



PLEASE COMPLETE ALL ITEMS TYPE OR PRINT PER HIPAA REGULATIONS

Patient Last Name _____

First Name _____ MI _____

Parent Name (if patient is a minor) _____

Address _____

City _____ State _____ Zip _____

DOB (M/D/Y) _____ Age _____ Sex M F

DATE OF SPECIMEN
(Required by State and Federal Law)

Please Bill Insurance Patient Lab Doctor

I accept responsibility for bills related to the testing of my specimen:

PATIENT SIGNATURE

Beutner Labs. complies with the Health Insurance Portability and Accounting Act (HIPAA). The information provided herein will remain strictly confidential. For a copy of Beutner's Labs' Policy, please contact customer service.

REQUEST FREE TEST KITS AT 1-800-288-0549, INDICATE BELOW, OR ORDER AT BEUTNERLABS.COM

BIOPSY KITS # _____

SERUM KITS # _____

4-TUBE KITS # _____

HEALTH INSURANCE INFORMATION REQUIRED COPIES OF INSURANCE CARDS, FRONT AND BACK

Inpatient Outpatient **If Inpatient, please complete:**

Facility _____

Address _____

City _____ State _____ Zip _____

Date of Admission _____ MR/Lab # _____

Insurance Company _____

Policy # _____ Group # _____

Authorization # (if insurance requires) _____

Requesting Doctor

Name _____ NPI # _____

Group Name _____

Address _____

City _____ State _____ Zip _____

Doctor's Email _____

Doctor's Phone (with area code) _____

HIPAA Fax (with area code) _____

PHYSICIAN SIGNATURE

***Required by CMS**

DATA ON SKIN AND MUCOSAL BIOPSIES

Interpretation of direct immunofluorescence (IF) of tissue specimens requires knowledge of the location of the biopsy relative to the clinical lesion. **FOR ALL DIRECT IF SPECIMENS, PLEASE FILL OUT THIS PANEL.**

Biopsy of: Specific location:

skin Lesional site: _____

oral mucosa Normal site: _____

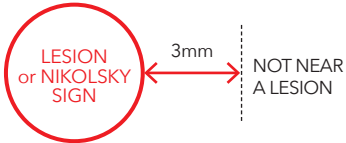
conjunctiva Perilesional site: _____

other _____

For Lupus: If applicable, please draw the biopsy site as it relates to the lesion.

sun exposed

sun protected



See "Suggested biopsy sites" below for major bullous and collagen-vascular diseases. Fixative used: Beutner Labs Other: _____ (Biopsies in formalin can NOT be used for DIF.)

Clinical diagnoses: _____

ICD-10 Code (Required): _____

Clinical findings: _____

Therapy: _____

Anti Ro(SS-A)/La(SS-B): _____ ANA titer _____

ANA pattern _____

SUGGESTED BIOPSY SITES FOR DIRECT IMMUNOFLUORESCENCE AND SERUM STUDIES

BULLOUS DISEASES: INDICATED DIRECT IMMUNOFLUORESCENT (DIF) AND SERUM STUDIES

SKIN LESIONS

If pemphigoid or epidermolysis bullosa acquisita is suspected, take skin biopsy with ~2/3 normal skin and ~1/3 edge of lesion. For best DIF results, take second biopsy ~3mm from lesion.

If pemphigus is suspected, take skin biopsy with ~2/3 normal skin and ~1/3 lesion edge plus serum for best diagnostic results. Also do IgG4 DIF. For best results take 2nd biopsy as for pemphigoid.

If dermatitis herpetiformis is suspected, take normal skin ~3 mm from lesion for best results.

If porphyria or pseudoporphyria is suspected, take skin biopsy with ~2/3 normal skin and ~1/3 lesion edge for best DIF results.

If in doubt, take two biopsies – one perilesional, as for pemphigoid, and one normal, as for DH, for best results.

If eruptions with other non-disease specific immune deposits are suspected, including lichenoid, psoriasiform or factitious lesions, or related disorders, take biopsy as for porphyria for DIF and lesional biopsy for light microscopy.*

MUCOSAL LESIONS

If pemphigoid is suspected, take normal mucosa ~3 mm from lesion or Nikolsky sign. For best DIF results, take second biopsy 3-10mm from lesion.

If pemphigus or paraneoplastic pemphigus is suspected, take normal mucosa ~3 mm from lesion or Nikolsky sign plus serum. For best diagnostic results, take two biopsies as for pemphigoid.

If erosive lichen planus (LP) is suspected, take mucosal biopsy with ~2/3 normal mucosa and ~1/3 edge of lesion or of Nikolsky sign for best DIF results.

HEREDITARY EPIDERMOLYSIS BULLOSA (EB)

If hereditary EB needs to be classified or confirmed, take biopsy of **induced** lesion in normal skin.

CONNECTIVE TISSUE DISEASES: INDICATED DIRECT IMMUNOFLUORESCENT (DIF) AND SERUM STUDIES

If SLE is suspected, take biopsy of sun-exposed normal skin of forearm for DIF for LE band test and blood in red top tube for serum tests.

If DLE is suspected, take biopsy of lesion in sun-exposed area of 3 or more months duration for DIF and for light microscopy.* Non-sun-exposed areas are of little value.

If SCLÉ or Sjögren Syndrome is suspected, take sun-exposed skin lesion biopsy for DIF for in vivo ANA and blood in red top tube for serum tests.

If systemic sclerosis (SSc) is suspected, take biopsy of sun-exposed skin for DIF studies and blood for serum tests.

IMMUNE COMPLEX MEDIATED VASCULITIS: INDICATED DIRECT IMMUNOFLUORESCENT STUDIES*

If leukocytoclastic vasculitis is suspected, (or most other immune complex vasculitides), take biopsy for DIF either of a fresh lesion, less than 48 hours old, or of the edge of a lesion plus adjacent normal skin.

If Henoch Schoenlein purpura is suspected, take biopsy of a fresh lesion (less than 48 hours old).

MOLECULAR TESTING FOR T CELL NEOPLASMS

If T cell neoplasm is suspected, send (a) 3-5ml whole blood in EDTA, ACD or heparin tube, or (b) skin biopsy in RPMI media, or (c) 5 unstained skin section slides.

*Additional/separate biopsy should be sent in formalin for light microscopy studies. Light microscopic studies of lesional biopsy sites are indicated, in most cases of vesiculobullous, connective tissue disease, vascular disorders and T cell disorders.

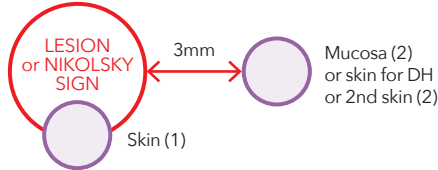
BULLOUS DISEASES

SKIN AND MUCOSAL BIOPSY STUDIES

- 001 Direct immunofluorescence (DIF) for IgG, IgA, IgM, fibrin and C3. If needed, IgG4 and/or IgG1 are also added for greater sensitivity.
- 002 Differentiation of bullous pemphigoid from epidermolysis bullosa acquisita by DIF of 1 M NaCl split biopsy (with no vesicles)
- 003 Light microscopy (H&E)
- 004 Light microscopy (H&E) - consult only

BLISTERING AND OTHER ERUPTIONS

Please fill in data on front of form. See front of form for abbreviations.



- (1) Skin biopsy in most pemphigus/pemphigoid cases.
(2) Mucosal or skin biopsy for DH; 2nd skin biopsy for pemphigus/pemphigoid cases.

SERUM STUDIES

- 010 Laminin 332 (Laminin 5 or epiligrin) antibodies (IIF)
- 014 Split skin, pemphigoid/epidermolysis bullosa acquisita (EBA) differentiation by IgG & IgG4 indirect IIF (Split-IIF)
- 015 Desmoglein (Dsg3 and Dsg1) ELISA
- 016 BP230 (BPAG1) and BP180 (BPAG2) ELISA
- 017 Paraneoplastic pemphigus antibody titer (on rat bladder) (PPA-IIF)
- 009 Envoplakin antibodies (ELISA)
- 018 Pemphigus antibody titer prognostic test comparing old and new sera for IgG and IgG4 (Monkey esophagus-IIF)
- 023 Collagen VII antibodies (ELISA)
- 024 IgA split skin - IIF, linear IgA bullous dermatosis (LABD)

SERUM PANELS

BASIC PEMPHIGUS - PEMPHIGOID SCREEN

- 013 Monkey esophagus for IgG and IgG4 antibodies by indirect immunofluorescence (IIF) Do other profiles if positive? Yes No

PEMPHIGUS

- 025 Monkey esophagus for IgG and IgG4 antibodies by IIF and Dsg 3/1 ELISA

PARANEOPLASTIC PEMPHIGUS

- 026 Monkey esophagus for IgG, IgG1 & IgG4 antibodies by IIF plus IIF on rat bladder and Dsg3/1 ELISA and envoplakin ELISA

PEMPHIGOID

- 027 Monkey esophagus and split skin for IgG & IgG4 antibodies by IIF and BP180 plus BP230 ELISA

EBA/BULLOUS LE

- 061 Monkey Esophagus, Split Skin for IgG and IgG4 by IIF and Collagen VII antibodies by ELISA

LAMININ 332 PEMPHIGOID

- 062 Monkey Esophagus, Split Skin for IgG and IgG4, and Laminin 332 (Laminin 5 or epiligrin) antibodies by IIF

DERMATITIS HERPETIFORMIS & CELIAC DISEASE

- 020 IgA/IgG anti endomysial antibodies (AEmA-IIF)
- 022 IgA epidermal transglutaminase antibodies (eTG-ELISA)
- 053 IgA/IgG Tissue Transglutaminase fluoroenzyme immunoassay (tTG-FEIA)
- 054 IgA/IgG Deaminated Gliadin fluoroenzyme immunoassay (DGP-FEIA)
- 055 Comprehensive Panel (020,022,053,054)

HEREDITARY EPIDERMOLYSIS BULLOSA

- 011 IF mapping of pencil eraser induced clefts in normal skin away from lesions for hereditary epidermolysis bullosa (EB):
(a) Primary screen for collagen type VII, collagen type IV, & keratin 14 to check for suitable biopsy
(b) For suitable biopsies, test for collagen XVII, alpha6 integrin, beta4 integrin, laminin 332 and plectin to differentiate dystrophic EB and junctional EB from EB simplex
- 003 Light microscopy for hereditary EB of an intact, spontaneous vesicle or a freshly induced perilesional cleft for diagnosis of HEREDITARY EB

MOLECULAR STUDIES (SERUM/BIOPSY)

T CELL NEOPLASMS

- 048 Gamma receptor rearrangement
- 049 Profile (gamma and beta receptor rearrangement)

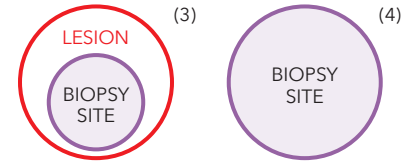
LUPUS ERYTHEMATOSUS, CONNECTIVE TISSUE & VASCULAR DISEASE

SKIN AND MUCOSAL BIOPSIES

- 005 Direct immunofluorescence for SLE, DLE & SCLE with tests for IgG, IgA, IgM, fibrin and C3
- 007 Direct immunofluorescence for dermatomyositis with tests for IgG, IgA, IgM, fibrin, C3 and C5b-9
- 006 Direct immunofluorescence for vasculitis with tests for IgG, IgA, IgM, fibrin and C3
- 003 Light microscopy (H&E) to rule out LE
- 004 Light microscopy (H&E) - consult only

COLLAGEN VASCULAR DISEASES

Please fill in data on front of form. See front of form for abbreviations.



- (3) Sun exposed skin biopsy in most LE cases. Skin biopsy to rule out Henoch Schoenlein purpura and vasculitis (lesion < 48 hours old).
(4) Sun-exposed skin biopsy to rule out SLE.

CHRONIC ULCERATIVE STOMATITIS

- 033 Stratified epithelium specific ANA (SES-ANA), Monkey esophagus, and ANA (HEp-2)

SYSTEMIC CONNECTIVE TISSUE DISEASE SERUM STUDY PANELS

ANA SCREEN

- 042 ANA titer and pattern on Hep-2 cells (IIF)

SLE PANEL

- 043 ANA titer and pattern on Hep-2 cells (IIF), antibodies to dsDNA, Ro (SS-A), La (SS-B), Sm, U1RNP, RNP70, Ribo P fluoroenzyme immunoassay (FEIA)

MIXED CONNECTIVE DISEASE PANEL

- 044 ANA titer and pattern on Hep-2 cells (IIF), Sm, U1RNP, RNP70, Jo-1 and Scl-70 fluoroenzyme immunoassay (FEIA)

SJÖGREN SYNDROME PANEL

- 045 ANA titer and pattern on Hep-2 cells (IIF), Rheumatoid Factor, Ro (SS-A), La (SS-B), CENP fluoroenzyme immunoassay (FEIA)

DRUG INDUCED LUPUS PANEL

- 046 ANA titer and pattern on Hep-2 cells (IIF), antibodies to dsDNA, Ro (SS-A), La (SS-B), Sm fluoroenzyme immunoassay (FEIA), Histone (ELISA)

SYSTEMIC SCLEROSIS PANEL

- 047 ANA titer and pattern on Hep-2 cells (IIF), U1RNP, RNP70, Scl-70, CENP, RNA Polymerase III fluoroenzyme immunoassay (FEIA)

ADDITIONAL DISEASE PANELS

RHEUMATOID ARTHRITIS

- 056 Cyclic citrullinated peptide (CCP), Rheumatoid Factor (RF) fluoroenzyme immunoassay (FEIA)

VASCULITIS

- 057 Anti-Neutrophil Cytoplasmic Antibody (ANCA- IIF), Myeloperoxidase Ab (MPO), Proteinase 3 Ab (PR3) fluoroenzyme immunoassay (FEIA)

GOODPASTURE SYNDROME

- 058 Glomerular Basement Membrane Antibody (GBM) fluoroenzyme immunoassay (FEIA)

ANTIIPHOSPHOLIPID SYNDROME (APS)

- 059 Cardiolipin IgG/IgA/IgM, Beta-2 Glycoprotein 1 IgG/IgA/IgM fluoroenzyme immunoassay (FEIA)

AUTOIMMUNE THYROID DISEASE

- 060 Thyroglobulin (Tg) and Thyroid Peroxidase (TPO) fluoroenzyme immunoassay (FEIA)

NOTE: Serum studies and profiles require a minimum of 2-5ml of serum



Beutner
Laboratories

(716) 838-0549 Phone
(800) 288-0549 Toll Free
(716) 838-0798 Fax
www.beutnerlabs.com