



DOH 302-018

State of Washington Department of Health PUBLIC HEALTH LABORATORIES 1610 N.E. 150th Street Shoreline, Washington 98155-9701 Phone: (206) 418-5400 Fax: (206) 364-0072 MTS #1327 CLIA #50D0661453 Http://doh.wa.gov/PHLForms

FOR PHL USE ONLY

Lab Number

Date/Time Received

BIOTERRORISM SUBMITTER

Please Print Clearly

MAIL RESULTS TO: AREA CODE & PHONE # COUNTY FAX # NAME OF PERSON COMPLETING THIS FORM

SPECIMEN INFORMATION

SPECIFIC AGENT SUSPECTED: BACILLUS ANTHRACIS BRUCELLA SPP. BURKHOLDERIA MALLEI / PSEUDOMALLEI COXIELLA BURNETII CLOSTRIDIUM BOTULINUM TOXIN EBOLA VIRUS FRANCISELLA TULARENSIS MERS CoV NON-VARIOLA ORTHOPOX ORTHOPOX VARICELLA ZOSTER VIRUS YERSINIA PESTIS OTHER (Specify)

SPECIMEN TYPE: ISOLATE STOOL SERUM BLOOD PLASMA CSF OROPHARYNGEAL BRONCHIAL WASH SPUTUM WOUND URINE NASOPHARYNGEAL TISSUE FLUID OTHER DATE COLLECTED TIME OF DAY OF ONSET SPECIMEN ID

PATIENT INFORMATION

LAST FIRST MIDDLE ADDRESS CITY STATE ZIP CODE COUNTY MALE FEMALE DATE OF BIRTH CHART OR PATIENT ID NUMBER CLINICIAN CLINICIAN'S PHONE # TEST RESULTS OBTAINED BY: MALDI VITEK

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Preliminary Results:

Date/Time Reported:

Final Results:

Date/Time Reported:

Submitter Comments:

PHL Comments:

ATTENTION: (See Instructions on Reverse Side of Form) DOH 302-018

Barcode area with various symbols and numbers.

GENERAL INSTRUCTIONS:

- PLEASE PRINT LEGIBLY.
- Please fill out the requisition form COMPLETELY. Delays in processing the specimen or reporting results may occur if information is incomplete.
- Each specimen submitted to the Public Health Laboratories (PHL) must be clearly marked with at least two unique identifiers for positive identification.
- Send specimens to the PHL as soon as possible to help ensure valid test results.
- All specimens being shipped must meet DOT(Department of Transportation) and US Postal Service regulations. It is the shipper's responsibility to ensure that packages being shipped meet these regulations. Specimens mailed with insufficient postage will not be delivered by the Postal Service.
- This form replaces:
Microbiology Form Number
DOH 302-013
- Using the incorrect form may delay processing of the specimen.
- To obtain additional collection kits, please contact the PHL Mail Room at (206) 418-5579.

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.