

Patient Information

Name (last, first, middle initial): _____

Date of birth (MM/DD/YYYY): _____ Gender: _____

Medical Record/Patient ID#: _____
A copy of the patient's demographic facesheet MUST be submitted with this form

Billing Information

Bill: Hospital* Laboratory Insurance Patient

ICD Diagnosis Codes (Enter all that apply): _____

A copy of both sides of the patient's insurance card(s) MUST be submitted with this form

*Technical component on Medical Primary will be billed directly to hospital/laboratory

Provider Information

Neurologist/Rheumatologist: _____

Address _____

Phone #: _____ Fax #: _____

Duplicate report sent to: _____

Phone #: _____ Fax #: _____

Current Medications

Exposure to corticosteroids in the past 3 months? No Yes (list dates) _____

FOR LAB USE ONLY

Lab #: _____

Test Codes: _____

Specimen Description _____

Muscle/Peripheral Nerve Biopsy

Instructions

Schedule muscle biopsy service 24 hours in advance at (502) 852-5519. The lab will receive specimens between 8 am and 3 pm, Monday–Friday. Wrap biopsy in barely moistened (saline) gauze. Place in labeled plastic container. Send immediately to SPL. Include this completed requisition and any additional patient information. Call SPL for further instructions if needed. Frozen sample may be sent out for biochemical testing or stored at –70 C for a maximum of two years.

Specimen Information

Date collected: _____ Time collected: _____

Tissue submitted: Muscle Peripheral nerve
 Fresh Frozen

Biopsy site: _____

Is tissue infectious? No Yes
Routine workup on muscle specimens includes metabolic panel (cytochrome oxidase, phosphofructokinase, myophosphorylase, succinate dehydrogenase, adenylate deaminase, oil red O, and Congo red). Please indicate if metabolic panel is not clinically relevant.

Is metabolic panel clinically relevant? No Yes

Laboratory Findings

CK: _____ ESR: _____ LHD: _____

AST: _____ ANA: _____ RF: _____

Other relevant lab findings: _____

EMG/NCS Findings

Date of EMG: _____

Results: _____

Brief Clinical History

(Presentation, duration, distribution, family history, etc; PLEASE INCLUDE COPY OF MOST RECENT H&P)

