

## **University of Colorado Hospital**

Clinical Laboratory Stem Cell Reques	t
□ STAT	

	Patient Identification Label					
Name						
MRN						
DOB						
Date of service						

## CALL POSITIVE <u>HPC</u> STERILITY RESULTS TO 303.266.4162 APP PAGER.

CLINIMMUNE STEM CELL LAB: clinimQU-DG@ucdenver.edu

		Sabine S Cameror	tockinger White	303.724. 303.724.					
Ordering physician (required)				UPI # (required)		Ordering uni	Ordering unit/clinic		
Collection date Time			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	e: □ Serum □ HPC	□ Plasma	□ Whole		□ Bone	marrow, site			
				•					
MNEMONIC DESCRIPTION Tests Ordered by Apheresis Tech						ICD-10 CODE			
LAB54	☐ Ionized Calci	um Whole Bloo	d						
LAB210	☐ CBC with Manual Diff if Auto Diff Fails								
LAB708	□ Product CBC								
LAB3732	☐ HPC Product CD34 – Mid Run								
LAB3056	☐ Stem Cell CD34 (CD34, Peripheral Blood) (CBC [LAB210] must be ordered and collected at the same time)								
	ed by CLINIMMU								
LAB210	☐ CBC with Manual Diff, if Auto Diff fails								
LAB708	□ Product CBC								
LAB250	□ Gram Stain (Site)								
DVC1004	☐ White Blood Count HPC – Mid Run								
LAB3524	☐ HPC – Apheresis, Cryopreserved								
LAB3372	☐ HPC Product CD3 – Ordered on Mini-Allo (DLI)								
LAB895	☐ ABO Rh type								
	☐ T-Cell Panel (Product CBC [LAB708] must be ordered and collected at the same time)								
Tests Ordere	ed by UCH Clini	cal Laborator	y Specime	n Proces	sing				
LAB8603	☐ Blood Culture	e HPC (Site			)				
LAB3535	□ Pathology Re	view Stem							
Product collec	ted for recipient						MRN		