

THIS IS NOT A TEST REQUEST FORM.

The information below is required to have Immunodermatology testing performed.
Please fill out this form and submit it with the test request form or electronic packing list.

Immunodermatology Required Clinical Information Form (Serum)

Patient Information

Patient Name _____

DOB _____

Gender M

F

Specimen Procurement Date _____

Serum Testing

Presumptive Diagnosis

Clinical Information

PANELS

- Pemphigoid Antibody Panel (0092001)
 - Epithelial Basement Membrane Zone IgG Antibodies
 - Epithelial Basement Membrane Zone IgA Antibodies
 - Bullous Pemphigoid (180 and 230) Antigens, IgG
- Herpes (Pemphigoid) Gestationis Factor (0092283)
 - Epithelial Basement Membrane Zone IgG Antibodies
 - Bullous Pemphigoid 180 Antigen, IgG
 - Complement-Fixing IgG
- Pemphigus Panel (0090650)
 - IgG Epithelial Cell Surface Antibodies
 - IgG Desmoglein 1 and Desmoglein 3
- Epithelial Skin Antibody (0090299)
 - Epithelial Basement Membrane Zone IgG Antibodies
 - Epithelial Basement Membrane Zone IgA Antibodies
 - IgG Epithelial Cell Surface Antibodies
 - IgA (Cell Surface) Pemphigus

INDIVIDUAL ASSAYS

- Epithelial Basement Membrane Zone IgG Antibodies (0092056)
- Epithelial Basement Membrane Zone IgA Antibodies (0092057)
- Bullous Pemphigoid (180 and 230) Antigens, IgG (0092566)
- IgG Collagen VII (2010905)
- IgG Epithelial Cell Surface Antibodies (0090266)
- IgG Desmoglein 1 and Desmoglein 3 (0090649)
- IgA (Cell Surface) Pemphigus (0092106)
- IgG Paraneoplastic Pemphigus (0092107)
- IgA Epidermal Transglutaminase (eTG/tTG3) (2010902)