



Michigan Medicine Laboratories (MLabs)

mllabs.umich.edu
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ALLERGEN REQUISITION

SPECIMEN SHIPMENTS ONLY:

N-LNC Specimen Processing, 2800 Plymouth Rd, Bldg 35, Ann Arbor, MI 48109-2800

Client information form including Patient Reg or MRN, Patient Name (Last, First, MI), Birthdate, Gender (OM, OF), Ordering Doctor (Last, First, NPI#), Ordering Doctor (Phone, Fax), and Collected By, Collection Date, Collection Time (Oam, Opm).

Insurance information form including Patient Address, City, State, ZIP, Home Phone #, Policy Holders Name, Primary Insurance (Card Name), Primary Policy/Contract #, Primary Group #, Policy Holders DOB, Secondary Insurance (Card Name), Secondary Policy/Contract #, Secondary Group #, Policy Holders DOB.

Bill To: Client/Referring Institution or Patient/Insurance. Includes checkboxes for Medicare, In Patient on DOS, Out Patient on DOS, Non Patient on DOS. Note: If patient or insurance information is not included or attached to this form, your facility will be billed.

ICD-10 CODES

ICD-10 Codes are required for billing. When ordering tests for which reimbursement will be sought, order only tests that are medically necessary for the diagnosis and treatment of the patient.

All Allergen Testing performed at MLabs is IgE. Specific requests for IgG or other allergens not listed will be sent to another reference lab.

Main allergen testing list with categories: FOOD - DAIRY, FOOD - GRAIN, FOOD - NUT, FOOD - SEAFOOD, FOOD - VEGETABLE, FOOD - OTHER, ANIMAL EPITHELIUM, HOUSE DUST & MOLD, INSECT VENOM, TREE, WEED, MISC - OTHER, MULTIPLE ALLERGEN PANELS, and ALLERGY PANELS.