

## **Department of Student Health**

These titers are required to start Penn State Medical School. Please have your physician sign this lab request form to present to the laboratory to insure accurate tests are obtained.

## **LAB ORDERS**

Hepatitis B Surface Antibody <u>QUANTITATIVE\*</u>
Rubella Antibody, IgG
Rubeola Antibody, IgG
Mumps Antibody, IgG
Varicella Antibody, IgG, for students with a history of chicken pox

## \*Hepatitis B Surface Antibody Quantitative

(Note: do not draw if a numerical quantitative result is not given. A qualitative exam is not acceptable.)

| Physician/Provider signature | Date |
|------------------------------|------|