

# ECO LABORATORY

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## TEST REQUISITION

**Submitted by:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Patient:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Ordering Provider:** \_\_\_\_\_

**D.O.B:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Account #:** \_\_\_\_\_

**Submitter**

**Record #:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_

**FAX #:** \_\_\_\_\_

## Specimen Information

Specimen Type: Serum  Plasma  CSF  Synovial Fluid

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_

Lab Use Only

## Test Requested

### Serology

Lyme Antibody Capture EIA: IgM, IgA, and IgG (serum, plasma, CSF, synovial fluid)

Lyme Western Blot: IgG (serum only)

*Borrelia miyamotoi*: IgM and IgG (serum or plasma)