

Specimen number

(Lab use only)

**SAN MATEO COUNTY PUBLIC HEALTH LABORATORY**

**TEST ORDER FORM**

**225 37th Avenue, Building A First Floor San Mateo, CA 94403 Tel.: (650) 573-2500 Fax: (650) 573-2147**

**CLIA#:05D0857622**

**HOSPITAL/CLINIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHYSICIAN/PROVIDER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Please Print Name NPI # Provider Signature

|  |
| --- |
| **SPECIMEN COLLECTION INFO:** |
| **DATE (MM/DD/YYYY):**  |
| **TIME:** [ ]  **AM** [ ]  **PM** |
| **ICD-10:**  |

|  |
| --- |
| **PATIENT NAME (Last Name, First Name):** |
| **MEDICAL RECORD #:** |
| **DATE OF BIRTH:** |
| **SEX:** [ ]  **M** [ ]  **F** [ ]  **OTHER** |
| **PREGNANCY STATUS:** [ ]  **YES** [ ]  **NO** [ ]  **UNKNOWN** |
| **RACE:** [ ] American Indian or Alaska Native [ ] Asian[ ]  Black or African American [ ]  Unknown[ ]  Native Hawaiian or Pacifica Islander [ ]  White[ ]  Other**ETHNICITY:**[ ]  Hispanic[ ]  Non-Hispanic[ ]  Unknown |

|  |
| --- |
| **SPECIMEN SOURCE / SITE: (Please Circle)** |
| Blood (serum, plasma, whole, capillary, venous)Eye Ear Hair NailsUrine RectumFeces UrethraSkin TissueWound (site)\_\_\_\_\_\_\_\_\_\_\_\_Vagina Other\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sputum (regular)Sputum (induced)Bronchial washCSFPleural FluidNasopharyngeal SwabNasal swabNasal aspirateNasopharyngeal swabNasopharyngeal aspirateThroat swab |

**TEST MENU**

**Bacteriology**

[ ]  Bacteria Culture for ID

[ ]  *Bordetella pertussis* PCR

[ ]  Chlamydia Detection by NAAT

[ ]  Gonorrhea Detection by NAAT

[ ]  Trichomonas vaginalis by NAAT

[ ]  Mycoplasma genitalium by NAAT

[ ]  Stool Culture for Bacteria

[ ]  GC Culture Surveillance

[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mycology**

[ ]  Fungus Culture for Yeast/Mold

[ ]  Fungus Culture for ID

[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Syphilis Serology**

[ ]  Syphilis EIA

[ ]  RPR, Quantitative

[ ]  TP-PA

[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mycobacteriology**

[ ]  Acid Fast Smear

[ ]  GeneXpert MTB PCR

[ ]  Mycobacteria Culture

[ ]  Mycobacteria ID by Accuprobe

[ ]  Quantiferon-TB Gold Plus

[ ]  TB Susceptibility Test

[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parasitology**

[ ]  Blood Smear for Parasites

[ ]  Ova and Parasites

[ ]  Parasite for ID

[ ]  Giardia by EIA

[ ]  Cryptosporidium by EIA

[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Chemistry**

[ ]  Blood Lead Screening

[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Virology and Viral Serology**

[ ]  *Herpes simplex* PCR

[ ]  Hepatitis C (Viral Load) Quantitative

[ ]  HIV-1/2 Antibody by EIA

[ ]  HIV-1/2 Confirmation

[ ]  HIV-1 RNA (Viral Load) Quantitative

[ ]  Flu A subtyping

[ ]  Respiratory 4-plex (Flu/SARSCoV2/FluA/B)

[ ]  BioFire Respiratory PCR Panel (22 analytes)

[ ]  Norovirus NAAT

[ ]  Rabies DFA (animals only)

[ ]  SARS-CoV-2 Sequencing

[ ]  Varicella Zoster Virus (VZV) EIA

[ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_