

# Test Requisition

## INTERNATIONAL



PROMETHEUS®  
Therapeutics & Diagnostics

### LABORATORY INFORMATION

LABORATORY NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ SUITE/OFFICE NO \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### PHYSICIAN INFORMATION

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ SUITE/OFFICE NO \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### ANSER® TESTS

#### PRESCRIBING INFORMATION

PRESCRIPTION \_\_\_\_\_

INFUSION/INJECTION DATE (MONTH/DAY/YEAR) \_\_\_\_\_ DOSE (MG/KG) \_\_\_\_\_

FREQUENCY \_\_\_\_\_ ROUTE OF ADMINISTRATION \_\_\_\_\_

EVERY \_\_\_\_\_ WEEKS \_\_\_\_\_

REASON FOR ORDER \_\_\_\_\_

LOSS OF RESPONSE	INFUSION/ALLERGIC REACTION	RESTART AFTER DRUG HOLIDAY
RELAPSE	DISEASE MONITORING	SIDE EFFECTS

CHECK THE APPROPRIATE TEST(S) TO BE PERFORMED (SPECIMEN COLLECTION REQUIREMENTS ON BACK)

ANSER® ADA

**PROMETHEUS® Anser® ADA - #3170**  
Simultaneously measures adalimumab (ADA) and antibodies to adalimumab (ATA) levels in serum.

ANSER® IFX

**PROMETHEUS® Anser® IFX - #3150**  
Simultaneously measures infliximab (IFX)/infliximab biosimilar and antibodies to infliximab (ATI) levels in serum.

**SELECT MEDICATION:**

REMICADE® (INFLIXIMAB)      INFLIXIMAB BIOSIMILAR  
Anser® IFX has been validated for use in patients treated with infliximab biosimilars.

ANSER® UST

**PROMETHEUS® Anser® UST - #3190**  
Simultaneously measures ustekinumab (UST) and antibodies to ustekinumab (ATU) levels in serum.

NEW

ANSER® VDZ

**PROMETHEUS® Anser® VDZ - #3180**  
Simultaneously measures vedolizumab (VDZ) and antibodies to vedolizumab (ATV) levels in serum.

### SAMPLE COLLECTION INFORMATION

DATE COLLECTED (MONTH/DAY/YEAR) \_\_\_\_\_

TIME COLLECTED \_\_\_\_\_

PATIENT ID \_\_\_\_\_

### PATIENT INFORMATION

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT. NO \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

DATE OF BIRTH (MONTH/DAY/YEAR) \_\_\_\_\_ SEX \_\_\_\_\_  
M F

### ADDITIONAL TESTS

CHECK THE APPROPRIATE TEST(S) TO BE PERFORMED (SPECIMEN COLLECTION REQUIREMENTS ON BACK)

**PROMETHEUS® IBD sgi Diagnostic® - #1800**  
Includes serology, genetic and inflammation markers to help differentiate IBD vs. non-IBD and Crohn's disease vs. UC

Add-on options-if IBD sgi Diagnostic indicated Crohn's disease (by selecting ADD option below you are ordering PROMETHEUS® IBD sgi Diagnostic® and a conditional add-on test order)

**ADD PROMETHEUS® Monitr™ Crohn's Disease - #7300**

**ADD PROMETHEUS® Crohn's Prognostic - #2100**

**PROMETHEUS® Monitr™ Crohn's Disease - #7300**  
13 biomarkers to assess mucosal healing in Crohn's disease patients (I acknowledge this patient has Crohn's disease)

Medication \_\_\_\_\_ Dose \_\_\_\_\_

Date \_\_\_\_\_ Frequency \_\_\_\_\_

**PROMETHEUS® Crohn's Prognostic - #2001**

IBD

NEW

CELIAC

**PROMETHEUS® Celiac PLUS - #6360**

**PROMETHEUS® Celiac Genetics - #6260 (Genetics only)**

**PROMETHEUS® Celiac Serology - #1155 (Serology only)**

THIOPURINE MGMT

**PROMETHEUS® TPMT Genetics - #3300**

**PROMETHEUS® TPMT Enzyme - #3320**

**PROMETHEUS® Thiopurine Metabolites - #3200**  
Thiopurine metabolite (6-TGN, 6-MMPN) levels to optimize ongoing dosing of thiopurines to reach and maintain therapeutic goal

Current therapeutic dose:  
6-MP mg/day AZA mg/day Other mg/day

LIVER

**PROMETHEUS® FIBROspect® HCV - #4000**

Assessment of liver fibrosis severity for HCV patients

**PROMETHEUS® FIBROspect® NASH - #4100**

Assessment of liver fibrosis severity for NASH patients

OTHER

**PROMETHEUS® LactoTYPE® - #6100**

NEW

NEW

# SPECIMEN COLLECTION AND HANDLING PROCEDURES

TEST ORDERED	TURNAROUND TIME (FROM DATE OF RECEIPT)*	SPECIMEN REQUIREMENTS	RECOMMENDED SPECIMEN VOLUME**	SPECIMEN STORAGE / STABILITY***	TRANSPORTATION KIT REQUIREMENT
PROMETHEUS® IBD sgi Diagnostic® - #1800	3-4 days	SERUM AND WHOLE BLOOD in Serum Separator or Red Top Tube AND EDTA/ Lavender Top Tube	2.0 mL Serum AND 2.0 mL Whole Blood	Room temp: 7 days Refrigerated: 21 days	Ambient or cold pack acceptable
PROMETHEUS® Monitr™ Crohn's Disease - #7300	3 days	SERUM in Serum Separator or Red Top Tube	2.0 mL Serum	Room temp: 24 hours Refrigerated: 7 days	Refrigerated - Ship with cold pack
PROMETHEUS® Crohn's Prognostic - #2100	4-7 days	SERUM AND WHOLE BLOOD in Serum Separator or Red Top Tube AND EDTA/ Lavender Top Tube	2.0 mL Serum AND 2.0 mL Whole Blood	Room temp: 7 days Refrigerated: 7 days	Ambient or cold pack acceptable
PROMETHEUS® Celiac PLUS - #6360 (PROMETHEUS Celiac Serology and PROMETHEUS Celiac Genetics)	3 days	SERUM AND WHOLE BLOOD in Serum Separator or Red Top Tube AND EDTA/ Lavender Top Tube	2.0 mL Serum AND 2.0 mL Whole Blood	Room temp: 7 days Refrigerated: 30 days	Ambient or cold pack acceptable
PROMETHEUS® Celiac Genetics - #6260	2-3 days	WHOLE BLOOD in EDTA/ Lavender Top Tube	2.0 mL Whole Blood	Room temp: 7 days Refrigerated: 30 days	Ambient or cold pack acceptable
PROMETHEUS® Celiac Serology - #1155	2-3 days	SERUM in Serum Separator or Red Top Tube	2.0 mL Serum (0.5 mL for Peds)	Room temp: 7 days Refrigerated: 30 days	Ambient or cold pack acceptable
PROMETHEUS® TPMT Genetics - #3300	2 days	WHOLE BLOOD in EDTA/ Lavender Top Tube	2.0 mL Whole Blood	Room temp: 10 days Refrigerated: 30 days	Ambient or cold pack acceptable
PROMETHEUS® TPMT Enzyme - #3320	3 days	WHOLE BLOOD in EDTA/ Lavender Top Tube	5.0 mL Whole Blood	Room temp: 24 hours Refrigerated: 8 days	Refrigerated preferred, ship with cold pack
PROMETHEUS® Thiopurine Metabolites - #3200	3 days	WHOLE BLOOD in EDTA/ Lavender Top Tube	5.0 mL Whole Blood	Room temp: 3 days Refrigerated: 8 days	Refrigerated preferred, ship with cold pack
PROMETHEUS® FIBROSpect® HCV - #4000 PROMETHEUS® FIBROSpect® NASH - #4100	4 days	SERUM in Serum Separator or Red Top Tube	2.0 mL Serum (0.5 mL for Peds)	Room temp: 7 days Refrigerated: 30 days	Ambient or cold pack acceptable
PROMETHEUS® LactoTYPE® - #6100	7 days	WHOLE BLOOD in EDTA/ Lavender Top Tube	2.0 mL Whole Blood	Room temp: 10 days Refrigerated: 30 days	Ambient or cold pack acceptable
PROMETHEUS® Anser®	3 days	SERUM in Serum Separator Tube or Red Top Tube	2.0 mL (0.50 mL for Peds)	Room temp: 7 days Refrigerated: 9 days Do not freeze	Cold pack acceptable but not required

\*Business days

\*\*Note: Minimum specimen volume for genetic testing may vary with the WBC count.

\*\*\*Frozen stability data may be available. Contact Client Services if detailed information is needed.

## LABELING

**Specimens should be labeled with 2 identifiers and date of collection. Examples of acceptable identifiers include, but are not limited to patient name, date of birth, hospital number, requisition, accession or unique random number. Unlabeled specimens will not be accepted for testing.**

## SHIPPING

**Please contact your preferred courier for detailed shipping instructions for your country.**

**NOTE: Multiple specimens may be shipped in a single transportation kit.**

**FOR MORE INFORMATION VISIT [WWW.PROMETHEUSLABS.COM](http://WWW.PROMETHEUSLABS.COM)  
OR CONTACT US AT +1 858-332-3360 OR [GLOBAL@PROMETHEUSLABS.COM](mailto:GLOBAL@PROMETHEUSLABS.COM)**

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Prometheus diagnostic services provide important information to aid in the diagnosis and management of certain diseases and conditions.

How this information is used to guide patient care is the responsibility of the physician.

Assays and methods within these tests may be covered by one or more US pending or issued patents. For details, please go to [www.prometheuslabs.com](http://www.prometheuslabs.com).



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