



# Kephera Diagnostics Laboratory

1 Grant St., Suite 300, Framingham, MA 01702-6767

Tel: 774-777-3558

Fax: 774-777-3559

[www.kephera.com](http://www.kephera.com)

CLIA ID Number: 22D2182419

[cia@kepheralab.com](mailto:cia@kepheralab.com)

Andrew E. Levin, Ph.D. Laboratory Director

## TEST REQUISITION FORM

PATIENT INFORMATION (please print)				PROVIDER INFORMATION (please print)			
Last Name		MI	First name		Provider Name		NPI #
Date of Birth (mm/dd/yyyy)		Sex (M/F)	Guardian Name (if under 16 YO)		Provider Facility Name		
Mailing Address			City		Provider Address		City
State	Zip Code	Phone Number		State	Zip Code	Phone Number	Fax Number
		Email					
<b>RACE</b> Native America <input type="checkbox"/> African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> White <input type="checkbox"/> Other <input type="checkbox"/>				Email <input type="text"/> <b>Preferred method of results communication</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
<b>ETHNICITY</b> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/>							
CLINICAL SYMPTOMS							
Please indicate patient's clinical symptoms and results of other tests, including results of imaging (if available)							
Neurological	None	Seizures	Malaise	Other	None		
	Severe Headache	Confusion	Fatigue		Cysts (qty, location)		
	Weakness	Dizziness	Abdominal pain		Swelling		
	Numbness	<b>General</b> None	Cardiac abnormality		Arthritis		
	Radiculitis	Fever, chills	GI dysfunction		Tick bite (Y/N, date)		
	Facial palsy/droop	Abdominal pain	Vomiting, Diarrhea		Erythema migrans (single, multiple?)		
Comments/other symptoms/test results							
<b>PATIENT'S LAST NAME, FIRST NAME, DATE OF BIRTH AND COLLECTION DATE/ TIME MUST BE ON SAMPLE TUBE LABEL</b>							
SELECT TEST				SAMPLE INFORMATION			
Test Name		Sample Type*	Min Volume	Sample Collection Facility			
Lyme ( <i>B. burgdorferi</i> ) Modified Two-Tier Testing (MTTT): C6 Antibody with reflex to VlsE antibody ELISA		S	1mL	Contact Information (phone number, address)			
Lyme ( <i>B. burgdorferi</i> ) C6 Antibody ELISA only		S	1mL				
Neurocysticercosis ( <i>T. solium</i> ) Antibody ELISA		S	1mL	Sample ID			
Liver Fluke ( <i>C. sinensis</i> ) Antibody ELISA		S	1mL				
Chagas ( <i>T. cruzi</i> ) antibody by two-test algorithm (Wiener + MultiCruzi)		S/EP	1mL				
Chagatest ELISA recombinante v.3 (Wiener)		S/EP	1mL	Sample Type		Volume (mL)	
Chagas MultiCruzi Multiplex Immunoassay		S/EP	1mL	Sample Collection Date (mm/dd/yyyy)		Sample Collection Time	
*Sample type codes: S - Serum, EP - EDTA plasma Comments:				Sample Storage Conditions RT <input type="checkbox"/> Refrigerated <input type="checkbox"/> Frozen <input type="checkbox"/>			

SEE NEXT PAGE FOR GENERAL SAMPLE HANDLING INSTRUCTIONS

Contact Kephera Diagnostics Laboratory with questions at 774-777-3558 or email us at [clia@kepheralab.com](mailto:clia@kepheralab.com)



## Kephera Diagnostics Laboratory

1 Grant St., Suite 300, Framingham, MA 01702-6767

Tel: 774-777-3558

Fax: 774-777-3559

[www.kephera.com](http://www.kephera.com)

CLIA ID Number: 22D2182419

[clia@kepheralab.com](mailto:clia@kepheralab.com)

Andrew E. Levin, Ph.D. Laboratory Director

### GENERAL SPECIMEN AND SAMPLE HANDLING INSTRUCTIONS

1. Kephera Diagnostics does not currently collect specimens. Patients for whom a test(s) has been ordered by a healthcare provider should have appropriate specimens collected and sent to Kephera Diagnostics with the test requisition form.
2. All testing of samples in Kephera Diagnostics' laboratory must be ordered by an authorized provider.
3. Use universal precautions when handling specimens containing blood or other potentially infectious material. Specimens must be handled in a safe manner and according to applicable legal requirements or guidance. Information on safe specimen handling may be obtained from the U.S. Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention (CDC).
4. Before sending samples make sure that there is no leakage or visible contamination outside the specimen container and that there are no needles or other sharps in the package that could cause injury or pathogenic exposure to anyone handling or opening the package and inner containers.
5. Sample handling and shipment after collection
  - 5.1. Handling
    - 5.1.1. After sample collection, invert the tube 5-10 times.
    - 5.1.2. For serum collection, allow the blood to clot for sixty minutes and separate by centrifugation (15 minutes at 2200-2500 RPM). The serum and plasma samples should be clear and free from red cells.
    - 5.1.3. For EDTA plasma collection, separate plasma by centrifugation (15 minutes at 2200-2500 RPM).
    - 5.1.4. Transfer the serum or plasma to a plastic tube with screw cap and make sure to close it tightly.
    - 5.1.5. If EDTA plasma is acceptable for the test, the whole blood can be sent in a tightly closed lavender top (K2 EDTA) tube.
  - 5.2. Acceptable sample volume is:
    - Minimum 0.5 mL of serum, 1 mL is desirable volume.
    - Minimum 2 mL of whole blood from venipuncture.
    - Minimum 0.35 mL of whole blood from fingerstick.
  - 5.3. Specimen labeling: Each sample must be labeled with the following:
    - Patient's full name (last and first name)
    - Patient's Date of Birth
    - Date sample was collected.
  - 5.4. Specimen Rejection
    - 5.4.1. Unlabeled tubes
    - 5.4.2. Hemolyzed, lipemic, icteric or cloudy samples
6. Storage prior to shipment:
  - 6.1. Serum and plasma:
    - 6.1.1. Room temperature for 24 hours.
    - 6.1.2. 2 – 8°C for 96 hours, after that sample can be stored frozen (see 6.1.3., 6.1.4).
    - 6.1.3. Frozen at -20°C or below.
    - 6.1.4. Serum or plasma samples should not go through freeze-thaw cycles. Samples subject to multiple freeze-thaw cycles may yield anomalous results.
  - 6.2. Whole blood (EDTA):
    - 6.2.1. Room temperature or 2 – 8°C for 24 hours.
  - 6.3. Shipments
    - 6.3.1. When packaging for shipping, ensure shipping conditions maintain the required temperature requirements.
    - 6.3.2. Serum, plasma, and whole blood samples can be shipped via overnight delivery refrigerated or at ambient temperature.
    - 6.3.3. Ship samples to:  
***Kephera Diagnostics, Attn: CLIA Laboratory, 1 Grant St., Suite 300, Framingham, MA 01702-6767.***
- 6.4. Samples can be sent by Courier, FedEx, or UPS. Ship samples via overnight delivery to arrive Monday through Thursday.