## Plexision

4424 Penn Avenue, Suite 202, Medical Building, Pittsburgh, PA 15224 Phone:1(855)-753-9474 or 1(855)-PLEXISI, Fax: 412-224-2776

State ID: 32485 CLIA ID: 39D2042664

## **Requisition Form: COVID-19 Antibody Test**

Patient Name:  Date of Birth:	Sample Collection Date:
Gender: OMale OFemale	Time:
Insurance Details: Carrier: Plan Name: Member ID#: Group ID#: Additional Comments, if any:	Sample Volume:  3 ml Other (Samples less than 3 ml maybe discarded because results maybe inaccurate)  Sample Container: Red top blood collection tube for serum
	Shipping Conditions:  Ambient Temperature  Shipping time (from phlebotomy to delivery)  <30 hours >30 hours
Physician Ordering Test:  NPI #:  Facility Phone:	Facility: Facility Fax:

Ship to: Plexision, 4424 Penn Avenue, Suite 202, Medical Building, Pittsburgh, PA 15224

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