



Children's Hospital Colorado

Children's Hospital Colorado
 Department of Pathology and Laboratory Medicine
 Immunophenotyping and Immune Function Lab Requisition
 Phone (720) 777-6711
 Fax (720) 777-7118

Specimen Shipping Address:
 Children's Hospital Colorado
 Clinical Laboratory – Room B0200
 13123 E 16th Ave
 Aurora, CO 80045

FAILURE TO COMPLETE FIELDS BELOW WILL DELAY RESULTS				
PLEASE PROVIDE COMPLETE BILLING INFORMATION				
CONTACT INFORMATION				
Submitting Institution Name (Submitter)		Submitting Institution Address Street: City, State, Zip: Phone : Result Fax:		
Client Specimen Label (if available)		Internal Specimen Label		
PATIENT INFORMATION				
Last Name:	First Name:	Middle I:	DOB (MM/DD/YYYY):	Sex:
Ordering Provider (Last, First, Middle I):	Ordering Provider NPI:	Ordering Provider Phone:	Provider/Laboratory Email	
SPECIMEN INFORMATION				
Date Collected (MM/DD/YY):	Client External ID	ICD-10 Code(s) 1 2 3	Specimen Source: Blood Other	
Time Collected (HHMM) AM/PM	Draw Type			
BILLING SECTION: FAILURE TO COMPLETE WILL DELAY RESULTS				
Bill Institution		Bill Patient Insurance		
Institution/Facility Name: _____		The below items are REQUIRED or referring facility will be responsible for payment. -Patient's full name and address -Patient's phone number -Patient's Insurance Provider & Plan Type (Primary & Secondary) -Policy ID Number -DOB Required If subscriber is different than patient		
Address (Incl City, State, Zip): _____				
Contact Name: _____				
Email: _____ Phone: _____				

LYMPHOCYTE PHENOTYPING	
LAB7755*	TBNK (% and absolute counts of CD3, CD4, CD8, CD19 and Natural Killer cells)
T CELL PHENOTYPING	
LAB7756*	T Cell Subsets (% and absolute counts of CD3, CD4, and CD8 T cells)
LAB7756	TCR Subsets (% TCR alpha/beta and TCR gamma/delta T cells)
LAB8495	Naïve/Memory/RTE (% naïve, memory, Tcm, Tcm and TemRA CD4 and CD8 T cells, and recent thymic emigrants)
LAB9111	Regulatory T cells (%FOXP3+CD25 ^{hi} CD4+ T cells)
LAB9410	T follicular helper cells (%CXCR5+CD4+ T cells)
LAB9496	Activated (% HLADR+CD38+), Exhausted (PD-1+), and Senescent (CD57+) CD4 and CD8 T cells
T CELL FUNCTION (by flow cytometry)	
LAB9101**	T cell proliferation to PHA
LAB9748**	T cell proliferation to tetanus toxoid
LAB9969**	T cell proliferation to anti-CD3+antiCD28 or IL-2

B CELL PHENOTYPING	
LAB7752*	Rituximab Panel (% and absolute counts of CD19+ and CD20+ B cells)
LAB9066	Comprehensive B cell panel (% naïve, memory, transitional, CD21lo B cells, and plasmablasts)
NEUTROPHIL ASSAYS	
LAB7757	Neutrophil oxidative burst (DHR)**
LAB9067	Leukocyte Adhesion Deficiency 1 analysis (CD18, CD11b)
MISCELLANEOUS	
LAB9360	Perforin expression in NK and CD8 T cells
LAB8532	Double negative T cells (ALPS)
CYTOKINES	
LAB9494	Soluble CD25 (sIL2Ra)
LAB10055	Proinflammatory cytokines (IL-1-beta, IL-2, IL-6, TNF-alpha)

NOTES	
* CBC with differential within 24 hours of collection must be provided or a CBC will be performed (LAB7729)	
** A date matched sample from a healthy control should be sent with the patient's sample	

By submitting this requisition you agree to the standard terms and agreements of Children's Hospital Colorado, to obtain a copy of these please reach out to LabClientServices@childrenscolorado.org

Please note: If your patient has an active CHCO MyChart account, they will receive results automatically via MyChart when ordered from outside of our system of care.