# MEDICAL GENETICS REQUISITION

SANFORD Laboratories
(877) 392-1234

PATIENT'S LEGAL NAME: LAST FIRST MIDDLE

SEX | BIRTHDATE | CHART NO. | PROVIDER NAME: LAST FIRST

BILL TO:

☐ C Client - Clinic - Doctor - Hospital Part A Medicare Patient

☐ P Patient - Insurance - Medicare - Medicaid - Other

**PLEASE INCLUDE FRONT AND BACK SCAN OF INSURANCE CARD**

GUARANTOR NAME | PHYSICIAN NPI# OR IA MEDIPASS

ADDRESS

CITY STATE ZIP

PATIENT / GUARANTOR PHONE NUMBER | GUARANTOR DOB

MEDICAID NUMBER | MEDICARE NUMBER | POLICY HOLDER DOB

OTHER INSURANCE | POLICY HOLDER

INSURANCE MAILING ADDRESS

GROUP NUMBER | I.D. NUMBER

PATIENT - GUARANTOR RELATIONSHIP
☐ SELF ☐ SPOUSE ☐ CHILD ☐ OTHER Specify_____

Diagnoses/Signs/Symptoms/ICD-10.
Indicate which Diagnosis # [DX#] applies to each test(s)

DX #1

DX #2

DX #3

SPECIMEN DATE | SPECIMEN TIME (MILITARY) | SPECIMEN INFORMATION
☐ BLOOD IN 1 EDTA & 1 HEPARIN TUBE
☐ BLOOD IN 1 HEPARIN TUBE FOR FISH OR CHROMOSOME ANALYSIS

## TEST MENU

| | | | |
|---|---|---|---|
| ☐ LBOR0208 | CHROMOSOME MICROARRAY, CONGENITAL | ☐ LBOR0219 | WILLIAMS SYNDROME, 7Q11.23 DELETION, FISH |
| ☐ LBOR0216 | CHROMOSOME ANALYSIS, CONGENITAL DISORDERS | ☐ LBOR0239 | CHROMOSOME MICROARRAY WITH 5-CELL ANALYSIS REFLEX, CONGENITAL |
| ☐ LBOR0217 | CHROMOSOME MICROARRAY (CMA) FAMILIAL TESTING, FISH | ☐ LBOR0220 | SEX-DETERMINING REGION Y, YP11.3 DELETION, FISH AND CHROMOSOME ANALYSIS, CONGENITAL |

## CLINICAL INFORMATION

SUSPECTED SYNDROME(S):_____

OTHER MEDICAL PROBLEMS:_____

FAMILY HISTORY:_____

PREVIOUS CYTOGENETICS RESULTS:_____

## INDICATION(S) FOR TESTING

### *CYSTIC HYGROMA*
- ☐ Congenital diaphragmatic hernia
- ☐ Encephalocele
- ☐ Growth delay
- ☐ Increase nuchal translucency
- ☐ Intrauterine growth restriction
- ☐ Neural tube defect
- ☐ Omphalocele
- ☐ Infertility
- ☐ Oligohydramnios
- ☐ Polyhydramnios
- ☐ Other:_____

### *STRUCTURAL BRAIN ABNORMALITIES*
- ☐ Abnormal corpus callosum morphology
- ☐ Holoprosencephaly
- ☐ Hydrocephalus
- ☐ Lissencephaly
- ☐ Pachygyria
- ☐ Other:_____

### *DEVELOPMENTAL/BEHAVIORAL FINDINGS*
- ☐ Attention deficit hyperactivity disorder
- ☐ Autism spectrum disorder/autistic behavior
- ☐ Behavioral abnormality
- ☐ Delayed fine motor development
- ☐ Delayed gross motor development
- ☐ Delayed speech & language development
- ☐ Developmental regression
- ☐ Failure to thrive
- ☐ Gait disturbance
- ☐ Global developmental delay
- ☐ Hyperactivity
- ☐ Intellectual disability
- ☐ Obsessive-compulsive behavior
- ☐ Oppositional defiant disorder
- ☐ Sleep disturbance
- ☐ Specific learning disability
- ☐ Other:_____

### *HEARING IMPAIRMENT*
- ☐ Conductive hearing impairment, bilateral
- ☐ Sensorineural hearing impairment, bilateral
- ☐ Other:_____

### *METABOLIC ISSUES/MITO*
- ☐ Elevated CPK:_____
- ☐ Other:_____

### *NEUROLOGICAL FINDINGS*
- ☐ Abnormality of the nervous system
- ☐ Anosmia
- ☐ Ataxia
- ☐ Cerebral palsy
- ☐ Encephalopathy
- ☐ Epileptic encephalopathy
- ☐ Hypertonia
- ☐ Hypotonia
- ☐ Peripheral neuropathy
- ☐ Seizure
- ☐ Spasticity
- ☐ Other:_____

### *CRANIOFACIAL DYSMORPHISM*
- ☐ Abnormal facial shape (dysmorphic features)
- ☐ Brachycephaly
- ☐ Cleft lip
- ☐ Cleft palate
- ☐ Craniosynostosis
- ☐ External ear malformation
- ☐ Macrocephaly
- ☐ Microcephaly
- ☐ Other:_____

### *MUSCULOSKELETAL FINDINGS*
- ☐ Clinodactyly
- ☐ Craniosynostosis
- ☐ Hemihypertrophy
- ☐ Hypertonia
- ☐ Joint hypermobility
- ☐ Muscular hypotonia
- ☐ Pectus excavatum
- ☐ Polydactyly
- ☐ Scoliosis
- ☐ Short stature
- ☐ Syndactyly
- ☐ Talipes equinovarus
- ☐ Clubbing
- ☐ Limb joint contracture
- ☐ Tall stature
- ☐ Other:_____

### *ENDOCRINE FINDINGS*
- ☐ Abnormality of the endocrine system
- ☐ Delayed puberty
- ☐ Precociouos puberty
- ☐ Other:_____

### *CARDIAC FINDINGS*
- ☐ Abnormal heart morphology
- ☐ Atrial septal defect
- ☐ Cardiomyopathy
- ☐ Coarctation of aorta
- ☐ Supravalvular aortic stenosis
- ☐ Tetralogy of Fallot
- ☐ Ventricular septal defect
- ☐ Other:_____

### *GASTROINTESTINAL FINDINGS*
- ☐ Aganglionic megacolon
- ☐ Failure to thrive
- ☐ Tracheoesophageal fistula
- ☐ Anal atresia
- ☐ Gastroschisis
- ☐ Other:_____

### *SKIN/HAIR FINDINGS*
- ☐ Café-au-lait spot
- ☐ Cutis laxa
- ☐ Hyperpigmentation of the skin
- ☐ Hypopigmentation of the skin
- ☐ Ichthyosis
- ☐ Sparse hair
- ☐ Other:_____

### *EYE DEFECTS/VISION*
- ☐ Abnormality of vision
- ☐ Aniridia
- ☐ Coloboma
- ☐ Esotropia
- ☐ Microphthalmia
- ☐ Abnormal retinal morphology
- ☐ Retinitis pigmentosa
- ☐ Other:_____

For additional information regarding complete test menu, specimen requirements, billing and compliance, please visit our website at laboratories.sanfordhealth.org.