

Laboratory & Radiology Orders

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Patient Name: _____ Date: _____

Diagnosis: _____ ICD-9: _____

History: _____

Laboratory Request

- Complete Blood Count (CBC) w/ differential
- Erythrocyte Sedimentation Rate (ESR)
- C-Reactive Protein (CRP)
- Serum Angiotensin Converting Enzyme (ACE)
- Serum Lysozyme Level
- Anti Nuclear Antibody (ANA)
- Rheumatoid Factor (RF)
- Rapid Plasma Reagin (RPR)
- HLA-B27
- HLA-B5
- HLA-A29
- Borrelia burgdorferi* (Lyme) C6 Peptide Antibodies, Total by ELISA
- Toxoplasma gondii* Antibodies, IgG & IgM
- Toxocara* Antibody IgG by ELISA
- Hepatic Function Panel:
Albumin, Alkaline Phosphatase, Aspartate Aminotransferase, Alanine Aminotransferase, Direct Bilirubin, Total Bilirubin Total Protein.
- Carcinoembryonic antigen (CEA)
- Place PPD skin test
- Quantiferon Tb Gold
- Protein C, Protein S, Antithrobin III, and Factor V Leiden mutation.
- Antiphospholipid Antibodies
- PTT/PT/INR
- Homocysteine level
- Serum Creatinine
- _____
- _____

Radiology Request

- Chest X-ray (PA & Lat)
- MRI Brain & Optic Nerves
- CT Head & Orbits
- Maxilofacial CT Scan
- CT Chest
- CT Abdomen
- Carotid Doppler
- Magnetic Resonance Angiogram of Neck and Brain
- CT Angiogram of Neck and Brain
- _____
- _____

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