Advanced Diagnostic Laboratories National Jewish Health®

Complement Laboratory | 800.550.6227 | 303.270.2185 fax | njlabs.org

SHIP TO: National Jewish Health
Complement Laboratory
1400 Jackson Street, Room D411
Denver, CO 80206

1. PATIENT INFORMATION

Patient Name (Last, First) ☐ Male ☐ Female DOB __ __ / __ __ / __ __ __ __

2. BILLING INFORMATION - INSTITUTIONAL BILLING ONLY

National Jewish Health Advanced Diagnostic Laboratories does not bill patients directly or third-party health insurance. Visit njlabs.org or call for details.

Account Name

Address

City State Zip

Billing Contact

PO # Account #

3. REPORT DELIVERY INFORMATION

Attention

Account Name

Address

City State Zip

☐ Duplicate Report Requested

Name

Phone Secure Fax

4. SPECIMEN INFORMATION

Specimen Source: ☐ Serum ☐ Plasma ☐ Whole Blood (Refer to sections 5–10 for appropriate specimen sources.)

Submitted By Phone Fax

Submitter Specimen # Actual Specimen Collection Date Collection Time

5. TOTAL COMPLEMENT ASSAYS – SERUM SPECIMENS REQUIRED

☐ CH50	Total classical pathway activity by hemolytic titration	☐ AH50	Alternative pathway activity by hemolytic titration

6. FUNCTIONAL ASSAYS FOR INDIVIDUAL COMPONENTS – SERUM SPECIMENS REQUIRED

☐ C1QH	C1q function by hemolytic assay	☐ C5F	C5 function by hemolytic assay	☐ PFBF	Factor B function by hemolytic assay
☐ C1F	C1 function by hemolytic assay	☐ C6F	C6 function by hemolytic assay	☐ FDF	Factor D function by hemolytic assay
☐ C2F	C2 function by hemolytic assay	☐ C7F	C7 function by hemolytic assay	☐ CEICHR	C1 esterase inhibitor function, Chromogenic
☐ C3F	C3 function by hemolytic assay	☐ C8F	C8 function by hemolytic assay	☐ C59S	Rapid screen for deficiency of late components (C5, C6, C7, C8, C9, CH50)
☐ C4F	C4 function by hemolytic assay	☐ C9F	C9 function by hemolytic assay		

7. AUTOANTIBODIES TO COMPLEMENT COMPONENTS – SERUM SPECIMENS REQUIRED

☐ C3NEF	C3 nephritic factor by Immunofixation Electrophoresis	☐ C1QAB	Autoantibody to *C1q* by ELISA (C1q-CLR)	☐ CEIAP	Autoantibody to *C1-inhibitor* by ELISA
				☐ FHAB	Autoantibody to Factor H by ELISA

8. COMPLEMENT KIDNEY PANELS – SEE INDIVIDUAL TESTS FOR SPECIMEN SOURCE REQUIREMENTS

☐ C3GN	C3 Glomerulopathy C3GN, DDD or Unknown Subclass Panel includes AH50, CH50, PFBF, FDF, C3NEF, FH, FIL, PROP, CD46, SC5B9 *Specimen sources required: serum, plasma and whole blood*	☐ LNP	Lupus Nephritis Panel includes C3NEF, CIC, C1QAB *Specimen sources required: serum and plasma*
		☐ AHUS	aHUS Panel includes FH, FIL, PROP, NC3L, CD46 *Specimen sources required: plasma and whole blood*

9. INDIVIDUAL COMPLEMENT SPLIT PRODUCT LEVELS – PLASMA SPECIMENS REQUIRED

☐ C3AL	C3a desArg level by RIA	☐ IC3B	iC3b level by ELISA	☐ SC5B9	SC5b-9 level by ELISA
☐ C4AL	C4a desArg level by RIA	☐ C4D	C4d level by ELISA	☐ C4RAT	Ratio of C4d to C4
☐ C5AL	C5a desArg level by RIA	☐ BBLL	Bb level by ELISA		

10. CONCENTRATIONS OF INDIVIDUAL COMPONENTS – PLASMA SPECIMENS REQUIRED, UNLESS INDICATED

☐ C1Q	C1q level by RID	☐ C7L	C7 level by RID	☐ FIL	Factor I level by RID
☐ C1RL	C1r level by RID	☐ C8L	C8 level by RID	☐ PROP	Properdin level by ELISA
☐ C1SL	C1s level by RID	☐ C9L	C9 level by RID	☐ FBL	Factor B level by RID
☐ C2L	C2 level by RID	☐ CEIQ	C1-esterase inhibitor level by RID (C1-INH)		
☐ C3	C3 level by nephelometry *Specimen source required: serum*	☐ CIC	Circulating immune complexes (C1q-binding and C3d)		
☐ C4	C4 level by nephelometry *Specimen source required: serum*	☐ MLEC	Mannose binding lectin by ELISA *Specimen source required: serum*		
☐ C5L	C5 level by RID	☐ FDL	Factor D level by ELISA		
☐ C6L	C6 level by RID	☐ FH	Factor H level by RID		

INTERNAL USE ONLY

11. SPECIAL INSTRUCTIONS