Complete, print and submit

MAYO CLINIC LABORATORIES

Reset Form

Neurology Specialty Testing
Client Test Request

Client Information (required)

Client Name		
Client Account No.		
Client Phone	Client Order No.	
Address		
City	State	Zip Code

Submitting Provider/Provider Name Information (required)

Submitting/Referring Provider *(Last, First)*
Fill in only if Call Back is required. Phone ( ) _____ – _____ Fax * ( ) _____ – _____
Provider's National I.D. (NPI)

**Fax number given must be from a fax machine that complies with applicable HIPAA regulation.*

"I hereby confirm that informed consent has been signed by an individual legally authorized to do so and is on file with this office or the individual's provider's office."

Signature _____

Note: It is the client's responsibility to maintain documentation of the order.

Patient Information (required)

Patient ID *(Medical Record No.)*		
Patient Name *(Last, First, Middle)*		
Gender ☐ Male ☐ Female	Birth Date *(Month DD, YYYY)*	
Collection Date *(Month DD, YYYY)*	Time ☐ a.m. ☐ p.m.	
Patient's Street Address		
Phone		
City	State	Zip Code

Reason for Referral (required)

ICD-10 Diagnosis Code

Note: It is the client's responsibility to maintain documentation of the order.

New York State Patients: Informed Consent for Genetic Testing

MCL Internal Use Only

Ship specimens to:

Mayo Clinic Laboratories
3050 Superior Drive NW
Rochester, MN 55901

Customer Service: 855-516-8404

Visit www.MayoClinicLabs.com for the most up-to-date test and shipping information.

Billing Information

- An itemized invoice will be sent each month.
- Payment terms are net 30 days.

Call the Business Office with billing related questions:
800-447-6424 (US and Canada)
507-266-5490 (outside the US)

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ALZHEIMER'S DISEASE

☐ ADEVL	Alzheimer's Disease Evaluation, Spinal Fluid
☐ APOEG	Apolipoprotein E Genotyping, Blood

AUTOIMMUNE CNS AND PARANEOPLASTIC DISORDERS

☐ ENS2	Encephalopathy, Autoimmune Evaluation, Serum (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, VGCC-N, VGCC-P/Q, AChR Ganglionic, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF)
☐ ENC2	Encephalopathy, Autoimmune Evaluation, Spinal Fluid (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF)
☐ PAVAL	Paraneoplastic, Autoantibody Evaluation, Serum (VGKC, VGCC-P/Q, VGCC-N, AChR Binding, AChR Ganglionic, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, Striational)
☐ PAC1	Paraneoplastic, Autoantibody Evaluation, Spinal Fluid (PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin)
☐ GD65S	Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Serum
☐ GD65C	Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Spinal Fluid

Pediatric CNS Disorders

☐ PCDEC	Pediatric Autoimmune Central Nervous System Disorders Evaluation, Spinal Fluid (NMDA, LGI1, CASPR2, GABA, AQP4, DPPX, MGluR1, PCA-Tr, ANNA-1, GAD65, GFAP)
☐ PCDES	Pediatric Autoimmune Central Nervous System Disorders Evaluation, Serum (NMDA, LGI1, CASPR2, GABA, AQP4, MOG, DPPX, MGluR1, VGCC-N, VGCC-P/Q, AChR Ganglionic, PCA-Tr, ANNA-1, GAD65, GFAP)

DEMENTIA

Autoimmune Dementia

☐ DMS2	Dementia, Autoimmune Evaluation, Serum (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, VGCC-N, VGCC-P/Q, AChR Ganglionic, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF)
☐ DMC2	Dementia, Autoimmune Evaluation, Spinal Fluid (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF)

Creutzfeld Jakob Disease

☐ NSESF	Neuron-Specific Enolase (NSE), Spinal Fluid

Frontotemporal Dementia

☐ C9ORF	C9orf72 Hexanucleotide Repeat, Molecular Analysis
☐ MAPTZ	MAPT Gene, Sequence Analysis, 7 Exon Screening Panel
☐ GRNZ	Progranulin Gene (GRN), Full Gene Analysis

DEMYELINATING DISEASE

☐ CDS1	CNS Demyelinating Disease Evaluation, Serum (AQP4, MOG)
☐ NMOFS	Neuromyelitis Optica (NMO)/Aquaporin-4-IgG Fluorescence-Activated Cell Sorting (FACS) Assay, Serum
☐ MOGFS	Myelin Oligodendrocyte Glycoprotein (MOG-IgG1) Fluorescence-Activated Cell Sorting (FACS) Assay, Serum
☐ KCSF	Immunoglobulin Kappa Free Light Chain, Spinal Fluid
☐ MSP3	Multiple Sclerosis (MS) Profile, Serum and Spinal Fluid

DEVELOPMENTAL DELAY

☐ CMACB	Chromosomal Microarray, Congenital, Blood
☐ FXS	Fragile X Syndrome, Molecular Analysis
☐ PWAS	Prader-Willi/Angelman Syndrome, Molecular Analysis
☐ MECPZ	MECP2 Gene, Full Gene Analysis

DYSAUTONOMIA

☐ DYS2	Autoimmune Dysautonomia Evaluation, Serum (DPPX, VGKC, VGCC-P/Q, VGCC-N, AChR Binding, AChR Ganglionic, ANNA-1, GAD65, Striational)

EPILEPSY

Autoimmune Epilepsy

☐ EPS2	Epilepsy, Autoimmune Evaluation, Serum (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, VGCC-N, VGCC-P/Q, AChR Ganglionic, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP)
☐ EPC2	Epilepsy, Autoimmune Evaluation, Spinal Fluid (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP)

Hereditary Epilepsy

☐ ESPAN	Epilepsy/Seizure Genetic Panels by Next-Generation Sequencing (NGS)

Select one subpanel from the list below.

- ☐ Custom Gene Panel
  Custom ID _____
- ☐ Early Epileptic Encephalopathy Panel (90 genes)
- ☐ Encephalopathy with Seizures Panel (129 genes)
- ☐ Epilepsy with Migraine Panel (7 genes)
- ☐ Epilepsy Expanded Panel (192 genes)
- ☐ Febrile Seizure Panel (9 genes)
- ☐ Focal Epilepsy Panel (16 genes)
- ☐ Infantile Spasms Panel (17 genes)
- ☐ Neuronal Migration Disorders Panel (29 genes)
- ☐ Progressive Myoclonic Epilepsy Panel (27 genes)
- ☐ Tuberous Sclerosis Panel (2 Genes)

FOLLOW-UP TESTING - NEUROIMMUNOLOGY

☐ PNEFS	Neuroimmunology Antibody Follow-up, Serum
	Specify Antibody _____
☐ PNEFC	Neuroimmunology Antibody Follow-up, Spinal Fluid
	Specify Antibody _____

MENINGITIS

☐ CSFME	Meningitis/Encephalitis Pathogen Panel, PCR, Spinal Fluid

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MITOCHONDRIAL DISORDERS

- ☐ GDF15 Growth Differentiation Factor 15, Plasma
- ☐ MITOP Mitochondrial Full Genome Analysis by Next-Generation Sequencing (NGS)
- ☐ MITON Mitochondrial Nuclear Gene Panel by Next-Generation Sequencing (NGS)
- ☐ MITOT Combined Mitochondrial Analysis, Mitochondrial Full Genome and Nuclear Gene Panel

MOVEMENT DISORDERS

Autoimmune Movement Disorders

- ☐ GD65S Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Serum
- ☐ GD65C Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Spinal Fluid
- ☐ GLYCS Glycine Receptor Alpha1 IgG, Cell Binding Assay, Serum
- ☐ GLYCC Glycine Receptor Alpha1 IgG, Cell Binding Assay, Spinal Fluid
- ☐ MDS2 Movement Disorder, Autoimmune Evaluation, Serum (NMDA, LGI1, CASPR2, DPPX, MGluR1, VGCC-N, VGCC-P/Q, AChR Ganglionic, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GRAF1, ITPR1, NIF)
- ☐ MDC2 Movement Disorder, Autoimmune Evaluation, Spinal Fluid (NMDA, LGI1, CASPR2, DPPX, MGluR1, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GRAF1, ITPR1, NIF)

Hereditary Movement Disorders

- ☐ DRPL Dentatorubral-Pallidoluysian Atrophy (DRPLA) Gene Analysis
- ☐ FFRWB Friedreich Ataxia, Frataxin, Quantitative, Whole Blood
- ☐ HAD Huntington Disease, Molecular Analysis

MYASTHENIA GRAVIS

- ☐ MGRM Myasthenia Gravis (MG) Evaluation with MuSK Reflex, Serum (AChR Modulating, AChR Binding, Striational)
- ☐ MGA1 Myasthenia Gravis (MG) Evaluation, Adult, Serum (AChR Modulating, AChR Binding, Striational)
- ☐ MGP1 Myasthenia Gravis (MG) Evaluation, Pediatric, Serum (AChR Modulating, AChR Binding)
- ☐ MGT1 Myasthenia Gravis (MG) Evaluation, Thymoma, Serum (AChR Modulating, Ganglionic AChR, VGKC, AChR Binding, Striational, CRMP-5, GAD65)
- ☐ MGL1 Myasthenia Gravis (MG)/Lambert-Eaton Syndrome (LES) Evaluation, Serum (VGCC-P/Q, VGCC-N, AChR Modulating, AChR Binding, Striational)

Stand-Alone Antibodies

- ☐ ARBI Acetylcholine Receptor (Muscle AChR) Binding Antibody, Serum
- ☐ MUSK Muscle-Specific Kinase (MuSK) Autoantibody, Serum

MYELOPATHY

- ☐ MAS1 Autoimmune Myelopathy Evaluation, Serum (AQP4, MOG, DPPX, mGluR1, VGCC-N, VGCC-P/Q, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF)
- ☐ MAC1 Autoimmune Myelopathy Evaluation, Spinal Fluid (AQP4, DPPX, mGluR1, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF)

NEUROMUSCULAR

Autoimmune Neuromuscular

Myopathy

- ☐ NMS1 Necrotizing Myopathy Evaluation, Serum (HMGCR, SRP)

Multifocal Motor Neuropathy

- ☐ GM1B Ganglioside Antibody Panel, Serum (Monosialo GM1, IgG; Monosialo GM1, IgM; Asialo GM1, IgG; Asialo GM1, IgM; GD1b, IgG; GD1b, IgM)

Sensory and Motor Neuropathy

- ☐ PAVAL Paraneoplastic, Autoantibody Evaluation, Serum (VGKC, VGCC-P/Q, VGCC-N, AChR Binding, AChR Ganglionic, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, Striational)
- ☐ CRMWS Collapsin Response-Mediator Protein-5-IgG, Western Blot, Serum
- ☐ GD65S Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Serum

Hereditary Neuromuscular

Neuromuscular Disorders

- ☐ NMPAN Neuromuscular Genetic Panels by Next-Generation Sequencing (NGS)

Select one subpanel from the list below.

- ☐ Custom Gene Panel

  Custom ID _____

Distal Myopathy + Peripheral Neuropathy

- ☐ Distal Weakness Expanded Panel (217 genes)

Myopathies

- ☐ Myopathy Expanded Panel (141 genes)
- ☐ Muscular Dystrophy Panel (77 genes)
- ☐ Congenital Myopathy Panel (36 genes)
- ☐ Metabolic Myopathy Panel (41 genes)
- ☐ Myofibrillar Myopathy Panel (12 genes)
- ☐ Distal Myopathy Panel (27 genes)
- ☐ Emery-Dreifuss Panel (5 genes)
- ☐ Rhabdomyolysis and Myopathy Panel (31 genes)

Motor Neuron Disease

- ☐ Motor Neuron Disease Panel (17 genes)

Neuromuscular Junction

- ☐ Congenital Myasthenic Syndromes Panel (25 genes)

Hyperexcitable Muscle Disease

- ☐ Skeletal Muscle Channelopathy Panel (6 genes)

- ☐ DBMD Duchenne/Becker Muscular Dystrophy, DMD Gene, Large Deletion/Duplication Analysis
- ☐ SMNDX Spinal Muscular Atrophy Diagnostic Assay , Deletion/Duplication Analysis
- ☐ SBULB Spinal Muscular Atrophy (Kennedy Disease), Molecular Analysis

NEUROPATHY

Autoimmune Neuropathy

- ☐ AIAES Autoimmune Axonal Evaluation, Serum (LGI1, CASPR2, AChR Ganglionic, ANNA-1, ANNA-3, AGNA-1, PCA-1)

Hereditary Peripheral Neuropathy

- ☐ NPPAN Peripheral Neuropathy Genetic Panels by Next-Generation Sequencing (NGS), Blood

Select one subpanel from the list below.

- ☐ Custom Gene Panel

  Custom ID _____
- ☐ Hereditary Motor Neuropathy Panel (23 genes)
- ☐ Hereditary Sensory Neuropathy Panel (18 genes)
- ☐ Metabolic or Syndromic Neuropathies (74 genes)
- ☐ Motor and Sensory Neuropathy Panel (82 genes)
- ☐ Peripheral Neuropathy Expanded Panel (193 genes)
- ☐ SEPT9 Gene, Full Gene Analysis (1 gene)
- ☐ Spastic Paraplegia Neuropathy Panel (41 genes)

SLEEP DISORDERS

- ☐ ORXNA Orexin-A/Hypocretin-1, Spinal Fluid

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THERAPEUTIC TESTING / DRUG MONITORING

Antiepileptic Drugs

☐	AMOBS	Amobarbital, Serum
☐	CARTA	Carbamazepine, Total, Serum
☐	CDP	Chlordiazepoxide and Metabolite, Serum
☐	DIA	Diazepam and Nordiazepam, Serum
☐	ETX	Ethosuximide, Serum
☐	FELBA	Felbamate (Felbatol), Serum
☐	GABA	Gabapentin, Serum
☐	LACO	Lacosamide, Serum
☐	LAMO	Lamotrigine, Serum
☐	LEVE	Levetiracetam, Serum
☐	OMHC	Oxcarbazepine Metabolite (MHC), Serum
☐	PBR	Phenobarbital, Serum
☐	PNYA	Phenytoin, Total, Serum
☐	PRMB	Primidone and Phenobarbital, Serum
☐	SECOS	Secobarbital, Serum
☐	TOPI	Topiramate, Serum
☐	VALPA	Valproic Acid, Total, Serum
☐	ZONI	Zonisamide, Serum

Pharmacogenomics

☐	PGXFP	Focused Pharmacogenomics Panel (CYP1A2, CYP2C9, CYP2C19, CYP2D6, CYP3A4, CYP3A5, SLCO1B1, VKORC1, CYP4F2, and rs12777823)
☐	CARPB	Carbamazepine Hypersensitivity Pharmacogenomics, Blood
☐	COMTV	Catechol-O-Methyltransferase (COMT) Genotype
☐	1A2V	Cytochrome P450 1A2 Genotype
☐	2C19V	Cytochrome P450 2C19 Genotype
☐	2C9GV	Cytochrome P450 2C9 Genotype
☐	2D6CV	Cytochrome P450 2D6 (CYP2D6) Comprehensive Cascade
☐	3A4V	Cytochrome P450 3A4 Genotype
☐	3A5V	CYP3A5 Genotype
☐	TPNUV	Thiopurine Methyltransferase (TPMT) and Nudix Hydrolase (NUDT15) Genotyping
☐	WARSV	Warfarin Response Genotype

ADDITIONAL TESTS (INDICATE TEST NUMBER AND NAME)

Print

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