Complement Expert Centre

REQUISITION

Complement and Thrombotic Microangiopathy (TMA) Investigations

For **emergency/urgent requests,** please contact cec.hsj@ssss.gouv.qc.ca.
All fields are mandatory. Requisitions received with missing information may result in testing delays.

PATIENT INFORMATION	
Surname	
First Name	
Sex at Birth	☐ Female ☐ Male
Date of Birth (DD/MM/YYYY)	

Patient Sticker
(If available)

ORDERING CLINICIAN			
Last Name		**Telephone**	
First Name		**Fax**	
Clinic/Hospital Address		**E-mail Address** for reporting	
Copy to healthcare provider	**Full name:**	**Fax or email**	
Signature of Ordering Physician:		**Date** (DD/MM/YYYY)	

TEST(S) REQUESTED (ISO-15189)	SELECTION (see information sheet for sample instructions)	
ADAMTS13 activity (FRETS VWF73)	□ Standard	□ STAT (24h)
IgG anti-ADAMTS13 (ELISA titration)	□	
ADAMTS-13 Antigen (ELISA)	□	
Soluble C5b-9 (ELISA)	□ Plasma	□ Urine
Anti-autobody CFH (ELISA)	□	
CFI antigen (ELISA)	□	
Eculizumab level (ELISA)	□ Plasma	□ Urine
Ravulizumab level (ELISA)	□ Plasma	□ Urine
Core Complement Panel: as recommended by https://ahusnetwork.ca/resources.php Includes: plasma sC5b-9, anti-autobody CFH, and C100/CH50	□	
Other tests are available through the CEC as part of ongoing validations, please contact us for test-specific requests *(Including: Complement genetic panel, ex-vivo deposition C5b-9 on unstimulated cells, activation fragments, quantitative assays, C3Nef, C4Nef, C5Nef, and other complement-related markers)*		

Contact us: Complement Expert Centre; cec.hsj@ssss.gouv.qc.ca; 1-514-345-3276; Website

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Biological and Clinical context

Suspected Etiology		Patient Status
□ Thrombotic thrombocytopenia (TTP) □ Atypical hemolytic uremic syndrome (aHUS) □ Complement-mediated TMA (CM-TMA) □ Other:	PLASMIC score: _____ ADAMTS13 activity: _____	□ Acute / initial presentation □ Active Monitoring / follow-up □ Relapse / risk of relapse □ Remission monitoring □ Other: _____

CURRENT LABORATORY INVESTIGATIONS / RESULTS		CLINICAL PRESENTATION(S)	
Renal insufficiency □ Yes □ No	Urea (mmol/L):	□ Fever	□ HTA
	Creatinine (µmol/L):	□ Neurological symptoms	□ Liver involvement
	Proteinuria (__):	□ Diarrhea	□Troponin positive
Hemolytic anemia □ Yes □ No	Hemoglobin (g/dL):	□ Cardiac failure	
	Haptoglobin (g/L):	□ Pulmonary symptoms	
	LDH (UI/mL):	**TREATMENT(S)**	
	Schistocytes (__):	□ None	□ Corticoids (Date: _____)
Thrombopenia □ Yes □ No	Platelets (109/L):	Plasma □ Infusion □ Echange	Date:
Complement biomarkers (provide unit) □ Yes □ No	CH50 and/or AH50 level:	□ Eculizumab □ Ravulizumab □ Rituximab □ Caplacizumab □ Others	Infusion date:
	C3 level:		
	C4 level:	Other:	Date:

RELEVANT CLINICAL CONTEXT - *Possible Secondary Cause(s) of TMA*

□ Pregnancy □ Post-partum □ Autre:	□ Malignant hypertension □ Auto-immune disease	□ Cancer □ Transplant	□ Infection induced (STEC, s. pneumoniae, viral) □ Glomerular disease	□ Drug-induced □ Family History □ Cobalamine

Collection and Shipping		Receiving Results
Supported by In Common Laboratories As of June 2026, sample coordination for outside of Quebec is supported by ICL, who will also be the billing entity https://iclabs.ca/	**Direct to CHUSJ** Please contact us: cec.hsj@ssss.gouv.qc.ca + 1 514 345 3276	Results will be faxed or emailed. If you have not received your results, please contact us.

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Complement and TMA testing information sheet

Test Name	Specimen requirements	TAT
ADAMTS-13 Activity	1 mL citrated plasma (blue top) double centrifuged, sent on dry ice	1 week or 24h STAT
IgG anti-ADAMTS-13	1 mL citrated plasma (blue top) double centrifuged, sent on dry ice	2 weeks
ADAMTS-13 Antigen	1 mL citrated plasma (blue top) double centrifuged, sent on dry ice	4 weeks
Soluble C5b-9 plasma	1 mL EDTA plasma (lavender top) double centrifuged and frozen within 2 hours of collection, sent on dry ice	1 week
Soluble C5b-9 Urine	1 mL urine collected in a sterile specimen container, then transferred into cryo tubes and frozen, senton dry ice	1 week
IgG anti-Factor H	1 mL citrated plasma (blue top) double centrifuged, sent on dry ice	2 weeks
Factor I Antigen	1 mL citrated plasma (blue top) double centrifuged, sent on dry ice	4 weeks
Eculizumab level plasma	1 mL citrated plasma (blue top) double centrifuged, sent on dry ice	2-4 weeks
Eculizumab level Urine	1 mL urine collected in a sterile specimen container, then transferred into cryo tubes and frozen, sent on dry ice	2-4 weeks
Ravulizumab level plasma	1 mL EDTA plasma (lavender top) double centrifuged and frozen within 2 hours of collection, sent on dry ice	2-4 weeks
Ravulizumab level Urine	1 mL urine collected in a sterile specimen container, then transferred into cryo tubes and frozen, sent on dry ice	2-4 weeks
C100/CH50	1 mL serum (red top) centrifuged and frozen within 2 hours of collection, sent on dry ice	1 week

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