

<p>Send to Wieslab AB, Lundavägen 151 212 24 Malmö, Sweden</p> <p>Requesting doctor/ clinic - Postal address for test result report</p> <p>Invoice address (if other than above) Only doctors, laboratories and hospital administration can be invoiced</p> <p>Requesting Doctor (Name, Telephone, Email)</p> <p>Cost Center: _____</p> <p>Comment (Request, Patient history etc)</p>	<p>Contact diagnostic.services@svarlifescience.com T +46 (0)40 - 53 76 60 F +46 (0)40 - 43 28 90</p> <p>Patient data (Full name, Birth date, Identity number)</p> <p>Gender Male Female Other</p> <p>Sample material Serum CSF EDTA-Plasma Whole blood Sample date _____</p> <p>Specimen collection information Serum: Blood should be collected in plain tubes (serum tubes) without anticoagulant or other supplements. Centrifuge at ambient temperature and separate serum into plain tubes. 3 mL serum (7 mL blood) will be enough for approximately 15 tests. CSF: Always use polypropylene tubes for collecting, centrifuging and transportation. Samples should be centrifuged before transportation. 3 mL CSF will be enough for approximately 10 autoantibody tests. Aliquot as instructed under the test panels. Wieslab recommends as a first hand approach to start testing in serum with a few exceptions – more information is given under the test panels. Samples should be kept cold until transport. Transport samples for autoantibodies and genetic tests at room temperature. Biomarkers can only be tested in CSF and samples should be transported frozen.</p> <p>The healthcare provider submitting the sample(s) with this request form hereby confirms that the patient (or the patient's guardian or trustee, if applicable) has been informed that the samples may be retained by Wieslab AB for a period of up to 5 years for the purpose of conducting further analyses in order to make a diagnosis, and that Wieslab AB intends to retain samples for a period of up to 5 years for the purpose of the Svar Life Science AB/Wieslab AB's future development of analysis methods and its business activities.</p> <p>No, the patient does not give her/his consent to save the sample. .</p> <p>The patient is currently unable to give his or her consent in relation to retention of the sample(s).</p>
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Select test package, on suspicion of:

Individual tests on the reverse side →

<p>Acute testing</p> <p>Acute autoimmune encephalitis 556 Antibodies against AMPAR1/2, CASPR2, DPPX, GABA B R, LGI-1, NMDA receptor</p> <p>Acute paraneoplastic syndrome, cerebellar degeneration and cerebellar ataxia 557 Antibodies against Amphiphysin, CV2/CRMP5, Hu, Ma, Ri, Yo, GAD <i>Analysed in serum and CSF.* (At least 3 mL CSF is needed)</i> If the sample arrives before 10:00 am on a weekday, the tests are performed and reported on the same day. If the sample arrives later than 10:00 am on a weekday it is analysed the next workday. Telephone number or email for reporting of test result: _____</p> <p>Autoimmune encephalitis / follow-up on acute test no. 557 553 Antibodies against AMPAR1/2, CASPR2, DPPX, GABA B R, LGI1, NMDA receptor, VGKC <i>Analysed in serum and CSF.*</i></p> <p>Paraneoplastic syndrome, cerebellar degeneration and cerebellar ataxia / follow-up on acute test no. 556 554 Antibodies against Amphiphysin, CV2/CRMP5, GAD, Hu, Ma, Recoverin, Ri, SOX1, Titin, Tr, Yo, Zic4 <i>Analysed in serum and CSF.* (At least 3 mL CSF is needed)</i></p> <p>Autoimmune encephalitis, paraneoplastic syndrome, cerebellar degeneration and cerebellar ataxia 560 Antibodies against AMPAR1/2, CASPR2, DPPX, GABA B R, LGI1, NMDA receptor, VGKC, Amphiphysin, CV2/CRMP5, GAD, Hu, Ma, Recoverin, Ri, SOX1 Titin, Tr, Yo, Zic4 <i>Analysed in serum and CSF.*</i></p> <p>Extended test panel for neuronal antibodies (autoimmune encephalitis, paraneoplastic syndrome, cerebellar degeneration and cerebellar ataxia) 562 Antibodies against ANNA 3, CARP VIII, Glycine receptor, HOMER3, IgLON5, ITPR1, PCA 2, VGCC <i>Analysed in serum and CSF.*</i></p> <p>Hodgkin's lymphoma with paraneoplastic cerebellar ataxia or limbic encephalitis (Ofelia's syndrome) 574 Antibodies against MGLur1 and MGLur5 <i>Analysed in serum.</i></p> <p>Neuromyelitis optica spectrum disorder (NMOSD) 565 Antibodies against Aquaporin 4, MOG <i>Analysed in serum and CSF.*</i></p> <p>Supplementary analysis of biomarker for suspected NMOSD 549 Neurofilament light protein (NFL), Glial fibrillary acidic protein (GFAP) <i>Only analysed in CSF. The CSF sample should be sent frozen divided in 2 polypropylene tubes with a minimum of 0.5 mL i each tube.</i></p> <p>Narcolepsy 558 Orexin/Hypocretin (CSF), HLA-DQB1*0602 (2,5 mL whole blood), and antibodies against Trib2 (serum only). <i>Note: Three different sample materials must be sent and a form for "Declaration of consent for human genetic analyses" needs to be signed and enclosed. (see: www.svarlifescience.com/services/request-form)</i></p> <p><small>* Serum is recommended as a first hand approach. CSF may be used if serum test gives a negative result. Anti-NMDA receptor antibodies and anti Aquaporin 4 antibodies can in rare cases only be detected in CSF.</small></p>	<p>Inflammatory neuropathy (Guillain-Barré) 534 Antibodies against gangliosides (GM1, GM2, GD1a, GD1b, GQ1b IgG/IgM), MAG and Sulphatide IgM <i>Serum is recommended as a first hand approach (also available in CSF).</i></p> <p>CIDP, Chronic Inflammatory Demyelinating Polyneuropathy 537 Antibodies against Contactin-1 (IgG) and Neurofascin-155 (IgG, IgM) <i>Only analysed in serum.</i></p> <p>Inflammatory axonal sensory neuropathy 047 Antibodies against FGFR3 (<i>Fibroblast growth factor receptor 3</i>) <i>Analysed in serum.</i></p> <p>Lambert Eaton Myasthenic Syndrome (LEMS) 563 Antibodies against Acetylcholine receptor, Amphiphysin, GAD, Hu, Ri, SOX 1, VGCC <i>Analysed in serum and CSF.*</i></p> <p>Myasthenia gravis 543 Antibodies against Acetylcholine (anti-AChR) and striated muscle. Positive anti-AChR is supplemented with anti-Titin. Negative anti-AChR is supplemented with anti-MuSK. <i>Only analysed in serum.</i></p> <p>Supplementary analysis for Myasthenia gravis 958 Antibodies against Lrp4 (lipoprotein receptor-related protein-4) <i>Only analysed in serum.</i></p> <p>Stiff person syndrom/PERM 568 Antibodies against Amphiphysin, GAD, Glycine receptor <i>Analysed in serum and CSF. Serum is recommended as a first hand approach. CSF may be used if serum test gives a negative result.</i></p> <p>Inflammatory Myopathy (Myositis) 551 ANA screen, ENA screen Antibodies against HMGCR, cN-1A, Mi-2α, Mi-2β, TIF1γ, MDA5, NXP2, SAE1, Ku, PM-Scl100, PM-Scl75, Jo-1, SRP, PL-7, PL-12, EJ, OJ och Ro-52 <i>Only analysed in serum.</i></p> <p>Alzheimers disease 567 Tau, Fosfo-Tau, Beta-Amyloid <i>Only analysed in CSF. Send frozen sample split into 3 polypropylene tubes with minimum 0.5 mL in each.</i></p> <p>CNS -Parenchymal damage 566 Neurofilament light protein (NFL), Glial fibrillary acidic protein (GFAP), Tau <i>Only analysed in CSF. With Anoxic brain injury the sample must be taken 7 days after the injury occurred. The CSF sample should be sent frozen divided in 3 polypropylene tubes with a minimum of 0.5 mL i each tube.</i></p> <p>Progressive ALS (amyotrophic lateral sclerosis) 119 Neurofilament heavy protein (p-NfH) <i>Only analysed in CSF (sent frozen).</i></p> <p>Neuroborrelios 988 CXCL13 <i>Only analysed in CSF.</i></p> <p>Paraneoplastic retinopathy syndrome (MAR, CAR) 569 Antibodies against Alpha-Enolase, Recoverin <i>Only analysed in serum.</i></p>
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Mark for test

AUTO-ANTIBODIES

Most of the auto-antibodies can be analysed in serum and CSF. Serum is recommended as a first hand approach. CSF may be used if serum test gives a negative result. Some auto-antibodies such as anti-NMDA receptor and anti-Aquaporin 4 can in rare cases only be detected in CSF.

Autoimmune encephalitis/Paraneoplastic neurological syndromes

772	Ampa receptor 1 & 2 (GluR1 & 2)
730	Amphiphysin 1
874	ANNA-3
854	CARP VIII
835	CASPR2
870	CV2/CRMP-5
851	DPPX
877	GABA-B-R
089	GAD (Glutamat dekarboxylas) - Serum (ELISA), CSF (IIF/Blot)
838	Glycine receptor (GlyR)
855	HOMER3
220	Hu (ANNA-1)
852	IgLON5
856	ITPR1
833	LGI-1
790	Ma (Ma-1, Ma-2/Ta)
117	MGlur1 (metabotropic glutamate receptor 1)
118	MGlur5 (metabotropic glutamate receptor 5)
875	NMDA receptor
761	Purkinje cells - PCA-2
760	Purkinje cells - Tr
740	Purkinje cells - Yo (PCA-1)
750	Ri (Nova 1, ANNA-2)
839	Ryanodine receptor (<i>only analysed in serum</i>)
737	SOX1 (anti-glia nuclear antibody) (<i>only analysed in serum</i>)
965	Titin
845	Voltage-gated calcium channel (VGCC)
831	Voltage gated potassium channels (VGKC)
742	Zic4

Myopathies (myositis)

020	ANA screen on HEp-2 cells: Positive ANA, homogenous and speckled ANA staining, is supplemented by: ANA titration, ENA screen, dsDNA and anti-histones (homogenous ANA staining)
141	cN-1A, Cytosolic 5'-nucleotidase 1A, (Mup44, NT5c1A)
024	ENA screen (nRNP/Sm, Sm, SS-A/Ro-52, SS-B, Scl-70, Jo-1)
485	HMGCR (HMG-CoA reductase)
481	KS (Asparaginyl-tRNA-Synthetase)

548	Myopathy (Myositis) screen (Mi-2 α , Mi-2 β , TIF1 γ , MDA5, NXP2, SAE1, Ku, PM-Scl100, PM-Scl75, Jo-1, SRP, PL-7, PL-12, EJ, OJ, Ro-52) (<i>only analysed in serum</i>)
710	PM/Scl (p100)
450	RNA polymeras

Narcolepsy

970	Trib2 (<i>only analysed in serum</i>)
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Neuropathies

601	Contactin-1 antibodies (IgG)
047	FGFR3 (fibroblast growth factor receptor 3)
546	Gangliosides (IgG+IgM): GM1, GM2, GD1a, GD1b, GQ1b
093	Myelin associated glycoprotein (MAG)
602	Neurofascin-155 antibodies (IgG, IgM)
355	Sulphatide IgM

Neuromyelitis optica spectrum disease (NMOSD)

873	Aquaporin 1 (<i>only analysed in serum</i>)
880	Aquaporin 4
884	Myelin oligodendrocyt glykoprotein (MOG)

Myasthenia Gravis and other myastenic syndromes

079	Acetylcholine receptor (AChR) (<i>only analysed in serum</i>)
959	Ganglionic acetylcholine receptor (<i>only analysed in serum</i>)
845	Voltage-gated calcium channel (VGCC)
958	Lrp4 (lipoprotein receptor-related protein-4) (<i>only analysed in serum</i>)
960	MuSK (<i>only analysed in serum</i>)
839	Ryanodine receptor (<i>only analysed in serum</i>)
085	Striated muscle (<i>only analysed in serum</i>)
965	Titin

Paraneoplastic retinopathy syndromes

837	alfa-Enolase (<i>only analysed in serum</i>)
736	Recoverin

Stiff Person/PERM

730	Amphiphysin 1
089	Glutamic Acid Decarboxylase (GAD, GAD-65)
838	Glycine receptor (GlyR)

BIOMARKER PROTEINS

Is only analysed in CSF. Samples should be shipped frozen aliquoted in polypropylene tubes with a minimum of 0.5 mL in each tube.

992	beta-Amyloid
988	CXCL13
991	Phospho-Tau
993	Glial fibrillary acidic protein (GFAP)
989	Hypocretin/Orexin (<i>can be sent cold, not frozen</i>)
119	Neurofilament heavy protein (p-NfH)
994	Neurofilament light protein (NFL)
995	S-100 (CsV)
990	Tau
857	Analysed in CSF for Creutzfeldt Jakob disease

GENETIC TESTS

291	HLA-DQB1*0602 at suspicion of narcolepsy (2.5 mL whole blood) Note: A form for "Declaration of consent for human genetic analyses" needs to be signed and enclosed (see www.svarlifescience.com/services/request-form).
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If the analysis or test requested cannot be found on the Request Form, please contact us by sending an email to diagnostic.services@svarlifescience.com.

Information about tests, sampling instructions as well as Terms and Conditions are available on www.svarlifescience.com/services/wieslab-diagnostic-services

The latest version of the request forms are always available for download on our website.

For tests related Autoimmune Diagnostics and Therapeutic Drug Monitoring please use respective request form.

Orders/Requests

Please send Request Forms: Autoimmune Diagnostics Neuroimmunology Therapeutic Drug Monitoring
 Overview of autoimmune neurology testing