



**Children's Hospital Colorado**  
**Department of Pathology & Laboratory Medicine**  
**AP 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

Children's Hospital Colorado

**FAILURE TO COMPLETE BELOW FIELDS 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	Birthdate (MM/DD/YYYY)	Sex
Ordering Provider (Last, First, and Middle Initial)	Ordering Provider Phone		Ordering Provider NPI	

**Specimen Information**

Date Collected (MM/DD/YY)		ICD-10 Code(s)
Time Collected (HHMM)		1
AM / PM		2
		3

**FAILURE TO COMPLETE WILL DELAY RESULTS**

**Bill To:**  Billing Facility and Address same as Submitter Listed

<b>Billing Contact Information:</b>	<b>Billing Facility and Address are DIFFERENT than Submitter Listed, Bill To:</b>
Name: _____	Institution Name: _____
Email: _____	Address (incl City, State, Zip): _____
Phone: _____	Phone: _____ Fax: _____

**Anatomic Pathology Test Information - Ordering laboratory is responsible for accuracy of test selection**

IHC			Special Stains	Special Stains
<input type="checkbox"/> Adenovirus	<input type="checkbox"/> CD45/LCA (2b11,p7/26)	<input type="checkbox"/> HH3-K27	<input type="checkbox"/> S100	<b>83312 - Special Stains</b>
<input type="checkbox"/> AFP	<input type="checkbox"/> CD56	<input type="checkbox"/> HMB-45/MAA (HMB45)	<input type="checkbox"/> SMA	<input type="checkbox"/> Alcian Blue pH 2.5
<input type="checkbox"/> ALK-1/cd246 (alk 1)	<input type="checkbox"/> CD61	<input type="checkbox"/> HSV I&II	<input type="checkbox"/> SALL4	<input type="checkbox"/> Alcian Blue/PASH
<input type="checkbox"/> ATRX (Bsb-108)	<input type="checkbox"/> CD68 (pg-m1)	<input type="checkbox"/> HHV8 (13B10)	<input type="checkbox"/> SOX10 (SP267)	<input type="checkbox"/> Colloidal Iron
<input type="checkbox"/> BAF47/INI-1	<input type="checkbox"/> CD99 (12e7)	<input type="checkbox"/> IDH1	<input type="checkbox"/> Synaptophysin (srp88)	<input type="checkbox"/> Congo Red
<input type="checkbox"/> BCL-2 (124)	<input type="checkbox"/> CD117 (C-Kit)	<input type="checkbox"/> IGG	<input type="checkbox"/> TDT	<input type="checkbox"/> Copper/Rhodanine
<input type="checkbox"/> BCL-6 (gi191e/a8)	<input type="checkbox"/> CD138 (b-a38)	<input type="checkbox"/> IGG4	<input type="checkbox"/> Vimentin (v9)	<input type="checkbox"/> Diff Quick
<input type="checkbox"/> Beta-Catenin (14)	<input type="checkbox"/> CD163	<input type="checkbox"/> Inhibin (R1)	<input type="checkbox"/> WT1	<input type="checkbox"/> Fontana-Masson
<input type="checkbox"/> Beta-HCG (m94138)	<input type="checkbox"/> Calretinin	<input type="checkbox"/> Lysozyme (ec3.2.1.17)	<input type="checkbox"/> YAP (63.7)	<input type="checkbox"/> Iron
<input type="checkbox"/> BK/JC Virus	<input type="checkbox"/> Chromogranin (lk2h10)	<input type="checkbox"/> Mast Cell/Tryptase (aa1)		<input type="checkbox"/> JMS/Jones
<input type="checkbox"/> BOB-1 (sp92)	<input type="checkbox"/> CMV	<input type="checkbox"/> MIB-1/K167		<input type="checkbox"/> LFB
<input type="checkbox"/> Bombesin	<input type="checkbox"/> D240	<input type="checkbox"/> MPO		<input type="checkbox"/> Mucicarmine
<input type="checkbox"/> BRAF V600E	<input type="checkbox"/> DUX4	<input type="checkbox"/> MYOD1 (ep212)		<input type="checkbox"/> Myelin
<input type="checkbox"/> C4D	<input type="checkbox"/> Desmin (d33)	<input type="checkbox"/> Myogenin (f5d)		<input type="checkbox"/> Nissl
<input type="checkbox"/> CD1a (ep3622)	<input type="checkbox"/> EMA (e29)	<input type="checkbox"/> NEU-N		<input type="checkbox"/> Oil Red O
<input type="checkbox"/> CD3	<input type="checkbox"/> ERG (EPR3864)	<input type="checkbox"/> NFP (2f11)	<b>Immunofluorescence</b>	<input type="checkbox"/> PAS
<input type="checkbox"/> CD4 (sp35)	<input type="checkbox"/> Factor X111a/13 (ac-1a1)	<input type="checkbox"/> NKX2.2	<input type="checkbox"/> Albumin	<input type="checkbox"/> PAS with diastase
<input type="checkbox"/> CD8 (68/144b)	<input type="checkbox"/> Fascin (55k-2)	<input type="checkbox"/> NSE (mrq55)	<input type="checkbox"/> C1Q	<input type="checkbox"/> Retic Stain
<input type="checkbox"/> CD10 (sp67)	<input type="checkbox"/> GAB1 (H-7)	<input type="checkbox"/> Olig2 (EP112)	<input type="checkbox"/> C3	<input type="checkbox"/> Sudan Black B
<input type="checkbox"/> CD15 (mma)	<input type="checkbox"/> Gastrin	<input type="checkbox"/> OCT2 (mrq55)	<input type="checkbox"/> Fibrinogen	<input type="checkbox"/> Toluidine Blue
<input type="checkbox"/> CD19	<input type="checkbox"/> GFAP	<input type="checkbox"/> P53 (do-7)	<input type="checkbox"/> IGA	<input type="checkbox"/> Trichrome
<input type="checkbox"/> CD20 (126)	<input type="checkbox"/> GLUT-1	<input type="checkbox"/> PAN CK (ae1/ae3)	<input type="checkbox"/> IGG	<input type="checkbox"/> Von Kossa
<input type="checkbox"/> CD21	<input type="checkbox"/> Glutamine Synthetase	<input type="checkbox"/> Pan-TRK (EPR17341)	<input type="checkbox"/> IGM	<input type="checkbox"/> VVG - Elastic Stain
<input type="checkbox"/> CD30	<input type="checkbox"/> Glypican-3	<input type="checkbox"/> PAX-5 (sp34)		
<input type="checkbox"/> CD31 (jc70a)	<input type="checkbox"/> H. Pylori	<input type="checkbox"/> PHOX2B		
<input type="checkbox"/> CD34 (QBEnd/10)	<input type="checkbox"/> H3K27ME3	<input type="checkbox"/> PLAP (p18-f6)		
<input type="checkbox"/> CD43 (df-t1)	<input type="checkbox"/> HHF35/MSA	<input type="checkbox"/> PROX1		

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

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