



PRO5200003200431

DRS DU BUISSON, KRAMER, SWART, BOUWER INC.

REFERRING DOCTOR

COPY DOCTOR

PLACE BARCODE HERE

CLINICAL
DIAGNOSIS/
MEDICATION

ICD-10 CODES

MEDICAL AID

PLAN

DEP.
CODE

MEDICAL AID NO.

MEDICAL AID AUTH.

STAT

ROUTINE

PATIENT DETAILS

ID NUMBER

SURNAME

TITLE

INITIALS & FIRST
NAME

AGE

SEX ASSIGNED
AT BIRTH

M

F

D
D
M
M
Y
Y
Y
Y

DATE OF BIRTH

HOSPITAL/
FOLIO NO.

CELL

(W)

EMAIL

GUARANTOR
ID NUMBER

SURNAME

INITIALS & FIRST
NAMEPOSTAL
ADDRESS

CELL

(W)

EMAIL

TITLE

POSTAL
CODE

PATIENT/GUARDIAN SIGNATURES:

I confirm acceptance of the informed consent available at ampath.co.za. I verify that all personal information is correct.

Y

N

PHLEBOTOMY SITE	COLL. DATE	D D M M Y Y Y Y	FASTING	Y N	PREGNANT	Y N	REC. DATE	D D M M Y Y Y Y
	COLL. TIME	COLL. BY	THYROID	Y N	ON ANTI COAGULANT	Y N	REC. TIME	REC. BY
HOSPITAL PATIENT	Y N	NO OF TUBES DRAWN	S01 (Y) S02 (Y) E01 (Y) E02 (Y) HEP (Y) CIT (Y) FLU (Y) MICRO / OTHER (Y)					TEST COUNT

INHALANT ALLERGENS: SYMPTOMS INCLUDE ASTHMA, RHINITIS & CONJUNCTIVITIS

PHAD	<input type="checkbox"/> Phadiatop IgE screen WITH breakdown if positive SAARWG/ALLSA recommended panel: Bermuda grass, rye grass, mites (D. pteronyssinus and B. tropicallis), moulds (Alternaria and Aspergillus), cat, dog and tree pollen (Plane and cypress tree)
PHADNS	<input type="checkbox"/> Phadiatop IgE screen ONLY, no breakdown
POLM	<input type="checkbox"/> Pollen screen Includes grass, tree and weed mixes, reported individually
TREM1	<input type="checkbox"/> Tree pollen mix 1 Screen Includes olive, willow, white pine, eucalyptus (gum-tree), acacia and melaleuca (cajeput-tree)
TREM2	<input type="checkbox"/> Tree pollen mix 2 Screen Includes oak, elm, maple leaf sycamore (London plane), willow and cottonwood
ASP+	<input type="checkbox"/> Allergic bronchopulmonary aspergillosis (ABPA) Includes Aspergillus fumigatus IgG + IgE + rAsp f6 IgE
ASPF1GG+	<input type="checkbox"/> CAST/BAT inhalant mix screen ONLY
ASPF6	<input type="checkbox"/> Cat, dog, grass (grass mix), pollen (common birch tree and hazel tree), mites (D. pteronyssinus and D. fariniae) and mould (Alternaria)
INHMCT	<input type="checkbox"/> CAST/BAT inhalant mix screen ONLY
CELLCOM	<input type="checkbox"/> CAST/BAT inhalant mix screen positive, breakdown (please indicate which allergens)

FOOD ALLERGENS: INCLUDES GIT, ORAL SYMPTOMS AND URTICARIA

PED	<input type="checkbox"/> Food IgE screen WITH breakdown if positive Includes egg white, milk, peanut, wheat, soy and codfish. Positive allergens will be broken down into clinically relevant components.
PEDNS	<input type="checkbox"/> Food IgE screen ONLY, no breakdown
EGGW	<input type="checkbox"/> Egg White IgE
OVO	<input type="checkbox"/> Ovomucoid IgE
MILK	<input type="checkbox"/> Cow's Milk IgE
CAS	<input type="checkbox"/> Casein IgE
WHE	<input type="checkbox"/> Wheat IgE
OMA5	<input type="checkbox"/> Omega-5-gliadin IgE
PNUT	<input type="checkbox"/> Peanut IgE
PNUTR	<input type="checkbox"/> Peanut (Ara h 2) IgE
COD	<input type="checkbox"/> Codfish IgE
CODR	<input type="checkbox"/> Fish parvalbumin IgE
NUTM	<input type="checkbox"/> Nut mix Includes peanut, hazelnut, brazilnut, almond and coconut
SEAFOOD	<input type="checkbox"/> Seafood mix Includes codfish, tuna, salmon, shrimp, blue mussel. Anisakis (fish parasite) and squid/calamari will be reported separately.
FISHA	<input type="checkbox"/> Fish Includes individual allergens: codfish, salmon, tuna, trout, hake and anisakis
SFA	<input type="checkbox"/> Shellfish Includes individual allergens: shrimp, lobster, crab, blue mussel and clam
GLU+	<input type="checkbox"/> Gluten sensitivity Includes gluten IgE, gluten CAST/BAT and TTG IgA, endomysial IgA, gliadin IgA and total IgA
GLUCT+	<input type="checkbox"/> Coeliac
COELIAC	<input type="checkbox"/> Citrus Fruit Includes individual allergens: orange, lemon and grapefruit
CITA	<input type="checkbox"/> FOODMCT
FOODMCT	<input type="checkbox"/> CAST/BAT food mix screen ONLY Includes egg white, egg yolk, milk, peanut, wheat, soy, codfish, shrimp and hazelnut

CELLCOM	<input type="checkbox"/> CAST/BAT food mix screen positive, breakdown (please indicate which allergens)	MEPCT <input type="checkbox"/> Mepivacaine
COLACT	<input type="checkbox"/> CAST/BAT colourants	ANALGESICS (CAST/BAT)
PRESCT	<input type="checkbox"/> CAST/BAT preservatives Includes tartrazine, Na-benzoate, Na-nitrate, K-metabisulfite, Na-salicylate and MSG	NSAIDCT <input type="checkbox"/> Non-steroidal anti-inflammatory drugs Includes aspirin, ibuprofen and diclofenac, reported individually
ALEX	<input type="checkbox"/> ALEX (~295 allergens) Comprehensive multiplex allergy panel: Includes inhalant, food and insect venom allergens (whole extract and molecular component IgE) Only 0.5 ml blood required (SST)	PARACT <input type="checkbox"/> Paracetamol
ALEX	<input type="checkbox"/> ALEX (~295 allergens) Comprehensive multiplex allergy panel: Includes inhalant, food and insect venom allergens (whole extract and molecular component IgE) Only 0.5 ml blood required (SST)	IOHEXCT <input type="checkbox"/> Iohexol (Omnipaque) Radiocontrast media (RCM)
T2 INFLAMMATION	CELLCOM <input type="checkbox"/> Other RCM please specify:	CELLCOM <input type="checkbox"/> Other RCM please specify:
FBC	<input type="checkbox"/> FBC	PEG2000CT <input type="checkbox"/> Poly-ethylene glycol 2000 (PEG) Preservative in mRNA vaccines and drugs
SPUEOS	<input type="checkbox"/> Sputum eosinophil	DIVERSE (CAST/BAT)
FENO	<input type="checkbox"/> FeNO	DIVCT <input type="checkbox"/> Other drugs: please specify Any drug in tablet/capsule and liquid form can be tested. Include relevant medication with blood specimens.
MISCELLANEOUS	IGE <input type="checkbox"/> Total IgE	DIVW <input type="checkbox"/> Diverse T-cell Allergy (suspected T-cell mediated food and drug allergy) Please specify:
	<input type="checkbox"/> Mast cell tryptase First sample within 30 min - 2 hrs after reaction, follow-up with a repeat >24 hours	
	<input type="checkbox"/> Insect venom IgE Includes honey bee, common wasp, paper wasp, yellow hornet and white faced hornet	
HBEECT	<input type="checkbox"/> Bee venom CAST/BAT	
RARECT	<input type="checkbox"/> Wasp venom CAST/BAT	
ALPHAG	<input type="checkbox"/> Alpha-Gal IgE (meat allergy)	
DIVG4	<input type="checkbox"/> Immunotherapy monitoring: Allergen specific IgG4, please specify:	
VENA	<input type="checkbox"/> Allergen specific IgG, please specify:	
	HYPERSENSITIVITY PNEUMONITIS	
MILKIGG	<input type="checkbox"/> Heiner syndrome (Milk induced pneumonitis)	METAL LPT TESTS An extensive list of metal allergens is available, please enquire via cellular lab (Tel: 012 678 0530)
BUDMG +	<input type="checkbox"/> Bird fancier's lung	<input type="checkbox"/> Nickel
PIGMG +	<input type="checkbox"/> Includes budgie, pigeon and parrot	<input type="checkbox"/> Titanium / Titanium alloy
PARMG	<input type="checkbox"/> IgG mixes (serum proteins, feathers and droppings)	<input type="checkbox"/> Titanium IV dioxide and oxysulfate
DIVG	<input type="checkbox"/> Allergen specific IgG, please specify:	<input type="checkbox"/> ALW
LAT	<input type="checkbox"/> Latex IgE	<input type="checkbox"/> CRW
CELLCOM	<input type="checkbox"/> Occupation specific allergens available, please specify:	<input type="checkbox"/> COWS
	DRUG ALLERGIES	<input type="checkbox"/> ZRW
	ANTIBIOTICS	<input type="checkbox"/> CELLCOM
	PEN <input type="checkbox"/> Penicillin IgE (PenV + PenG)	<input type="checkbox"/> Other, please specify (prostheses and dental implants specific metal profiles available)
	PENCT <input type="checkbox"/> Penicillin CAST/BAT	
	<input type="checkbox"/> Includes Co-amoxycloclav, penicillin metabolites and penicillin ring structures, reported individually	
	SULFACT <input type="checkbox"/> Sulfonamides CAST/BAT	
	<input type="checkbox"/> Includes sulfamethoxazole and trimethoprim, reported individually	
	CELLCOM <input type="checkbox"/> Other Antibiotics, please specify:	
	ANAESTHETICS (CAST/BAT)	
GENAMCT	<input type="checkbox"/> General anaesthetic mix	ALLSK
	<input type="checkbox"/> Includes propofol, suxamethonium and muscle relaxants	<input type="checkbox"/> Inhalant skin prick test (Long) Cat, dog, cockroach, feather mix, grass (grass mix and Bermuda grass), pollen (maize, weed, plane tree, oak tree, olive tree and cypress tree), mites (B. tropicallis and D. pteronyssinus) and mould (Alternaria, Cladosporium and Aspergillus)
POAP	<input type="checkbox"/> Perioperative Allergy Profile	<input type="checkbox"/> Inhalant skin prick test (Short) prior Cat, dog, cockroach, feather mix, grass (grass mix and Bermuda grass), mites (B. tropicallis and D. pteronyssinus) and mould (Alternaria)
	<input type="checkbox"/> Includes General Anaesthetic Mix CAST, chlorhexidine CAST, chlorhexidine IgE and latex IgE, reported individually	<input type="checkbox"/> FOODSK
CHLORCT	<input type="checkbox"/> Chlorhexidine CAST	<input type="checkbox"/> Food skin prick test (Long) Includes whole egg, milk, peanut, wheat, soy, codfish, prawn, corn, potato, tomato, orange, apple and banana
CHLORH	<input type="checkbox"/> Chlorhexidine IgE	<input type="checkbox"/> PEDSK
PROPTC	<input type="checkbox"/> Propofol	<input type="checkbox"/> Food skin prick test (Short) Includes whole egg, milk, peanut, wheat, soy and codfish
SUXCT	<input type="checkbox"/> Suxamethonium	
ROCCCT	<input type="checkbox"/> Rocuronium	
LIDOCT	<input type="checkbox"/> Lignocaine	
RARECT	<input type="checkbox"/> Bupivacaine	
	OTHER TESTS: PLEASE SPECIFY	
		<input type="checkbox"/> For further allergy enquiries contact Immunology: Tel: 012 678 0614/3