

FOR LABORATORY USE ONLY

Received by: _

ERYTHROCYTE DIAGNOSTIC LABORATORY

Cancer & Blood Diseases Institute (CBDI)

Phone: 513.636.4685 | Fax:513.636.3861 Lab Hours: Monday-Friday, 8 am – 5 pm EST www.cincinnatichildrens.org/EDL | CBDILabs@cchmc.org Ship to: CCHMC—CBDI Laboratories DIL—RM R2328 3333 Burnet Ave. Cincinnati, OH 45229-3039

CBDI ERYTHROCYTE DIAGNOSTIC LAB - TEST REQUISITION FORM

Test Name (check all boxes Hereditary Hemolytic Ane Hereditary Hemolytic Ane genetic testing, if applicat Hemoglobin Electroph Heinz Body Preparatic Recommended: DNA Ext	mia Profile emia Profile (includes ble). Total Volume nee noresis Osmotic G on G6PD Scre traction and Storage (will prevent the need apply.	Test Code the tests below and a eded: 6 mL EDTA (lave radient Ektacytometry een Test (an extra 3 mL EDTA tu	comprehensivender), ship ref (please includube must be so	ve interpretation of pa frigerated le a normal blood conti ent)	DOB (MM/DD/YYYY) Diagnosis or Reason for testing ne/Type (page 2 for instruction tient results with directed sugger rol and a stained patient slide, if	estions for
Hereditary Hemolytic Aner Hereditary Hemolytic Aner genetic testing, if applicate Hemoglobin Electroph Heinz Body Preparation Recommended: DNA Ext Ordering this component of An extraction charge will a	s that apply) mia Profile emia Profile (includes ble). Total Volume need noresis Osmotic G on G6PD Scree traction and Storage (will prevent the need apply.	Test Code the tests below and a eded: 6 mL EDTA (lave radient Ektacytometry een Test (an extra 3 mL EDTA tu	comprehensivender), ship ref (please includable must be so	the last 4 months? No Yes ecommended Volun ve interpretation of pa frigerated le a normal blood conti	ne/Type (page 2 for instruction tient results with directed suggestient results with directed sugges	ons) estions for
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	sis				esting be indicated and requeste	ed.
Hemoglobin Electrophores	sis					
		2700800		mL EDTA (lavender), sh		
Hemoglobin S Level		2700075	3 1	mL EDTA (lavender), sh	nip refrigerated	
Hemoglobin F Level		2700040		mL EDTA (lavender), ship		
Hemoglobin-Oxygen Affin	ity (p50)	5071890	48	3 hour stability	nip refrigerated, keep sample rer	rigerated,
RBC Membrane Disorders						
Osmotic Gradient Ektacyto	ometry	10589605	re	rigerated, 72 hour stab	stained slide, ship refrigerated, k bility ed by a normal control blood	keep sampl
RBC Enzymopathies:						
G6PD Screen Test		2700055	3 :	mL EDTA (lavender), sh	nip refrigerated	
General Hematology:						
ACKR1/ Duffy Null Genotyp	ре	LAB00327	3n	nl EDTA (lavender), shi	p refrigerated	
F Cell Analysis, RBC: by flow	w cytometry	11738183	3 :	mL EDTA (lavender), sh	nip refrigerated	
Heinz Body Preparation		2700065	3 :	mL EDTA (lavender), sh	nip refrigerated	
Hemoglobin A1c (Glycosyl	ated Hemoglobin)	9000540	3 :	mL EDTA (lavender), sh	nip refrigerated	
RBC Pit Count		2700100		mL EDTA (lavender), sh 3 hour stability	nip refrigerated, keep sample rer	rigerated,
Viscosity, Whole Blood		11785022		\ /	stained slide, ship refrigerated ed by a normal control blood	
Viscosity, Serum		4966744	2	mL Serum (separated)	, ship refrigerated or frozen	
Other:						
REFERRING PHYSICIAN	N		BILLII	NG & REPORTING	INFORMATION	
Physician Name (print):			We do not	We do not bill patients or their insurance. Provide billing information here or on page 2.		
Phone: () Fax: ()			Institution:			
Email:			Address:			
			City/State/ZIP:			
Date: / /)	Fax: ()	
Referring Engalean Signature						

COLLECTION & SHIPPING INSTRUCTIONS

Laboratory hours:

- The lab operates Monday Friday 8 am 5 pm (EST).
- Testing is not performed on weekends or holidays and, therefore, samples must be received Monday Friday only

Collection information:

Cincinnati

- All samples should be labeled with patient name, date of birth and date/time of sample collection
- All samples should be refrigerated as soon as possible.
- Hemoglobin-Oxygen Affinity (p50) and Whole Blood Viscosity: Please draw an additional EDTA tube from a normal volunteer to serve as a travel control.
- Ektacytometry samples: Please draw an additional EDTA tube from a normal volunteer to serve as a travel control and submit a stained blood smear for sample, if possible.
- Serum Viscosity samples: Blood must be centrifuged within 8 hours, keep sample refrigerated or freeze.

Billing / Shipping / Handling:

- Samples must be maintained at refrigeration temperature: ~2–8°C
- Package all samples with ice packs but place a paper-towel barrier between the samples and the ice packs to insulate them so they do not come into direct contact with the ice packs (if cells freeze the sample cannot be tested). See picture below.
- Please notify the CBDI Erythrocyte Diagnostic Laboratory when shipping a sample 513-636-4685, CBDILabs@cchmc.org
- The institution sending the sample is responsible for payment in full

DO NOT SHIP ON DRY ICE!

Questions?

- Call: 513-636-4685
- Email: CBDILabs@cchmc.org



1) Place ice pack in insulated container



2) Place paper towel on top



3) Place specimen on paper towel