

New Changes to the OAHPP General Test Requisition

General Test Requisition
 ALL Sections of this Form MUST be Completed

1 - Submitter

Courier Code

Clinician Initial / Surname and OHIP / CPSO Number

Tel: Fax:

2 - Patient Information

Date received PHL No.

Health No. Sex Date of Birth:

Medical Record No.

Patient's Last Name (per OHIP card) First Name (per OHIP card)

Patient Address

Postal Code Patient Phone No. ()

Submitter Lab No.

Public Health Unit Outbreak No.

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

CODE	DESCRIPTION
Hepatitis Serology	<input type="checkbox"/> Immunity <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> Diagnosis <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C

Specimen Type and Site

blood / serum faeces Nasopharyngeal
 sputum urine vaginal smear
 urethral cervix BAL
 other - (specify)

Patient Setting

Physician Office/Clinic ER (not admitted)
 Inpatient (ward) Inpatient (ICU) Institution

4 - Reason for Test

diagnostic immune status
 needle stick follow-up
 prenatal chronic condition
 immunocompromised
 post-mortem other - (specify)

Date Collected: Onset Date:

Clinical Information

fever gastroenteritis respiratory symptoms
 STI headache / stiff neck vesicular rash
 pregnant encephalitis / meningitis maculopapular rash
 jaundice
 other - (specify)

influenza high risk - (specify)
 recent travel - (specify)

Laboratory Result For laboratory use only

further report to follow

Date reported: Checked by: Specimen(s) transferred to: Date transferred:

For HIV, please use the HIV serology form. - For referred cultures, please use the reference bacteriology form.
 To re-order this test requisition contact your local Public Health Laboratory and ask for form number 97-44 (09/2009)
 Current versions of Public Health Laboratory requisitions are available at www.oahpp.ca/labrequisition

New Changes to the OAHPP General Test Requisition

Public Health Laboratories

Public Health Laboratories Testing Menu

Please enter the test code(s) desired into Box 3 on the reverse side of this form. For HIV, please use the HIV Serology form.

Code	Test	Code	Test
Blood or Serum			
V 02	Arbovirus Serology	S 09	Toxoplasmosis - Serology
S 01	Cat Scratch Fever (Bacillary angiomatosis, Bartonella) - Serology	V 39 IS	Varicella-Zoster (Chicken Pox) - IgG Immune Status
V 05 IS	Cytomegalovirus (CMV) - IgG Immune Status	V 39 D	Varicella-Zoster (Chicken Pox) - IgG/IgM Diagnosis
V 05 D	Cytomegalovirus (CMV) - IgG/IgM Diagnosis	V 41	Viral Studies Serology - Provide Clinical Information
V 26	Dengue - Serology	V 44	West Nile Virus - Serology
B 04	Diphtheria - Antitoxin	Miscellaneous Specimen Types	
V 08	E Epstein Barr Virus (EBV) - Serology	V 01	Adenovirus Virus Detection Only
V 09	Haemorrhagic Fever (Yellow Fever, Ebola, Lassa) - Serology	B 01	Antimicrobial Susceptibility Testing - Bacteria
V 10	Hantavirus - Serology	M 01	Antimicrobial Susceptibility Testing - Fungi, Nocardia
V 11	Hepatitis A - Total Immune Status	T 01	Antimicrobial Susceptibility Testing - Mycobacteria
V 11 A	Hepatitis A - IgG Immune Status	B 02	Bacterial (Enteric) - Culture
V 12	Hepatitis A - IgM Diagnosis	B 12	Bacterial Vaginosis - Gram Stain
V 13	Hepatitis B - HBs Ag Diagnosis	V 03	Chlamydia trachomatis - Culture/NAAT
V 13 U	Hepatitis B DNA - Nucleic Acid Testing (NAT)	B 07	Chlamydia pneumoniae/Mycoplasma pneumoniae NAAT
V 14	Hepatitis B - HBs Ab Immune Status	B 03	Clostridium difficile - Toxin
V 15	Hepatitis B - HBc Ag Diagnosis	V 05	Cytomegalovirus (CMV) - Culture/Virus Detection
V 16	Hepatitis B - HBc Ab Diagnosis	V 06	Electron Microscopy - Viral Diarrhea
V 17	Hepatitis B - HBc IgM Diagnosis	V 07	Enterovirus (Coxsackie, ECHO, Polio) - Virus Detection Only
V 18	Hepatitis B - HBs Ab Diagnosis	M 03	Fungus - Superficial - Microscopy & Culture
V 19	Hepatitis C - Diagnosis	M 04	Fungus - Systemic - Microscopy & Culture
V 19 G	Hepatitis C RNA - Genotyping	M 07	Fungus or Nocardiform - Referred Culture
V 19 QL	Hepatitis C RNA Qualitative - Nucleic Acid Testing (NAT)	B 11	Gonorrhoea (Neisseria gonorrhoeae, GC) - Culture/NAAT
V 19 QT	Hepatitis C RNA Quantitative - Nucleic Acid Testing (NAT)	V 21	Herpes simplex Virus (HSV) - Virus Detection
V 20	Hepatitis D (Delta Agent) - Diagnosis	V 23	Influenza A, B (Flu) - Virus Detection
V 45	Hepatitis E - Diagnosis	B 05	Legionnaires Disease - Culture/Urine
V 21 IS	Herpes simplex Virus (HSV) - IgG Immune Status	V 24	Measles - Virus Detection
V 22	Human Herpes Virus 6 (Roseola, Exanthema subitum) - Serology	V 25	Molluscum contagiosum (Poxvirus) - Virus Detection
B 05	Legionnaires Disease - Serology	B 07	Mycoplasma pneumoniae/Chlamydia pneumoniae NAAT
S 03	Lyme Disease - Serology	V 27	Mumps - Virus Detection
V 24	IS Measles (Rubeola) - IgG Immune Status	V 28	Norovirus - (Norwalk-like virus)
V 24 D	Measles (Rubeola) - IgG/IgM Diagnosis	P 02	Parasites - Arthropods & Miscellaneous
V 27 IS	Mumps - IgG Immune Status	P 03	Parasites - Tissue
V 27 D	Mumps - IgG/IgM - Diagnosis	P 04	Parasites - Intestinal
V 37 IS	Rubella (German Measles) - IgG Immune Status	V 29	Parainfluenza 1,2,3 - Virus Detection Only
V 37 D	Rubella (German Measles) - IgG/IgM Diagnosis	V 33	Respiratory Syncytial Virus (RSV) - Virus Detection Only
P 03	Parasites - Blood	V 34	Rhinovirus (Common Cold Virus) - Virus Detection Only
V 39 IS	Parvovirus B19 (Fifth Disease, Erythema infectiosum) - IgG Immune Status	V 36	Rotavirus - Virus Detection Only
V 39 D	Parvovirus B19 (Fifth Disease, Erythema infectiosum) - IgG/IgM Diagnosis	V 37	Rubella (German Measles) - Virus Detection
V 31	Q Fever - Serology	S 18 A	Syphilis CSF (VDRL) - Serology
V 32	Rabies Virus - Antibody Screen	S 18 B	Syphilis - Direct Fluorescence
V 35	Rickettsia (Typhus, RMSF) - Serology	T 02	TB - Referred Culture
S 04	Serology - Bacterial (Specify Agent)	T 04	TB (Mycobacteria Culture) - Culture and Smear
S 05	Serology - Mycotic (Specify Agent)	T 05	TB - AMTD Only
S 06	Serology - Parasitic (Specify Agent)	V 43	Torovirus - Virus Detection Only
S 17	Syphilis Screen - Serology	B 09	Urogenital Mycoplasma/Ureaplasma - Culture
V 38 IS	TORCH (Toxoplasma, Rubella, CMV, Herpes simplex) - IgG Immune Status	V 39	Vaccella-Zoster (Chicken Pox) - Virus Detection
V 38 D	TORCH (Toxoplasma, Rubella, CMV, Herpes simplex) - IgG/IgM Diagnosis	V 40	Viral Diarrhea - Virus Detection Only
B 08	Tetanus - Antitoxin	V 42	Virus Isolation/Detection - Provide Clinical Information
		B 10	Whooping Cough (Bordetella pertussis) - Culture/PCR

For additional forms, kits or information contact:

Toronto Public Health Laboratory

81 Resources Road, Toronto, Ontario, M9P 3T1
 PO Box 9000, Terminal 'A', Toronto, Ontario, M5W 1R5

Specimen Handling (416) 235-6316 Help Line (8:00 - 5:00 Monday to Friday) 1-800-640-7221
 Emergency After-Hours Duty Officer (416) 605-3113

Bacteriology (416) 235-5712 Env. Micro (416) 235-5716 Parasitology (416) 235-5722 TB (416) 235-5928
 Molecular Diagnostics (416) 235-5703 Mycology (416) 235-5720 Serology (416) 235-5715 Virology/Chem (416) 235-5725

Regional Public Health Laboratories

Hamilton (905) 385-5379 Orillia (705) 325-7449 S. S. Marie (705) 254-7132 Timmins (705) 267-6633
 Kingston (613) 548-6630 Ottawa (613) 736-6800 Sudbury (705) 564-6917 Windsor (519) 969-4341
 London (519) 455-9310 Peterborough (705) 743-6811 Thunder Bay (807) 622-6449

NEW duplex
Test Code

NEW comment