



AVAILABLE CENTERS FOR

Direct Immunofluorescence Testing (DIF)

Makati Medical Center

St. Luke's Medical Center

Research Institute for Tropical Medicine

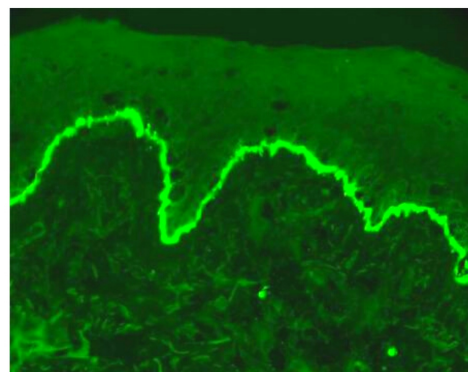
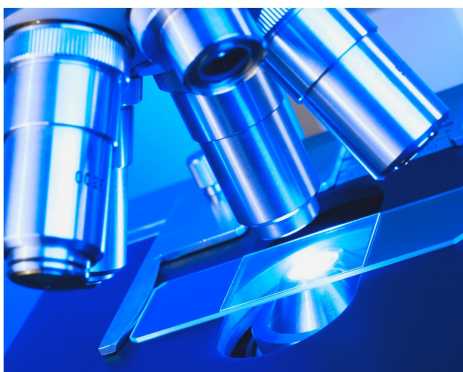
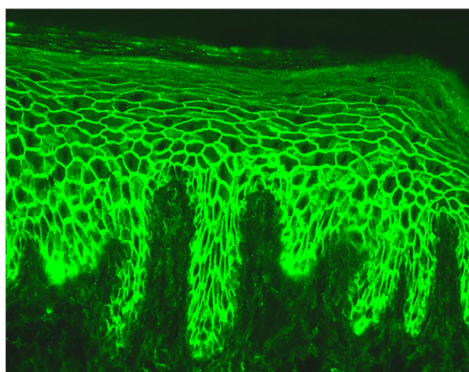
Rizal Medical Center

University of the Philippines - Philippine General Hospital

Jose Reyes Memorial Medical Center

University of Santo Tomas Hospital

Contact us on how to send specimens



Prepared by the **Immunodermatology Subspecialty Core Group**
of the **Philippine Dermatological Society**

www.pds.org.ph

Guide for sending a specimen for DIF

TRANSPORT MEDIUM PREPARATION

Saline-soaked gauze or in 5mL NSS: if specimen can be sent w/n 4 hours

Michels Medium: RITM: 0927 679 4107 RMC: 0921 591 5547

For pick up or sent through courier

Ideally stored at 4-8C or held at room temp max 5 days

HOW TO PERFORM THE BIOPSY

FOR **AUTOIMMUNE BLISTERING DISEASE:** perilesional (2mm from a fresh blister)

FOR **VASCULITIS:** fresh lesion (<48 hours)

FOR **CONNECTIVE TISSUE DISEASE:** lesional skin

WHERE TO SEND SPECIMENS

Note:

See detailed infographics
below per institution

MAKATI MEDICAL CENTER

Anatomic Pathology, 2nd floor Tower 2, Makati Medical Center
#2 Amorsolo St., Legaspi Village, Makati City
88888-999 loc 3231

ST. LUKE'S MEDICAL CENTER

Histopathology, 1st floor of Main Hospital, 279 E Rodriguez Sr. Ave, Quezon City
8723-0101 ext. 4113

RESEARCH INSTITUTE FOR TROPICAL MEDICINE

Dermatology Department, RITM, Filinvest Corporate City, Muntinlupa
0927 679 4107

RIZAL MEDICAL CENTER

1st floor, Main Hospital Building, RMC, Pasig City
0921 591 5547

UNIVERSITY OF THE PHILIPPINES - PHILIPPINE GENERAL HOSPITAL

Dermatology Department, UP-PGH, Taft Ave, Ermita Manila
8554 8400 loc 5105

JOSE REYES MEMORIAL MEDICAL CENTER

Department of Dermatology, JRMMC, Rizal Avenue, Sta. Cruz, Manila
8711 9491

UNIVERSITY OF SANTO TOMAS HOSPITAL

Dermatology - Ambulatory Care Services, Governor Forbes, Avenue Sampaloc, Manila
8731-3001 loc 2638

HOW TO GET THE RESULTS

Sent via email that you will provide

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DIRECT IMMUNOFLUORESCENCE

Direct Immunofluorescence is a laboratory technique useful in the diagnosis of suspected autoimmune disease, connective tissue diseases and vasculitis.

PHYSICIANS GUIDE FOR DIRECT IMMUNOFLUORESCENCE

- 1** Call ahead to inform RMC Laboratory of specimen submission during office hours (0921 591 5547) and wait for confirmation before sending.

2 TRANSPORT MEDIUM PREPARATION

- **Saline-soaked gauze or in 5ml normal saline solution** if specimen can be sent to RMC within 4 hours of collection
- **Special media (Michel's medium)** may be purchased from RMC Department of Dermatology, ideally stored/transported at 4-8 °C, but may be held at room temperature for a maximum of 5 days before processing.
- **Frozen in liquid nitrogen** (specimen should not be allowed to thaw)

3 PERFORMING THE BIOPSY

- Choose an appropriate area to biopsy.
- Prepare the materials needed.
- Label the specimen container with the following: (1) Patient's name, (2) age, (3) gender, (4) site of biopsy, (5) lesional or perilesional; sun-exposed or non sun-exposed.
- Clean the skin with antiseptic solution.
- Inject 2% lidocaine to induce anesthesia.
- Obtain a 4mm punch biopsy of the selected site.
- Place the specimen in the bottle containing Michel's medium or Normal Saline Solution.
Note: Do not mix with formalin or any solution
- Seal cap tightly and check for leaking.

SELECTING THE BIOPSY SITE

For suspected autoimmune blistering disease, obtain specimen from the perilesional skin (2mm from a fresh blister). Avoid biopsies from the lower extremities since it may yield false negative results.

For suspected vasculitis, obtain specimen from the fresh lesion (ideally <48 hours).

For suspected connective tissue disease, obtain specimen from the skin lesion.

4 REQUIRED DOCUMENTS

- **Patient Details** {Complete Name, Age, Gender, Birthdate, Address, Contact Number E-mail address, History, Physical Examination and Clinical Pictures (pictures may be sent to rmcderma.dif@gmail.com)}
- **Referring Physician Details** (Name, Contact Number and Email address)
- **DIF Request Form** (available at RMC Dermatology Department)
- **Previous H&E Result** (if available)

SPECIMEN SUBMISSION, PROCESSING & RELEASING OF RESULTS

- **Coordinate with RMC Laboratory BEFORE sending specimen/s.** For inquiries, contact RMC Laboratory Reception at 0921 591 5547.
- Cut-off Time for Submission of Specimen: **Monday, 4 PM.**
- Results will be **released after 2-3 weeks.**
- Results may be claimed by the patient or an authorized representative at the RMC Laboratory.
- Referring MDs requesting for results may claim results upon presenting a signed request from the patient/patient's representative.

PHYSICIAN'S GUIDE FOR DIRECT IMMUNOFLUORESCENCE

1. CONTACT THE UP-PGH DEPARTMENT OF DERMATOLOGY

8554 8400 loc. 5105

First confirm if DIF is available, make sure to leave your contact details. If available, you will be contacted by the DIF resident of the month via Viber/Telegram.



3. PAYMENT DETAILS

Deposit **P4,515** to the BPI Dermatology Service Foundation, Inc. account number: **4981-0034-41**

Proof of payment (deposit slip / screenshot) to **dermatology.uppggh@up.edu.ph** with subject title: **DIF 2021_LAST NAME,First Name**

For suspected autoimmune blistering disease -
biopsy the perilesional skin (2mm from a fresh blister). Avoid taking from lower extremities.

For suspected vasculitis-
biopsy from fresh lesion (<48 hrs)

For suspected connective tissue disease-
biopsy from the skin lesion.



5. SPECIMEN SUBMISSION, PROCESSING AND RESULTS

Please send to the following:

(Name of DIF Resident of the Month)
Department of Dermatology
G/F, Outpatient Department
Philippine General Hospital
Padre Faura St., Ermita, Manila



2. PATIENT DETAILS AND DOCUMENTS REQUIRED

Endorse the patient to the PGH DIF resident. Kindly include:

- a. DIF Patient Form
- b. Patient Photos



4. PERFORMING THE BIOPSY

1. Choose an appropriate area to obtain the biopsy
2. Label the specimen container with the patient's **name/ age/ sex/ biopsy site/ date of biopsy/ peri-lesional or lesional, sun-exposed or non sun-exposed.**
3. Prepare materials needed. Clean skin with antiseptic solution and inject 2% lidocaine
4. Obtain a 4mm punch biopsy.
5. Send specimen immersed in **Michel's Transport Medium**, in a sterile, waterproof, tightly sealed container, ideally stored/transported at 4-8°C



*Kindly indicate that **delivery** only to be sent during office hours: **Monday to Friday, 7:30am – 4:00pm.**

*Official results are out within 1-2 weeks.



PHYSICIANS GUIDE FOR: DIRECT IMMUNOFLUORESCENCE

TRANSPORT MEDIUM PREPARATION

MICHEL'S MEDIUM

- May be purchased from RITM Derma Department (Contact us in the details below)
- Ideally stored/transported at 4-8 °C
- May be held at room temperature for a maximum of 5 days before processing

SALINE-SOAKED GAUZED

- If able to deliver immediately to the laboratory in less than 4 hours



SELECTING THE BIOPSY SITE

AUTOIMMUNE DISEASES

Perilesional skin (2 mm away from fresh blister)

VASCULITIS

Fresh lesion (less than 48 hours)

CONNECTIVE TISSUE DISEASES

Lesional skin

REQUIRED DOCUMENTS

- DIF Request Form (will be sent to you via e-mail)
- Pictures may be sent to dermpathritm@gmail.com
- Previous H&E result (if available)



SELECTING THE BIOPSY SITE

- Label the specimen container with following:
 - (1) Patient's name
 - (2) Date of Birth
 - (3) Specify: Specimen for DIF
- Clean the skin with antiseptic solution
- Inject 2% Lidocaine to induce anesthesia
- Obtain a 4mm punch biopsy of the selected site
- Place the specimen in the bottle containing Michel's medium or Saline-soaked Gauze
 - NOTE: DO NOT mix formalin or any solution
- Seal cap tightly and check for leaking

SPECIMEN SUBMISSION, PROCESSING & RELEASING

- Call (02) 8807-2628 to 32 local 421 or +63 927 679 4107
- Look for Bullous Club Member before submitting the specimen/s
- Specimen/s may be submitted: Monday-Friday - 08:00 a.m to 05:00 p.m

Procedural Fee	₱4,900
Cutting Fee	₱820
Michel's Solution	₱50 per 2ml vial

CONTACT NUMBERS

Landline: (02) 8807-2628 to 32 local 424
Cellphone No. +63 927 679 4107
E-mail Address: dermpathritm@gmail.com
Mondays to Fridays 08:00 a.m. to 05:00 p.m.



JOSE REYES MEMORIAL MEDICAL CENTER DEPARTMENT OF DERMATOLOGY



PHYSICIAN'S GUIDE DIRECT IMMUNOFLUORESCENCE TEST

Transport medium

Saline-soaked gauze or in 5ml normal saline solution if specimen can be sent to JRRMMC within 4 hours of collection

- Submission of specimen in saline soaked gauze has to be strictly coordinated with an Immunodermatology core team resident prior to sending

Michel's solution

- Ideal storage is at 4°C to 8°C
- May be transported at room temperature (limit to 5 days for optimal state of specimen)

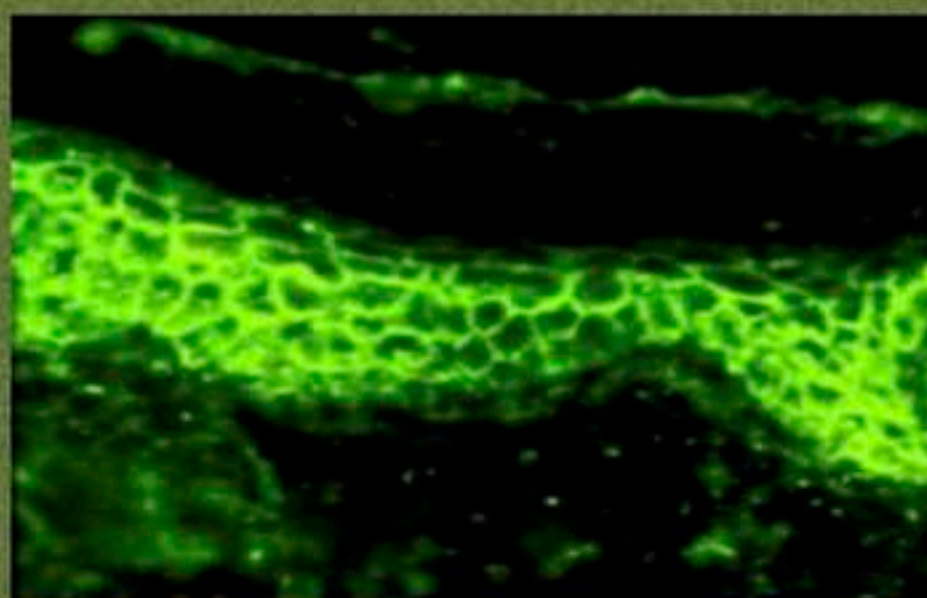
Skin biopsy procedure

- Choose a site for biopsy (perilesional, normal-looking skin)
- Disinfect skin using an antiseptic
- Inject 2% lidocaine solution at the biopsy site
- Use a 4mm biopsy punch to obtain specimen
- Cover biopsied site with sterile dressing
- Place specimen in the transport medium

Fill out and submit DIF test request form

[HTTPS://FORMS.GLE/ZNSN8HKBDRWNOJPH9](https://forms.gle/ZNSN8HKBDRWNOJPH9)

- | | |
|------------------------------|--|
| • Patient's name | • Clinical photos (sent via email Yes or No) |
| • Age and Sex | • Impression |
| • Date of birth | • Biopsy site/s: |
| • Address | • Requesting Doctor |
| • Occupation | • Contact number |
| • History of present illness | • Email address |
| • Physical exam | |



Contact details

8711-9491 local 336
09457143478 (Dr. Cortez)
09611895209 (Dr. Macapagal)
Email: sharinamacapagal@gmail.com



UNIVERSITY OF SANTO TOMAS HOSPITAL

DEPARTMENT OF DERMATOLOGY



PHYSICIAN'S GUIDE TO: DIRECT IMMUNOFLUORESCENCE

1. FILL OUT OUR DIF REQUEST FORM
WITH THE FOLLOWING LINK:

<https://qrco.de/usthdifform>



2. PERFORM THE BIOPSY

- Choose an appropriate biopsy site
- Perform antisepsis on the area
- Infiltrate the area with 2% lidocaine
- Obtain a punch biopsy from the selected anatomic site
- Store the sample in Michel's solution with properly labeled and sealed container (Last name, First name; Site of specimen)



3. SPECIMEN SUBMISSION, PROCESSING, RELEASING

- Call (02) 8731-3001 loc 2638 before submitting the specimen
- Specimen may be submitted every Monday, Thursday, and Saturday 8am- 4pm at USTH Ambulatory Care Services
- Processing Fee: Php 3100
- We will e-mail you once the results are available for claiming



CONTACT US:

TEL: (02) 8731-3001 LOC 2638

E-MAIL: USTHDERMA@YAHOO.COM