

Versiti does NOT bill patients or their insurance. Call 800-245-3117 ext. 6250 for your Client#.

Person Completing Requisition		
Institution	Client#	
Dept	Physician/Provider	
Address		
City	ST	ZIP
Phone (Lab)	Phone/Email (Provider)	



Is testing for outpatient Medicare enrollee or Wisconsin Medicaid recipient? *Yes No

*If YES, please complete the **beneficiary form** located at www.versiti.org/medical-professionals/products-services/requisitions and submit with this requisition.

Special Reporting Requests:	PO#:
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PATIENT INFORMATION

Last Name:	First Name:	MI:	DOB:
MR#:	Accession#:	Draw Date:	Draw Time:
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		Clinical Diagnosis:	

Specimen Type: <input type="checkbox"/> Citrated Plasma <input type="checkbox"/> EDTA Blood (K2) <input type="checkbox"/> Serum (red top) <input type="checkbox"/> Citrated Blood

TEST ORDERS

PLEASE COMPLETE HISTORY AND MEDICATION LIST ON REVERSE SIDE FOR AN INTERPRETATION

Bleeding Disorders	Clotting Disorders
Hemophilia – For local STAT testing please call 800-245-3117, Option 1 <input type="checkbox"/> Factor VIII Activity (1081) <input type="checkbox"/> Factor IX Activity (1091) <input type="checkbox"/> Factor VIII Activity- Hepzyme Treated (1082) <input type="checkbox"/> Factor IX Activity- Hepzyme Treated (1093) <input type="checkbox"/> Factor VIII Inhibitor (1085) <input type="checkbox"/> Factor IX Inhibitor (1095) <input type="checkbox"/> Factor VIII Inhibitor- Hepzyme Treated (1083) <input type="checkbox"/> Factor IX Inhibitor- Hepzyme Treated (1094) <input type="checkbox"/> Porcine Factor VIII Inhibitor Profile (1086) ¹ <input type="checkbox"/> Porcine Factor VIII Inhibitor Profile- Hepzyme Treated (1084) ¹	Thrombophilia Profiles: <input type="checkbox"/> Antiphospholipid Antibody Profile ¹ (1190) <input type="checkbox"/> Thrombosis Profile ¹ (1007) Individual Tests: <input type="checkbox"/> Anticardiolipin Antibody (1191) <input type="checkbox"/> Beta 2 Glycoprotein I Antibody (1291) <input type="checkbox"/> Lupus Anticoagulant (1192) <input type="checkbox"/> Protein C Activity (1031) <input type="checkbox"/> Protein C Antigen (1033) <input type="checkbox"/> Protein S Activity (1041) <input type="checkbox"/> Protein S Antigen Free (1043) <input type="checkbox"/> Protein S Antigen Total & Free (1042)
von Willebrand Disease Evaluations and Profiles: <input type="checkbox"/> VWD Diagnostic Evaluation ¹ (1800) *FOLLOWS REFLEXIVE ALGORITHM* <input type="checkbox"/> von Willebrand Profile ¹ (1060)	Thrombotic Microangiopathy Evaluations and Profiles: <input type="checkbox"/> ADAMTS13 Evaluation ¹ (1295) *FOLLOWS REFLEXIVE ALGORITHM* <input type="checkbox"/> aHUS Complement Profile ¹ (1500)
Individual Tests: <input type="checkbox"/> VWD Type 2B Evaluation ¹ (1067) <input type="checkbox"/> VWF GPIbM Activity (1070) <input type="checkbox"/> VWD Type 2N Profile ¹ (1088) <i>*Replaced VWF Ristocetin Cofactor Activity*</i> <input type="checkbox"/> VWD Type 2N Binding (1089) <input type="checkbox"/> VWF Inhibitor Profile (1065) <input type="checkbox"/> VWF Antigen (1062) <input type="checkbox"/> VWF Propeptide Antigen (1282) <input type="checkbox"/> VWF Collagen Binding (1281) <input type="checkbox"/> VWF Quantitative Multimer (1063)	Individual Tests: <input type="checkbox"/> ADAMTS13 Activity (1298) <input type="checkbox"/> ADAMTS13 Inhibitor (1297) <input type="checkbox"/> ADAMTS13 Antibody (1299) <input type="checkbox"/> C3 (1501) <input type="checkbox"/> C4 (1502) <input type="checkbox"/> CD46 (MCP) Expression (1507) <input type="checkbox"/> Factor B (1503) <input type="checkbox"/> Factor H (1505) <input type="checkbox"/> Factor H Autoantibody (1506) <input type="checkbox"/> Factor I (1504)
Special Coagulation <input type="checkbox"/> Arixtra® (Fondaparinux) Level (1009) <input type="checkbox"/> Factor XI Activity (1111) <input type="checkbox"/> Factor II Activity (1021) <input type="checkbox"/> Factor XI Inhibitor (1115) <input type="checkbox"/> Factor II Inhibitor (1025) <input type="checkbox"/> Factor XII Activity (1121) <input type="checkbox"/> Factor V Activity (1051) <input type="checkbox"/> Factor XII Inhibitor (1125) <input type="checkbox"/> Factor V Inhibitor (1055) <input type="checkbox"/> Fibrinogen Activity (1011) <input type="checkbox"/> Factor VII Activity (1071) <input type="checkbox"/> Fibrinogen Antigen (1012) <input type="checkbox"/> Factor VII Inhibitor (1075) <input type="checkbox"/> Platelet Aggregations ² (1175) <input type="checkbox"/> Factor X Activity (1101) <input type="checkbox"/> Ristocetin Induced Platelet Aggregation ² (1068) <input type="checkbox"/> Factor X Inhibitor (1105)	

¹ See reverse side for assays included in suggested evaluations/profiles.
² By appointment only. Please call 800-245-3117 x 6129 to schedule.

For Genetic Testing Please Use Hematology Genetics Requisition

VERSITI USE ONLY	
<input type="checkbox"/> EDTA <input type="checkbox"/> Serum <input type="checkbox"/> CITP <input type="checkbox"/> ACDA <input type="checkbox"/> ACDB <input type="checkbox"/> Clot <input type="checkbox"/> Other	Opened By _____ Evaluated By _____

