

Neurology Specialty Testing Client Test Request

Client Information (required)

Client Name		
Client Account No.		
Client Phone	Client Order No.	
Street Address		
City	State	ZIP Code

Submitting Provider Information (required)

Submitting/Referring Provider <i>(Last, First)</i>
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Fill in only if Call Back is required.

Phone (with area code)	Fax (with area code)
National Provider Identification (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.

Ship specimens to:

Mayo Clinic Laboratories
3050 Superior Drive NW
Rochester, MN 55901

Customer Service: 800-533-1710



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

Patient Information (required)

Patient ID (Medical Record No.)		
Patient Name <i>(Last, First, Middle)</i>		
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date <i>(mm-dd-yyyy)</i>	
Collection Date <i>(mm-dd-yyyy)</i>	Time	<input type="checkbox"/> am <input type="checkbox"/> pm
Street Address		
City	State	ZIP Code
Phone		

Reason for Testing (required)

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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 <hr/> <hr/> <hr/> <hr/> <hr/>

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)

Patient Information (required)

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Patient Name (Last, First, Middle)	Client Order No.
Birth Date (mm-dd-yyyy)	

AUTOIMMUNE CNS AND PARANEOPlastic DISORDERS	
<input type="checkbox"/> ENS2	Encephalopathy, Autoimmune/Paraneoplastic Evaluation, Serum (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, Septin-7, Neurochondrin)
<input type="checkbox"/> ENC2	Encephalopathy, Autoimmune/Paraneoplastic 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, Septin-7, Neurochondrin)
<input type="checkbox"/> K11CS	Kelch-Like Protein 11 Antibody, Cell Binding Assay, Serum
<input type="checkbox"/> K11CC	Kelch-Like Protein 11 Antibody, Cell Binding Assay, Spinal Fluid
<input type="checkbox"/> GD65S	Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Serum
<input type="checkbox"/> GD65C	Glutamic Acid Decarboxylase (GAD65) Antibody Assay, Spinal Fluid
Pediatric CNS Disorders	
<input type="checkbox"/> PCDEC	Pediatric Autoimmune Encephalopathy/ CNS Disorders Evaluation, Spinal Fluid (NMDA, LGI1, CASPR2, GABA, AQP4, DPPX, mGluR1, PCA-Tr, ANNA-1, GAD65, GFAP, Neurochondrin)
<input type="checkbox"/> PCDES	Pediatric Autoimmune Encephalopathy/ CNS Disorders Evaluation, Serum (NMDA, LGI1, CASPR2, GABA, AQP4, MOG, DPPX, mGluR1, PCA-Tr, ANNA-1, GAD65, GFAP, Neurochondrin)

AUTOIMMUNE VISION LOSS	
<input type="checkbox"/> PVLE	Paraneoplastic Vision Loss Evaluation, Serum (RCVBS, CRMS)
<input type="checkbox"/> RCVBS	Recoverin-IgG Antibody by Immunoblot, Serum

DEMENTIA	
Alzheimer's Disease	
<input type="checkbox"/> ADEVL	Alzheimer's Disease Evaluation, Spinal Fluid (Abeta42, total-Tau, p-Tau181, p-Tau181/Abeta42 ratio)
<input type="checkbox"/> AMYR	Beta-Amyloid Ratio (1-42/1-40), Spinal Fluid
<input type="checkbox"/> APOEG	Apolipoprotein E Genotyping, Blood

Autoimmune Dementia	
<input type="checkbox"/> DMS2	Dementia, Autoimmune/Paraneoplastic Evaluation, Serum (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, Neurochondrin)
<input type="checkbox"/> DMC2	Dementia, Autoimmune/Paraneoplastic 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, Neurochondrin)

Creutzfeldt Jakob Disease	
<input type="checkbox"/> NSEF	Neuron-Specific Enolase (NSE), Spinal Fluid

Frontotemporal Dementia	
<input type="checkbox"/> C9ORF	C9orf72 Hexanucleotide Repeat, Molecular Analysis
<input type="checkbox"/> AFTDP	Inherited Frontotemporal Dementia and Amyotrophic Lateral Sclerosis Gene Panel (51 genes)
<input type="checkbox"/> CGPH	Custom Gene Panel, Hereditary, Next-Generation Sequencing (This test can be utilized to modify any of the above frontotemporal dementia multi-gene panels or to order a single gene from any of the above panels.)
Gene List ID: _____	

CADASIL	
<input type="checkbox"/> NTC3Z	NOTCH3 Gene, Full Gene Analysis

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

DEVELOPMENTAL DELAY	
<input type="checkbox"/> CMACB	Chromosomal Microarray, Congenital, Blood
<input type="checkbox"/> FXS	Fragile X Syndrome, Molecular Analysis
<input type="checkbox"/> PWAS	Prader-Willi/Angelman Syndrome, Molecular Analysis
<input type="checkbox"/> MCP2Z	MECP2 Gene, Full Gene Analysis

DYSAUTONOMIA	
<input type="checkbox"/> DYS2	Dysautonomia Autoimmune/Paraneoplastic Evaluation, Serum (LGI1, CASPR2, DPPX, AChR Ganglionic, ANNA-1, PCA-2, CRMP-5, AP3B2)

EPILEPSY	
Autoimmune Epilepsy	
<input type="checkbox"/> EPS2	Epilepsy, Autoimmune/Paraneoplastic Evaluation, Serum (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, mGluR1, PCA-Tr, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, Neurochondrin)
<input type="checkbox"/> EPC2	Epilepsy, Autoimmune/Paraneoplastic 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, Neurochondrin)

Hereditary Epilepsy	
<input type="checkbox"/> EPPAN	Comprehensive Epilepsy Gene Panel (319 genes)
<input type="checkbox"/> HMEP	Hemiplegic Migraine Gene Panel (9 genes)
<input type="checkbox"/> TSCP	Tuberous Sclerosis Gene Panel (2 genes)
<input type="checkbox"/> CSTB	CSTB Repeat Expansion Analysis
<input type="checkbox"/> CGPH	Custom Gene Panel, Hereditary (This test can be utilized to modify any of the above panels or to order a single gene from any of the above panels.)
Gene List ID: _____	

FOLLOW-UP TESTING - NEUROIMMUNOLOGY	
<input type="checkbox"/> PNEFS	Neuroimmunology Antibody Follow-up, Serum Specify Antibody: _____
<input type="checkbox"/> PNEFC	Neuroimmunology Antibody Follow-up, Spinal Fluid Specify Antibody: _____

MENINGITIS	
<input type="checkbox"/> CSFME	Meningitis/Encephalitis Pathogen Panel, PCR, Spinal Fluid

HEREDITARY HEARING LOSS	
<input type="checkbox"/> AHLP	AudioloGene Hearing Loss Panel, Varies

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WHOLE EXOME

WESDX Whole Exome Sequencing for Hereditary Disorders, Varies

WESR Whole Exome Sequencing Reanalysis, Varies

WHOLE GENOME

WGSDX Whole Genome Sequencing for Hereditary Disorders, Varies

WGSR Whole Genome Sequencing Reanalysis, Varies

MITOCHONDRIAL DISORDERS

GDF15 Growth Differentiation Factor 15, Plasma

MITOP Mitochondrial Full Genome Analysis by Next-Generation Sequencing (NGS)

NMITO Mitochondrial Nuclear Gene Panel by Next-Generation Sequencing (NGS)

CMITO Combined Mitochondrial Analysis, Mitochondrial Full Genome and Nuclear Gene Panel

MOVEMENT DISORDERS

Autoimmune Movement Disorders

GLYCS Glycine Receptor Alpha1 IgG, Cell Binding Assay, Serum

GLYCC Glycine Receptor Alpha1 IgG, Cell Binding Assay, Spinal Fluid

MDS2 Movement Disorder, Autoimmune/Paraneoplastic Evaluation, Serum (NMDA, LGI1, CASPR2, AMPA, GABA, DPPX, MGluR1, VGCC-P/Q, PCA-Tr, IgLON5, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, GRAF1, ITPR1, KLHL11, NIF, Septin-5, Septin-7, AP3B2, Neurochondrin)

MDC2 Movement Disorder, Autoimmune/Paraneoplastic 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, GRAF1, ITPR1, KLHL11, NIF, Septin-5, Septin-7, AP3B2, Neurochondrin)

SPPS Stiff-Person Spectrum Disorders Evaluation, including Progressive Encephalomyelitis with Rigidity and Myoclonus, Serum (GlyR, GAD65, DPPX, Amphiphysin)

SPPC Stiff-Person Spectrum Disorders Evaluation, including Progressive Encephalomyelitis with Rigidity and Myoclonus, Spinal Fluid (GlyR, GAD65, DPPX, Amphiphysin)

Hereditary Movement Disorders

FFRWB Friedreich Ataxia, Frataxin, Quantitative, Whole Blood

AFXN Friedreich Ataxia, Repeat Expansion Analysis

SCAP Spinocerebellar Ataxia Repeat Expansion Panel

SCARA Spinocerebellar Ataxia Type 1, 2, 3, 6, or 7, Repeat Expansion Analysis

ATAXP Inherited Ataxia Gene Panel (198 genes)

PARDP Inherited Parkinson Disease Gene Panel (94 genes)

ISPP Inherited Spastic Paraplegia Gene Panel (128 genes)

HAD Huntington Disease, Molecular Analysis

CGPH Custom Gene Panel, Hereditary, Next-Generation Sequencing (This test can be utilized to modify any of the above peripheral neuropathy multi-gene panels or to order a single gene from any of the above panels.)

Gene List ID: _____

MYELOPATHY

MAS1 Myelopathy, Autoimmune/Paraneoplastic Evaluation, Serum (AQP4, MOG, GABA, DPPX, mGluR1, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF, Septin-7, AP3B2, Neurochondrin)

MAC1 Myelopathy, Autoimmune/Paraneoplastic Evaluation, Spinal Fluid (AQP4, GABA, DPPX, mGluR1, ANNA-1, ANNA-2, ANNA-3, AGNA-1, PCA-1, PCA-2, CRMP-5, Amphiphysin, GAD65, GFAP, NIF, Septin-7, AP3B2, Neurochondrin)

NEURODEGENERATION

NFLC Neurofilament Light Chain, Plasma

NEUROMUSCULAR

Neuromuscular Junction Disorders

MGMR Myasthenia Gravis Evaluation with Muscle-Specific Kinase (MuSK) Reflex, Serum

MGLE Myasthenia Gravis/Lambert-Eaton Myasthenic Syndrome Evaluation, Serum

Stand-Alone Antibodies

ARBI Acetylcholine Receptor (Muscle AChR) Binding Antibody, Serum

MUSK Muscle-Specific Kinase (MuSK) Autoantibody, Serum

Autoimmune Neuromuscular

Immune-Mediated Necrotizing Myopathy

NMS1 Necrotizing Myopathy Evaluation, Serum (HMGR, SRP)

Hereditary Neuromuscular

MUPAN Comprehensive Neuromuscular Gene Panel (217 genes)

Motor Neuron Disease

MNDP Inherited Motor Neuron Disease Gene Panel (34 genes)

SOD1Z *SOD1* Gene, Full Gene Analysis

C9ORF *C9orf72* Hexanucleotide Repeat, Molecular Analysis

SMNDX Spinal Muscular Atrophy Diagnostic Assay, Deletion/Duplication Analysis

SBULB Spinobulbar Muscular Atrophy (Kennedy Disease), Molecular Analysis

Myopathy

RABMP Inherited Rhabdomyolysis and Metabolic Myopathy Panel (84 genes)

Neuromuscular Junction

CMSP Inherited Congenital Myasthenic Syndrome Gene Panel (28 genes)

LGCMP Inherited Limb-Girdle Muscular Dystrophy and Congenital Myasthenic Syndrome Gene Panel (65 genes)

Muscular Dystrophy

MDYSP Inherited Muscular Dystrophy Gene Panel (75 genes)

LGCMP Inherited Limb-Girdle Muscular Dystrophy and Congenital Myasthenic Syndrome Gene Panel (65 genes)

EDMDP Inherited Emery-Dreifuss Gene Panel (7 genes)

DMDZ *DMD* Gene, Full Gene Analysis

DBMD Duchenne/Becker Muscular Dystrophy, *DMD* Gene, Large Deletion/Duplication Analysis

Hyperexcitable Muscle Disease

SMCP Inherited Skeletal Muscle Channelopathy Gene Panel (5 genes)

CGPH Custom Gene Panel, Hereditary (This test can be utilized to modify any of the neuromuscular multi-gene panels or to order a single gene from any of the above panels.)

Gene List ID: _____

