

**Gastroenterology Laboratory Test Requisition**

Patient Name: \_\_\_\_\_ Medical Record#: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Specimen Date: \_\_\_\_\_

Institution: \_\_\_\_\_ Physician: \_\_\_\_\_

Report Address: \_\_\_\_\_ Bill Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Please Select the Test Name and Indicate the Number of Specimens**

**Disaccharidase Assay (small intestinal biopsy):**

Number of specimens: \_\_\_\_\_

Panel Units	CPT
lactase	82657
maltase	82657
sucrase	82657
palatinase	82657
glucoamylase	82657
Panel	82657 (x5)

**Pancreatic Enzymatic Assay (duodenal fluid):**

Number of specimens: \_\_\_\_\_

Panel Units	CPT
amylase	82657
lipase	82657
chymotrypsin	82657
trypsin	82657
elastase	82657
Panel*	82657 (x5)

\*Panel including above 5 enzymes, pH and protein content. A minimum sample volume 0.2 cc.

**Gastric Pepsin A Elisa Assay (tracheal or bronchial fluid):**

Number of specimens: \_\_\_\_\_

Assay* Units	CPT
Pepsin A	83516
pH	83986
Protein	84157

\*Assay including above 3 CPTs.

A minimum of 0.5 cc fluid is required

**Celiac Disease Tests (Serum):**

Number of specimens: \_\_\_\_\_

	CPT Code
<input type="checkbox"/> Tissue transglutaminase (tTG) antibody IgA	83516
<input type="checkbox"/> Tissue transglutaminase (tTG) antibody IgG	83516
<input type="checkbox"/> Deamidated gliadin peptide (DGP) antibody IgA	83516
<input type="checkbox"/> Deamidated gliadin peptide (DGP) antibody IgG	83516

A minimum serum sample volume 0.3 cc.

**Calprotectin Tests (Fecal): CPT 83993**

Number of specimens: \_\_\_\_\_

**Sample handing and Shipping:** Samples are placed in a clearly labeled, well-sealed tube without any additives, stored at -20°C and shipped on dry ice to:

Alfred I. duPont Hospital for Children  
GI Clinical Lab, RCI bldg. Rm 211  
1600 Rockland Road, Wilmington, DE 19803

***Please do not send samples arriving on weekends and holidays.***

**Contact Information:** For sample shipping and lab results, please call the lab at 302 651 6893. For billing, call Denise Axsmith at 302 651 6802 or Denise.Axsmith@nemours.org. For scientific questions about the tests, please contact Dr. Zhaoping He at 302 651 6853 or zhe@nemours.org.