



Order Form for Allergy Diagnostics

This form can be downloaded at www.labor-stoecker.de

Patient	Surname: _____	First name: _____	Date of birth: _____	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male
	Address: _____ _____			

Billing details	<input type="checkbox"/> Medical insurance
	<input type="checkbox"/> Doctor/hospital
<input type="checkbox"/> Patient	Name and address: _____ _____

Doctor's stamp and signature

Type of sample:
<input type="checkbox"/> Serum <input type="checkbox"/>

Date of collection:

Sample ID of sender/report recipient:

Comments (diagnosis, presumptive diagnosis, medication, major results, etc.):

E-mail of sender/report recipient:
Fax no. of sender/report recipient:

Allergen Profiles: Antibodies of class IgE against

<p>GLOBAL TEST</p> <p><input type="checkbox"/> Determination of total IgE (ELISA)</p>	<p>EUROLINE Allergy Profiles</p> <p><input type="checkbox"/> Inhalation (g1, g3, g6, g12, t2, t3, t4, t7, w1, w6, w9, d1, d2, e1, e2, e3, m1, m2, m3, m6, CCD)</p> <p><input type="checkbox"/> Inhalation 2 (g6, g12, t2, t3, t4, w6, w9, d1, d2, e1, e2, e3, e6, e82, e84, es4, m1, m2, m3, m6, CCD)</p> <p><input type="checkbox"/> Inhalation 3 (t3, t4, t7, t9, t11, t15, t23, g2, g3, g6, g8, g12, g101, u85, w1, w6, w9, w21, e1, e5, e3, e82, m3, m5, m6, i6, d1, d2, d70, d201, CCD)</p> <p><input type="checkbox"/> Paediatric Inhalation (g6, g12, t2, t3, t4, w6, w8, w9, d1, d2, e1, e2, e3, e6, e82, e84, m1, m2, m3, m6, CCD)</p> <p><input type="checkbox"/> Food (f1, f75, f2, f45, f4, f5, f9, f13, f14, f17, f20, f49, f84, f237, f25, f31, f35, f85, f3, f23, CCD)</p> <p><input type="checkbox"/> Food 2 (f1, f75, f2, f78, f4, f5, f14, f10, f13, f17, f20, f49, f84, f95, f25, f31, f35, f85, f3, f23, CCD)</p> <p><input type="checkbox"/> Food 3 (f13, f17, f20, f158, f12, f14, f89, f96, f25, f47, f48, f85, f49, f84, f92, f95, f26, f27, f83, f3, f23, f24, f40, f4, f8, f9, f10, f45, f2, f78, f218, f1, f75, CCD)</p> <p><input type="checkbox"/> Insect Venoms (i1, i3, CCD)</p> <p><input type="checkbox"/> DPA-Dx Insect Venoms 2 (i1, i208, i213, i216, i3, i209, i211, CCD)</p> <p><input type="checkbox"/> DPA-Dx Insect Venoms 3 (i1, i3, i75, i208, i213, i216, i209, i211, CCD)</p> <p><input type="checkbox"/> Atopy "Top Screen" (rs1, rs2, fx5, fs52, CCD)</p> <p><input type="checkbox"/> Atopy (g6, g12, t3, w6, d1, e1, e2, e3, m2, m6, f1, f2, f3, f4, f9, f14, f17, f31, f35, f49, CCD)</p> <p><input type="checkbox"/> Atopy 3 (g6, t3, t4, w6, d1, d2, e1, e2, e3, m2, m3, f1, f75, f2, f3, f4, f13, f14, f31, f49, CCD)</p>	<p><input type="checkbox"/> Atopy 4 (f13, f17, f12, f14, f4, f85, f96, f26, f3, f24, f1, f2, f49, f84, f95, t3, t7, t9, t11, t15, t23, g6, w1, w6, w9, w21, e1, e5, m3, m6, d1, d2, i6, CCD)</p> <p><input type="checkbox"/> Atopy 13 (d1, d2, d4, t2, t3, t4, t15, gs2, w6, w9, e1, e2, e3, m1, m2, m3, m6, f13, f17, f20, f144, f158, f256, f4, f5, f11, f99, f10, f14, f1, f75, f2, f76, f77, f78, f3, f84, f49, f25, w1, CCD)</p> <p><input type="checkbox"/> Atopy Screen (d1, d2, i1, i3, i6, h1, e1, e2, e3, m1, m2, m3, m6, g1, g3, g6, g12, t2, t3, t4, t7, t23, w1, w6, w9, u85, f25, f31, f35, f85, f1, f75, f2, f3, f23, f24, e204, f76, f77, f78, f27, f88, f45, f4, f5, f9, f14, f10, f13, f17, f20, f49, f84, f237, CCD)</p> <p><input type="checkbox"/> Paediatrics (gx, t3, w6, d1, d2, e1, e2, e3, m2, m3, m6, f1, f75, f2, f3, f76, f77, f78, e204, f4, f9, f14, f13, f17, f31, f35, f49, CCD)</p> <p><input type="checkbox"/> Pollen-Associated Cross Reactions (g6, t3, w6, f4, f5, f13, f17, f20, f48, f89, f271, f275, f44, f49, f348, f237, f328, f31, f35, f85, CCD)</p> <p><input type="checkbox"/> DPA-Dx Pollen 1 (t3, g6, t215, t216, t220, t225, g205, g215, g210, g212, CCD)</p>
<p>Molecular Allergy Diagnostics (DPA-Dx*)</p> <p><input type="checkbox"/> DPA-Dx Paediatrics 1 (t215, f76, f77, f78, f334, e204, f232, f233, f323, f356, f422, f423, f424, f427, CCD)</p> <p><input type="checkbox"/> DPA-Dx Paediatrics 2 (f76, f77, f78, f334, e204, f232, f233, f323, f356, f422, f423, f424, f429, f445, f444, f427, t215, CCD)</p> <p><input type="checkbox"/> DPA-Dx Milk 1 (f2, f76, f77, f78, f334, e204, CCD)</p> <p><input type="checkbox"/> DPA-Dx Peanut 1 (t215, f422, f423, f424, f429, f445, f444, f427, CCD)</p> <p><input type="checkbox"/> DPA-Dx Pollen 1 (t3, g6, t215, t216, t220, t225, g205, g215, g210, g212, CCD)</p> <p><input type="checkbox"/> DPA-Dx Insect Venoms 2 (i1, i208, i213, i216, i3, i209, i211, CCD)</p> <p><input type="checkbox"/> DPA-Dx Insect Venoms 3 (i1, i3, i75, i208, i213, i216, i209, i211, CCD)</p>		