



General Test Requisition

Date received _____ OPHL No. _____

1 - Clinician / Referring Laboratory

Agency ID _____ Courier Code _____

HURON COUNTY HEALTH UNIT
77722B London Road, RR#5
Clinton, ON N0M 1L0

Clinician ID _____

Tel: _____

Fax: _____

2 Patient Information

Health No. / HRN _____	Sex _____	Date of Birth: _____
Patient's Last Name (per OHIP card) _____		First Name (per OHIP card) _____

Patient Address _____

Senders Lab No. _____

Public Health Unit Outbreak No. **0000 - 2009 - 003**

3 - (Test(s) Requested) Please see test codes on reverse)

CODE	DESCRIPTION
	DIRECT INFLUENZA A+B & CULTURE

Specimen type and site

- blood / serum
- faeces
- NP swab
- sputum
- urine
- cervix
- other - _____

4 Reason for Test

- diagnostic
 - needle stick
 - other - _____
 - immune status
 - follow-up
- "HIGH PRIORITY"**

Date Collected: _____

Onset Date: _____

Clinical Information

- fever
- STI
- pregnant
- jaundice
- other - _____
- gastroenteritis
- headache/stiff neck
- encephalitis/meningitis
- immunocompromised
- recent travel _____
- respiratory symptoms
- vesicular rash
- maculopapular rash

Laboratory Result

For laboratory use only

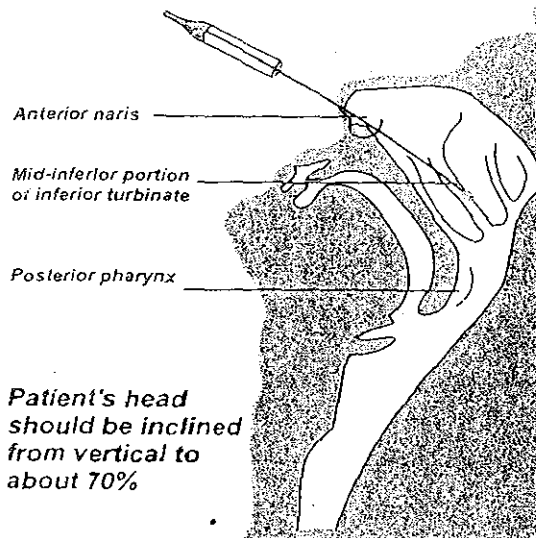
*** REMINDER:** Complete the "OAHPP Influenza Laboratory Surveillance Report Form" and send it with this requisition & the specimen to the lab. (OAHPP form is included in this package)



NASOPHARYNGEAL SPECIMEN COLLECTION



Nasopharyngeal swab method for pertussis culture or respiratory virus detection



The laboratory needs high levels of organism for detection *Bordetella pertussis* or respiratory viruses such as RSV, influenza virus A & B or parainfluenzavirus.

A properly taken nasopharyngeal swab will yield high levels of organism.

- Wear appropriate PPE (below).
- Tilt the patient's head back.
- Remove any excess mucous using the larger cotton tipped swab.
- Gently bend the wire swab while in the sterile package, to give it a slight arc.
- Insert the flexible Nasopharyngeal swab into one nostril.
- Rub the swab back and forth several times, and leave the swab in place a few times to absorb the material.
- Withdraw the swab and insert into transport medium.
- Refrigerate and transport to the lab as soon as possible.

N. B. Rule of thumb to determine when swab is placed properly: insert swab to one-half the distance from the tip of the nose to the tip of the earlobe.

How do I swab ?

Wear appropriate PPE on as per the **How do I protect Myself ?** (Section Below). Gently bend the wire (blue tipped) swab while in the sterile package to give it a slight arc. Tilt the head gently back (about 70°). Remove any excess mucous using the larger wooden, cotton tipped swab. Place the thin wire swab in one nostril about 4-6cm, rub back and forth several times, leave in place a few seconds, withdraw, and place in transport medium. Cut excess wire with scissors, and screw the lid on securely. Place the specimen in the plastic bag provided, and complete the requisition. Transport to the lab as soon as possible. Refrigerate the specimen until it is sent to the lab.

How do I protect myself ?

Risk assessment should be conducted for specimen collection procedures in order to identify associated risks and apply appropriate control measures to reduce risk of disease transmission. This may involve a combination of administrative controls (safe work practices, procedures) and the use of personal protective equipment in accordance to the risk of exposure when collecting the specimen.

Masks and eye protection or face shields should be worn where appropriate to protect the mucous membranes of the eyes, nose and mouth during procedures and patient care activities likely to generate splashes or sprays of blood, body fluids, secretions or excretions. Gowns should be used to protect uncovered skin and prevent soiling of clothing during procedures and patient care activities likely to generate splashes or sprays of blood, body fluids, secretions, or excretions.

WASH HANDS before and after the procedure !