**Physician name:**

**Address**:

**Phone**:

**Email**:

**Patient: DOB: Age:**

**Ordering physician: Fax:**

**Diagnosis:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Hypercoagulable** |  | **General** |
|  | CBC w/ diff |  | Basic metabolic panel |
|  | Serum protein electrophoresis |  | Hemoglobin A1C |
|  | Protein S |  | CBC w/diff |
|  | Factor V Leiden mutation |  | PT/PTT |
|  | Homocysteine |  | Folate levels |
|  | Anti-phospholipid antibody |  | BUN/Creatinine |
|  | Anti-thrombin III activity and antigen |  | HIV |
|  | Lupus anticoagulant activity and antigen |  | ANA |
|  |  |  | ESR |
|  | **Uveitis** |  | CRP |
|  | ANA |  | Fasting blood sugar |
|  | Quanteferon Gold |  | Liver Panel |
|  | HLA-A29 |  |  |
|  | ACA |  | **Autoimmune** |
|  | Lysozyme |  | ANA |
|  | RPR-FTabs |  | Anti-ds DNA |
|  | Bartonella Titers |  | Anti-SS-A |
|  | Toxoplasmosis IgG/IgM |  | Anti-SS-B |
|  | CMV IgG/IgM |  | Rheumatoid Factor |
|  | Lyme Titer |  | p-ANCA |
|  | Toxocara IgG/IgM |  | c-ANCA |
|  | Herpes I IgM |  | ESR |
|  | Varicella IgM |  | CRP |
|  | Hemoglobin A1C |  | Uric Acid |
|  | ANA |  |  |
|  | HLA-B27 Antigen |  | **Thyroid/Strabismus** |
|  | Serum Lysozyme |  | Myasthenia Panel (binding/blocking/modulating) |
|  | ESR |  | Total T4 |
|  | CRP |  | Total T3 |
|  |  |  | TSH |
|  | **Other** |  | Free T3 |
|  | Serum tear blood-draw enough for 10mL |  | Free T4 |
|  |  |  | Anti-Thyroglobalin Ab |

**Physician Signature: Date:**