

# Special Stain Request Form

Date:

Requesting Doctor:

Case #/Block #:

Patient Name:

Recut  
Reference Slide  
L3-One Slide  
Step Levels [x3]  
Step Level [x3] Exhaust Block  
Complete Epidermis [x1]  
LTB on one slide  
Other:

Colloidal Iron  
Congo Red  
Elastic  
Fontana- Masson  
Gram  
PAS  
PAS-D  
PAS-H  
Perl's Iron  
Fite  
GMS

AFB  
Von Kossa  
  
Step Level [x3] Melan A  
  
Step Level [x3] Exhaust Block with  
[x2] unstained between each level  
  
Step Level [x3] Exhaust Block with  
a PAS-D and H&E on each level

## IHC

Adipophilin  
ALK1  
Androgen Receptor  
BAP1  
BCL-2  
BCL-6  
Ber-EP4  
Beta Catenin  
BRAF  
CEA  
CD1a  
CD2  
CD3  
CD4  
CD5  
CD7  
CD8  
CD10  
CD20  
CD21  
CD30

## IHC

CD31  
CD34  
CD45  
CD68  
CD123  
CD117  
Chromogranin  
D-240  
Desmin  
EMA  
ERG  
FactorXIIIA  
HHV8  
HMB-45  
HSV1/2  
LEF1  
KerAE 1/3  
Keratin 5/6  
Keratin 7  
Keratin 20  
Ki-67

## IHC

PD-1  
Mast Cell Tryptase  
MelanA  
Myeloperoxidase  
Neurofilament  
NKI C3 [CD63]  
p16  
p40  
p53  
p63  
PHH3  
PRAME  
S-100  
SMA  
SOX-10  
Spirochete  
Synaptophysin  
Vimentin  
Zoster

## ISH

Kappa  
Lambda

## DIF Panel

IgA IgG  
IgG4 IgM  
C3 Fibrinogen

## Double Stains

Keratin5/6&S-100  
Ki-67&MelanA  
MelanA&pHH3  
CD4/CD8  
CD8/CD3  
BCL6/CD21

## MF Panel

CD2 CD7  
CD3 CD8  
CD4 CD20  
CD5

## Lab Use Only

|               | Date | Initials |
|---------------|------|----------|
| Cut           |      |          |
| Stained       |      |          |
| Sent          |      |          |
| Outside Slide |      |          |

Please Request Block #:

Block Requested:

Initials:

Date:

