



Laboratory Test Request Form

https://wp.sbcounty.gov/dph/programs/lab/

CLIA 05D0665059 – Laboratory Director Linda Ward
Monday – Friday 8 a.m. to 5 p.m. – Phone (909) 458-9430 | Fax (909) 986-3590
150 E. Holt Blvd., Ontario, CA 91761

Required Information In Red
Submitter Information: Agency Name DPH CDS, Physician Name Dr. Michael Sequeira, Physician NPI # 1578512844, Address, Phone, Fax.
Patient Information – Affix label if available: Last Name, First Name, MRN/2nd Identifier #, Date of Birth, Gender (Male, Female, Other, Decline to State), Pregnant (Yes, No, Unknown), Street Address, City, State, Zip.
ICD-10 Code(s), Ethnicity (Hispanic, Not Hispanic, Unknown), Race (American Indian/Alaskan Native, Asian, Black/African American, Native Hawaiian/Pacific Islander, White, Other).

Additional Comments/Information: ATTENTION: COVID – WGS Project

Specimen Source (Required)

CT/RLU result, Priority, Symptomatic, Vaccine, Date of first positive test, Submitting Laboratory, Date of Dose #1, Date of second positive test, Date of Dose #2, CalREDIE #.

Contract Tracer Information
Name:
Phone:
E-mail:
Additional Comments:

## TESTING ALGORITHMS

### HIV Combo Ag/Ab Serology

Unless specified otherwise in the request form, specimens that are repeatedly reactive by HIV-1 & 2 Antibody/HIV-1 Antigen Combo EIA will be confirmed by BioRad Geenius HIV-1/2 Supplemental Test. Specimens with discordant results may be tested by qualitative HIV-1 PCR.

### Syphilis Serology

Unless specified otherwise in the request form, specimens testing reactive by Qualitative RPR will be tested by Quantitative RPR and confirmed by TPPA.

### Hepatitis B Serology

Unless specified otherwise in the request form, specimens testing positive for Hepatitis B Surface Antigen will be confirmed with the Hepatitis B Surface Antigen Confirmatory Assay.

### Hepatitis A Serology

Unless specified otherwise in the request form, specimens testing positive for Total Hepatitis A Antibody will be tested for Hepatitis A IgM.

### Mycobacteria Culture

Unless specified otherwise in the request form, respiratory specimens from new patients found smear positive for Acid Fast Bacilli will be tested by the GeneXpert nucleic acid amplification test for Mycobacterium tuberculosis.

### Mycobacterium tuberculosis Drug Susceptibility

Unless specified otherwise in the request form, Mycobacterium tuberculosis culture isolates from new patients shall be tested for drug susceptibility by the MGIT.

### Influenza Virus PCR

Unless specified otherwise in the request form, respiratory specimens testing positive for Influenza A or Influenza B will be further subtyped.

### Sendouts

Further testing may be performed at an external reference laboratory at no additional cost.

For more information, refer to the San Bernardino County Public Health Laboratory website for specimen collection information.

NOTE: Submitters who do not wish to confirm reactive tests as per testing algorithms must enter "**DO NOT CONFIRM**" in the Submitter's Comments section. Additional charges may accrue for confirmatory testing.