*Home of the CA Profile™© and Longevity Profile®©*

American
Metabolic Laboratories
1818 Sheridan Street, Suite 102, Hollywood, FL 33020
954-929-4814 Fax: 954-929-4896
www.AmericanMetabolicLaboratories.com

PIN: _____ SIN: _____

Rc'd _____ tubes

# BLOOD TEST REQUISITION FORM

PATIENT'S NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DOB: _____ AGE: _____ SEX: _____ TELEPHONE #: _____ Email: _____

DATE BLOOD DRAWN: _____ TIME DRAWN: _____ DATE RECEIVED: _____ TIME RECEIVED: _____

CLINICAL HISTORY / DIAGNOSIS: _____

Is patient on HRT? _____ Please check all that applies: Estrogen _____ Progesterone _____ Testosterone _____ DHEA-S _____

Referring physician: **Michael Cheikin, MD** Facility: **Center for Optimal Health**

Address: **832 Germantown Pike, Suite 3** City: **Plymouth Meeting** State: **PA** Zip Code: **19462**

NPI/License # **MD-040161E/14078-23016** Phone: **610-239-9901** Fax: **816-217-0158**

*****To the Ordering Physician: Am Met Labs is not in any Insurance network or in Medicare. An itemized Statement is available upon request.**

**All tests ordered must be medically necessary for insurance.**

**Indicate ICD-10 codes:**

## o CA PROFILE™©

HCG (IMM & Urine Quantitative)
PHI
CEA
DHEA-S
GGTP
TSH (3rd generation)

## o TUMOR MARKERS PANEL©

HCG ( IMM & Urine Quantitative)
PHI
CEA

## o LONGEVITY PROFILE®©

CA Profile™©

Estradiol
Progesterone
Total Testosterone

IGF-1

PTH

hs-CRP
Homocysteine
Direct LDL
Lp (a)

Cortisol am
Cortisol pm

Chem Profile & CBC

oHCG (IMM & Urine Quantitative) _____
oHCG URINE QUANTITATIVE _____
oPHI _____
oCEA _____
oDHEA-S _____
oGGTP _____
oTSH (3rd generation) _____
oT3 (total) _____
oT4 (total) _____
o PSA _____
o IGF-1 (growth hormone) _____
o ESTRADIOL _____
o PROGESTERONE _____
o FREE TESTOSTERONE _____
o TOTAL TESTOSTERONE _____
o CA 19-9 (gastric, pancreatic cancer) _____
o CA 125 (ovarian cancer) _____
o CA 15-3 (breast cancer) _____
o PTH (calcium loss marker) _____
o hs - CRP (cardiac marker) _____
o HOMOCYSTEINE (cardiac marker) _____
o CORTISOL am _____
o CORTISOL pm _____
o CHEM Profile & CBC _____
oLp(a) (cardiac risk factor) _____
oLDL-Direct (cardiac risk factor) _____
o Phlebotomy _____
o _____ _____
o _____ _____
o _____ _____

CLIA I.D. 10D0918692, Florida L800010873 **Physician's Signature** _____ **Date** _____

*Excellence in Clinical Pathology Since 1995*