



Michigan Medicine Laboratories (MLabs)

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MMGL BIOCHEMICAL & SELECT MOLECULAR GENETICS REQUISITION

SPECIMEN SHIPMENTS ONLY:

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

Client information fields: Patient Registration No. or MRN (Client Facility), Patient Michigan Medicine MRN (if known), Patient Name: Last First MI, Birthdate, Gender: OM OF, Ordering Provider: Last First NPI#

Collected By Collection Date Collection Time Oam Opm Ordering Provider UM Doctor/InBox ID number (if known):

Bill To: Client (Referring Institution), Patient Self-Pay: client attests that patient has been informed of charges to be billed by Michigan Medicine, Patient Insurance: attach complete patient and insurance demographics

MLabs requires complete patient demographics, insurance information and ICD-10 diagnosis codes to bill the patient or their insurance carrier. MLabs reserves the right to bill the client if this information is not provided or if we are unable to bill successfully.

Prior Authorization: Most insurance carriers require prior authorization to reimburse molecular or genetic testing. Prior Authorization obtained. Authorization number: MLabs to apply for Prior Authorization, please attach: MLabs Clinical History Form, A copy of the patient's most recent comprehensive medical record...

Informed Consent: A consent form is required by Michigan law for presymptomatic or predictive genetic tests. It is the responsibility of the physician (or designee) to obtain this consent. Informed consent obtained (please attach a copy).

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.

ADDITIONAL INSTRUCTIONS OR INFORMATION:

REFERRING PROVIDER OR GENETIC COUNSELOR TO BE CONTACTED WITH RESULTS AND/OR QUESTIONS

Referring Provider or Genetic Counselor Referring Provider or Genetic Counselor UM Doctor/InBox ID number (if known):

Referring Institution Phone Fax Address City State ZIP Country

This request to order tests from MLabs certifies to MLabs that (1) the ordering physician has obtained written informed consent from the patient as required by applicable state or federal laws for each test ordered and (2) the ordering physician has authorization from the patient permitting MLabs to report results for each test ordered to the ordering physician.

PATIENT HISTORY/DIAGNOSIS

Diagnosis: Footnote: Case/Accn

All Molecular tests include a pathologist interpretation at a separate additional charge.

BIOCHEMICAL GENETICS

- Acylcarnitines, Plasma
Amino Acids, Quantitative, CSF
Amino Acids, Quantitative, Plasma
Amino Acids, Quantitative, Urine
Biotinidase, Plasma
Methylmalonic Acid (MAA), Serum
Organic Acids, Quantitative, Urine
Orotic Acid, Qualitative, Urine
Succinylacetone, Qualitative, Urine

Other:

MOLECULAR GENETICS

- Chromosomal Microarray Analysis, Germline (GDCMA)
Beckwith-Wiedemann Syndrome Analysis
Fragile X Syndrome Mutation
MECP2 (Rett Syndrome)
Gene Sequencing
Deletion/Duplication
Targeted Sequencing Familial
Prader-Willi/Angelman Syndrome Analysis

PTEN Hamartoma Tumor Syndrome

- Gene Sequencing
Deletion/Duplication
Targeted Sequencing Familial
Russell-Silver Syndrome Analysis
Molecular Genetics Clinical Identification of a Familial Mutation (CLIFS)

Contact MMGL at 734-615-2429 prior to sending samples for new CLIFS testing. A known positive control sample must also be provided.

Specimen Type: G = Green top (sodium heparin) L = Lavender top (EDTA) S/R = SST or Red top U = Urine C = CSF

Specimen type for Biochem Genetics tests is CSF (C) or Urine (U) if specified in the test name, for all of the Plasma assays it is G, for Methylmalonic Acid it is S/R. Specimen type for all Molecular Genetics tests is L.