

Clinical Laboratory Stem Cell Request

 STATCALL POSITIVE HPC STERILITY RESULTS TO 303.266.4162 APP PAGER.

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Ordering physician (required)		UPI # (required)	Ordering unit/clinic
Collection date	Time		Collected by
ICD-10 Code(s)		Physicians should only order tests medically necessary for the treatment or diagnosis of the patient. For outpatient services only, enter the appropriate ICD-10 code(s) which demonstrate the medical necessity of each test ordered (required).	

Specimen type: Serum Plasma Whole Blood Bone marrow, site _____
 HPC CB Parathyroid
 Other _____

MNEMONIC DESCRIPTION		ICD-10 CODE
Tests Ordered by Apheresis Tech		
LAB54	<input type="checkbox"/> Ionized Calcium Whole Blood	
LAB210	<input type="checkbox"/> CBC plus WBC Differential	
LAB708	<input type="checkbox"/> Product CBC	
LAB6364	<input type="checkbox"/> HPC Product CD34 – Mid Run	
LAB3056	<input type="checkbox"/> Stem Cell CD34 (CD34, Peripheral Blood) (CBC [LAB210] must be ordered and collected at the same time)	
LAB8027	<input type="checkbox"/> Pre-CAR T-CELL	
LAB3524	<input type="checkbox"/> HPC – Apheresis, Cryopreserved	
LAB3372	<input type="checkbox"/> HPC Product CD3 (CD3 Allo)	
Tests Ordered by CLINIMMUNE Lab		
LAB210	<input type="checkbox"/> CBC plus WBC Differential	
LAB708	<input type="checkbox"/> Product CBC	
LAB250	<input type="checkbox"/> Gram Stain (Site____)	
DVC1004	<input type="checkbox"/> White Blood Count HPC – Mid Run	
LAB3524	<input type="checkbox"/> HPC – Apheresis, Cryopreserved	
LAB3372	<input type="checkbox"/> HPC Product CD34 – Ordered on Mini-Allo (DLI)	
LAB895	<input type="checkbox"/> ABO Rh type	
LAB931	<input type="checkbox"/> T-Cell Panel (Product CBC [LAB708] must be ordered and collected at the same time)	
Tests Ordered by UCH Clinical Laboratory Specimen Processing		
LAB8603	<input type="checkbox"/> Blood Culture HPC (Site____)	
LAB3535	<input type="checkbox"/>	

Product collected for recipient _____ MRN _____

