



Patient information

Name: _____ Initials : _____
 Address: _____ Soc.Sec.no.: _____
 ZIP Code: _____ Municipality : _____
 Date of birth: _____ Sex : M / F *
 Sample date: _____ Phone : _____ Email address : _____

FOR LAB USE ONLY

prf. _____ date: _____

Applicant's information

Applicant: _____
 Address: _____
 ZIP Code: _____ Municipality : _____
 Phone: _____

PHYSICIAN'S STAMP

Applicant is physician : NO / YES (put physicians stamp in box)

Bill paid by : Patient Physician Other, please specify : _____

CONSENT FOR CLINICAL TESTING

The patient approves clinical testing of his blood/urine/serum/plasma/skin biopt sample according to the tests indicated by the ticked box. The patient herewith agrees to be liable for the charges as result of these clinical tests.

SIGNATURE OF PATIENT : _____ DATE : _____

CLINICAL DATA (if applicable):

- Have you experienced a tick bite ? Yes No Unknown
- Manifestation of an Erythema Migrans ? Yes No Unknown
- Have you experienced clinical symptoms ? Yes No
 - If yes, please indicate symptoms : _____

- Have you been tested for Lyme before? Yes No
 - If yes, please indicate which tests : _____

- Is lues (= syphilis) to be excluded ? Yes No Unknown
- Did you already use any antibiotic ? Yes No
 - Which antibiotics were administered : _____

 - Indicate duration of antibiotic treatment : _____
 - How many days was the venesection (blood sampling) after the termination of the antibiotics treatment ? _____ days
 - Did you use antiparasitic medication ? Yes No
 - If yes, please indicate which medication : _____



Administration costs : € 12,90 (mandatory for every application except specified otherwise)

Application for Borrelia testing

Price

- | | | | |
|--------------------------|--|---|---------|
| <input type="checkbox"/> | Borrelia IgM (elisa) | S | € 13,00 |
| <input type="checkbox"/> | Borrelia IgG (elisa) | S | € 9,80 |
| <input type="checkbox"/> | Borrelia C6 (elisa) | S | € 13,00 |
| <input type="checkbox"/> | Borrelia immunoblot IgM | S | € 45,50 |
| <input type="checkbox"/> | Borrelia immunoblot IgG
<i>(recombinant immunoblot)</i> | S | € 45,50 |
| <input type="checkbox"/> | Borrelia Western Blot IgG/IgM | S | € 91,00 |
| <input type="checkbox"/> | Borrelia antigeen mbv IFA*
<i>(Immunofluorescence)</i> | E | € 19,50 |
| <input type="checkbox"/> | Borrelia antigeen*
<i>(phase contrast microscopy)</i> | E | € 19,50 |

* For antigen screening the EDTA blood has to be received by the lab within 24 hrs.

Application for Borrelia testing

Price

- | | | | |
|-----------------------------------|--|---|----------|
| <input type="checkbox"/> | Borrelia test - antibody comb. 1
<i>(Elisa Borrelia IgG/IgM/C6/Immunoblots IgG/IgM)</i> | S | € 126,80 |
| <input type="checkbox"/> | Borrelia test - antibody comb. 2
<i>(Elisa Borrelia IgG/IgM/C6/Immunoblot/Western Blot IgG/IgM)</i> | S | € 217,80 |
| All bands will be reported | | | |
| <input type="checkbox"/> | Borrelia spp in urine (PCR) DNA
<i>(collect urine at approximately 16:00 hrs.)</i> | U | € 81,20 |
| <input type="checkbox"/> | Borrelia PCR test after blood cult.
<i>(blood culture (6 wks) followed by PCR)</i> | E | € 107,20 |
| <input type="checkbox"/> | Borrelia PCR test (various materials) | | € 81,20 |
| Indicate source of material : | | | |
| <input type="checkbox"/> | Liquor | | |
| <input type="checkbox"/> | Saliva | | |
| <input type="checkbox"/> | Tissue ** | | |
| <input type="checkbox"/> | Other | | |

** (In case of DNA extraction from tissue samples an additional cost of €39.50 will be charged)

Application for tick-borne disease testing

Price

- | | | | |
|--------------------------|--|---|---------|
| <input type="checkbox"/> | Babesia
<i>microscopic/direct test</i> | E | € 32,50 |
| <input type="checkbox"/> | Ehrlichiose + IgG + IgM IFT
<i>mon.fluorescence</i> | S | € 65,10 |
| <input type="checkbox"/> | Leishmania IgG | S | € 29,40 |
| <input type="checkbox"/> | Bartonella henselae IgG/IgM | S | € 55,40 |
| <input type="checkbox"/> | Rickettsia conorii IgG/IgM IFT | S | € 39,20 |

Application for PCR bacteriology / virology

- | | | | |
|--------------------------|---|----|----------|
| <input type="checkbox"/> | Bartonella henselae PCR | E | € 146,20 |
| <input type="checkbox"/> | Leishmania PCR
<i>(swab on slide; applied without gel !)</i> | Sw | € 146,20 |
| <input type="checkbox"/> | Rickettsia PCR | E | € 105,50 |

Legend :

S = serum
E = EDTA blood

U = urine
P = plasma

fae = faeces
SL = saliva

BS = buccal swab
Sw = swab on microscopy slide