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ASSOCIATES

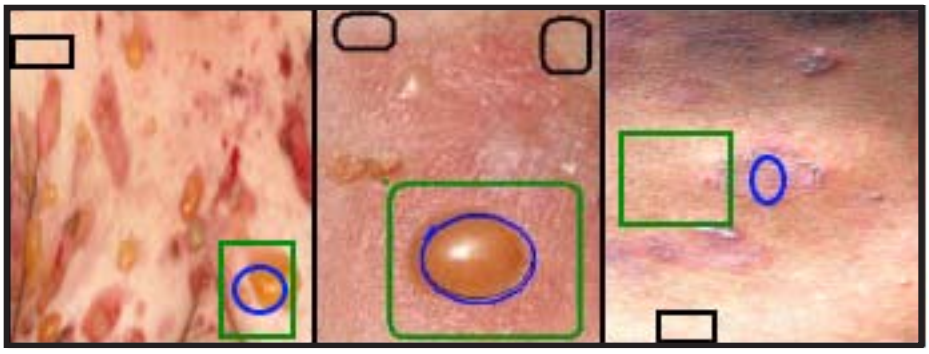
GDA IMMUNODERMATOLOGY DIF/IIF OVERAL BIOPSY RECOMMENDATIONS

We highly recommend performing all relevant biopsies on the same day for each patient(i.e., performing an H&E biopsy and all immunofluorescence biopsies during the same patient visit). We further recommend taking any initial workup biopsies BEFORE initiating immunosuppressive therapy.

When sending all initial H&E and DIF specimens for your patient, we HIGHLY recommend also utilizing a separate GDA indirect immunofluorescence(IIF) kit and providing us TWO tubes of with patient blood for this procedure.

If your practice does not draw blood, please send the patient to the closest phlebotomy station, with the IIF kit and the enclosed instructions.

On our GDA Immunodermatology requisition form, we provide recommendations regarding the best biopsy locations for well documented, suspected clinical diseases. Further biopsy instructions are provided below. The black squares indicate nonaffected, perilesional skin; the green boxes indicate perilesional skin, and the blue circles indicate lesional skin.



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SENDING DIRECT IMMUNOFLUORESCENCE(DIF) ONLY:

Utilize a GDA DIF kit. Clean the biopsy area with the provided povidone-iodine USP prep pad (if the patient if is not allergic to povidone). If the patient is allergic to povidone, use the alcohol pad provided.

Whenever possible, biopsy a single, fresh(2-7 clincal days) small blister twice(two separate 4 mm punch biopsies); on each biopsy, one third of the biopsy should involve the actual blister, and two thirds should involve adjacent, clinically perilesional skin.

Packing Instructions(IATA 650): Please send the first biopsy for H&E studies in formalin, and the second biopsy for DIF studies in Michel's Transport Medium(one extra Michel's tube is included). Place each tube into its clear plastic shipping tube. Seal the H&E external tube with the green security sticker, and the Michel's DIF external tube with the blue security sticker. Place both tubes into the biohazard bag, and the bag into the clear plastic DIF kit box. Seal the plastic kit box with one red security sticker. Place the plastic box into the in the white cardboard DIF kit box, with 1) a folded GDA requisition form and 2) the small white specimen identification label enclosed. Finally, seal the outside of the DIF white cardboard box with the second red security sticker, and send the sealed white cardboard box FedEx to GDA.

If you have any questions or suggestions for better service, do not hesitate to call GDA Toll Free 24/7 at (877) 371-0027, or visit our Website, at www.gadermpath.com . Email may be sent to mhoward@gadermpath.com.

NOTES ON MICHEL'S TRANSPORT MEDIUM:
Michel's tissue transport medium is NOT a fixative, although it is often incorrectly referred to as "Michel's fixative". The medium is designed to transport fresh tissue from skin and other organs, and to optimize results in subsequent immunologic testing. Michel's medium may be stored at room temperature for approximately one year without significant deterioration. Good immunofluorescence results may be obtained when testing up to five(5) days following the biopsy(with the biopsy maintained at room temperature). However, if, following biopsy, same day shipping is not possible, please place your biopsy(in Michel's medium) into refrigeration at 4 degrees C(do NOT freeze!) until shipping pickup(to retard interference with DIF results). In an emergency, without Michel's medium available, the biopsy may be sent in a buffered saline solution. DIF may NOT be performed on specimens fixed in formalin, or in any other true tissue fixatives.

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SENDING INDIRECT IMMUNOFLUORESCENCE(IIF) ONLY:

Utilize a GDA IIF kit. Clean the area for venopuncture with a povidone-iodine USP prep pad (if the patient is not allergic to povidone). If the patient is allergic to povidone, use the alcohol pad provided. Collect 5 ml of whole blood in the red top serum separator tube, and collect 5 ml of whole blood in the purple top(EDTA) tube. MIX ONLY THE PURPLE TOP TUBE WELL. Allow the red top tube to remain vertical for 20 minutes at room temperature, to facilitate serum separation. Packing Instructions(IATA 650): Place each tube into its clear plastic shipping tube, and seal the outside of the shipping tubes with the blue security sticker(red top tube), and the green security sticker(purple top tube). Place both tubes into the biohazard bag. Place the biohazard bag into the clear plastic IIF kit box. Seal the clear plastic kit box with one external red security sticker. Place the clear plastic box into the white cardboard IIF external kit box, with 1) a GDA requisition form and 2) the small white specimen identification label enclosed. Then seal the outside of the white cardboard IIF kit box with the second red security sticker, and send the sealed white cardboard box FedEx to GDA.. If you have any questions or suggestions for better service, do not hesitate to call GDA Toll Free 24/7 at (877) 371-0027, or visit our Website, at www.gadermpath.com . Email may be sent to mhoward@gadermpath.com. fixatives.

Reporting, Storage and Interpretation of Test Results:

The results of both our direct and indirect IF tests are almost always available within three(3) business days of receiving the specimen(s) in the laboratory. Tissue submitted according to the preceding recommendations should provide results comparable to those possible with fresh frozen tissue. Results are available to physician's offices via secure server Internet, fax and mail. Digital color pictures from each case will be provided in our reports; these images are also placed into permanent storage, to facilitate further consultation regarding the patient's case. It is also recommended to follow selected patients with an IIF specimen four to six weeks after initiation of immunosuppressive treatment, to monitor efficacy of their therapy. Immunologic overlap may occur among the major, clinical entities of autoimmune disorders. Thus, precise detection of the causative antibodies in each patient aids in their best diagnosis and treatment. In general, autoimmune antibody levels directly correlate with clinical disease activity. Please contact us with any questions regarding classification of reported disorders, or in interpretation of your specific antibody findings. http://uuhsc.utah.edu/derm/immunoderm/diagtest.cfm

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