CMVRFR
- ___ EBV by PCR, Quant. EBVQ
- ___ EBV by PCR, Quant Blood Spot EBVBSQ
- ___ HHV6 Chromosome Integration HH6ABC
- ___ HHV6 by PCR, Quant. HH6QN
- ___ HHV6 by PCR, Quant. with Reflex HH6RFX
- ___ HHV8 by PCR, Quant. HH8QN
- ___ HSV1 & HSV2 by PCR, Quant. HS12QN
- ___ RAPID HSV PCR (CSF/Swab) RPDHSV
- ___ VZV by PCR, Quant. VZVQN
- ___ VZV by PCR, Quant. Eye Fluid** VZVEYE

Other Viruses (serum, plasma, fluids)

- ___ ADENOVIRUS by PCR, Quant. ADVQN
- ___ ADENOVIRUS by PCR, Quant. Urine UADVQN
- ___ BK VIRUS DNA by PCR (serum, plasma) BKVQN
- ___ BK VIRUS DNA by PCR (Urine) UBKQN
- ___ CCR5 delta32 Mutation by PCR CCR5D
- ___ ENTERO/PARECHOVIRUS by PCR EPVQLT
- ___ INFLUENZA A/B & RSV by PCR FLURSV
- ___ JC (PML Virus) by PCR JCVQN
- ___ JC (PML Virus) by PCR, Quant., Urine UJCVQN
- ___ PARVO B19 DNA by PCR B19PCQ
- ___ RESPIRATORY VIRUS PANEL by PCR* REVSQT
- ___ RESP. VIRUS Follow-Up, PCR, Quant. RVFQNT
- ___ Virus to test __FluA __FluB __MPV __PIV3 __RSV (This is not a screening test, must be known positive)
- ___ STOOL VIRUS PCR PANEL SVIPCR
- ___ ZIKA by PCR ZIKPCR

Tissues, Bone Marrow, Swabs, Other Biopsies

- ___ ADENOVIRUS by PCR, Qual. ADVQLT
- ___ BKV by PCR, Qual. BKVQL
- ___ CMV by PCR, Qual. CMVQLT
- ___ EBV by PCR, Qual. EBVQLT
- ___ HSV1 & HSV2 by PCR, Qual. HS12QL
- ___ HHV6 by PCR, Qual. HH6QLT
- ___ HHV8 by PCR, Qual. HH8QLT
- ___ Parvo B19 by PCR, Qual. B19QLT
- ___ Tissue Viral Identification TVIRDE
- ___ Virus to test _____
- ___ VZV by PCR, Qual. VZVQLT
- ___ VZV by PCR Quant. Swabs VZVSWB
- ___ Hepatitis Viruses (serum, plasma)
- ___ HBV Drug Resistance by Sequencing HBVDR
- ___ HBV Genotype & Drug Resistance HBVGDR
- ___ HBV Genotype Sequence HBVGT
- ___ HBV DNA, Quant. HBVQNT
- ___ HCV RNA, Quant. HCVQNT
- ___ HCV RNA Genotype HCPCGT

** Viral Quant Panel, Eye Fluid (CMV, HSV, VZV)

EYEVQP

HIV

- ___ HIV Screen* (HIV1 Ag, HIV1/2 Ab) (with confirmation of reactivities) HVAGAB
- ___ HIV-1 RNA Quantitation HRTABB
- ___ HIV-1 Genotypic Resistance (Call 206 685-8037) HIVGRA
- ___ HIV-1 Integrase Resistance (Call 206 685-8037) HVINTA

- ___ HIV-1 P24 Antigen Quantitation HIVP24
- ___ HIV-1 Total Nucleic Acid Assay (Qualitative) HV1TNA
- ___ HIV-2 RNA Quantitation HIV2VL
- ___ HIV-2 DNA/RNA, Qualitative HIV2NA

VIRAL CULTURES

2VIRO

- ___ Viral Culture (Complete ID, respiratory, enteric, herpes group)
- ___ Herpes Group Culture (HSV1/2, CMV, VZV)
- ___ Tissue - Immunocompromised pt (Viral Culture & CMV Rapid Assay)
- ___ Identification of Outside Isolate

VIRAL RAPID ASSAYS ("shell vials")

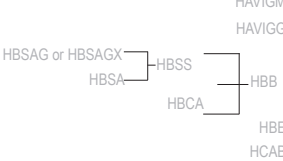
2VIRO

- ___ Adenovirus (includes viral culture)
- ___ CMV (includes herpes group culture)

SEROLOGIES

HEPATITIS

- ___ A Antibody (IgM)
- ___ A Antibody (IgG)
- ___ B Surface Antigen*
- ___ B Surface Antibody
- ___ B Core Antibody
- ___ B "e" Antigen / Antibody
- ___ C Antibody



HERPES GROUP

- ___ HSV 1 & 2 Antibody by Western blot HSWB
- ___ HSV Seroconversion Panel (paired sera) 2VIRO
- ___ CMV Immune Status CMVS
- ___ EBV Antibody Panel EBVEIA
- ___ Varicella Zoster Immune Status VZIS
- ___ Varicella Zoster Titer (paired sera) 2VIRO

MISCELLANEOUS

- ___ Measles Immune Status RBIS
- ___ Mumps Immune Status MPIS
- ___ Quantiferon TB QFTB
- ___ Rubella Immune Status RUIS

OTHER REQUESTS / COMMENTS

MEDICAL NECESSITY INFORMATION

When ordering tests for which Medicare reimbursement will be sought, physicians should only order tests which are medically necessary for diagnosis or treatment of the patient. You should be aware that Medicare generally does not cover routine screening tests, and will only pay for tests that are covered by the program and are reasonable and necessary to treat or diagnose the patient.

CMS MEDICAL NECESSITY INFORMATION

It is our policy to provide health care providers with the ability to order only those lab tests medically necessary for the individual patient and to ensure that the convenience of ordering standard panels and custom profiles does not impact this ability. While we recognize the value of this convenience, indiscriminate use of panels and profiles can lead to ordering tests that are not medically necessary. Therefore, all tests offered in our panels and profiles can be ordered individually as well. If a component test is not listed individually on the request form, it may be written in the "OTHER REQUESTS" box. We encourage you to order individual tests or a less inclusive profile when not all of the tests included in the panel or profile are medically necessary for the individual patient.

Medicare Billing Information

Medicare billing policy prevents us from submitting a Medicare claim for laboratory testing referred to us on hospital inpatients or hospital outpatients. For these samples, we will bill the sending location.

*Reflexive Test Descriptions

CMV with Drug Resistance Testing (UL97 and UL54 Genes)

Sample will be tested for CMV. If the CMV, Quant. is positive by PCR, a UL97 and UL54 resistance is performed. This test can also be ordered without reflexive testing (CMVQN).

HHV6 PCR Quant w/reflex to HHV6 Chromosome Integration

If the HH6 Quant is positive by PCR, HHV6 Chromosome Integration is performed. This test can also be ordered without reflexive testing (HH6QN).

HIV Screen with Reflexive Confirmation testing

Reactive HIV Screens (HIV1Ag, HIV-1 and 2 Ab) are confirmed in accordance with the CDC recommended 4th generation algorithm. Possible confirmatory assays include the Geenius HIV-1 and 2 Antibody Supplemental assay, HIV-1 RNA and HIV-2 RNA.

Hepatitis C Antibody

If Hepatitis C antibody is positive, Hepatitis C RNA by PCR is performed. This test can also be ordered without reflexive testing (HCABX).

Hepatitis B Surface Antigen

If Hepatitis B surface antigen is positive, Hepatitis B DNA Quantitation is performed. This test can also be ordered without reflexive testing (HBSAGX).