

PATIENT INFORMATION

Patient Name (Last)	(First)	(Middle)	Date of Birth	Age	ORDERING PROVIDER
Address	City	State	Zip Code	Phone #	Last Name
Race (Check all that apply)	Ethnicity	Sex at Birth	Current Gender Identity		First Name
<input type="radio"/> American Indian/Alaska Native	<input type="radio"/> Hispanic/Latino	<input type="radio"/> Male	<input type="radio"/> Male	Transgender male-to-female (MTF)	Facility Name
<input type="radio"/> Asian	<input type="radio"/> Non-Hispanic/Latino	<input type="radio"/> Female	<input type="radio"/> Female	Transgender female-to-male (FTM)	Phone #
<input type="radio"/> Native Hawaiian/Other Pacific Islander	<input type="radio"/> Unkn	<input type="radio"/> Unkn	<input type="radio"/> Nonbinary	Other Gender:	Provider Address
<input type="radio"/> White	Occupation	Workplace	Workplace Address		Provider City
<input type="radio"/> Other Race:					State
<input type="radio"/> Unkn					Zip Code
<input type="radio"/> Refused					Hospital Medical Record #

LABORATORY INFORMATION

Submitting Laboratory Name	Person Reporting:	Lab Phone #	Date OL-15C Completed	Date Reported to MD	Specimen sent to State Lab?
Lab City	Lab State	Collection Date	Date Tested	Result Date	Source/Specimen Type

<input type="radio"/> <i>Anaplasma phagocytophilum</i>	<input type="radio"/> PCR	<input type="radio"/> IgG ≥1:128 only	<input type="radio"/> Legionella spp	<input type="radio"/> Culture (1)	<input type="radio"/> DFA	<input type="radio"/> Ag positive
<input type="radio"/> <i>Babesia</i>	<input type="radio"/> IFA IgM (titer)	<input type="radio"/> IgG (titer)	<input type="radio"/> <i>Babesia</i>	<input type="radio"/> Four-fold serologic change (titers)	<input type="radio"/> <i>Legionella</i>	<input type="radio"/> <i>Legionella</i>
<input type="radio"/> Blood smear	<input type="radio"/> PCR	Other:	<input type="radio"/> <i>Babesia microti</i>	<input type="radio"/> <i>Listeria monocytogenes</i> (1)	<input type="radio"/> Culture	<input type="radio"/> PCR
<input type="radio"/> <i>microti</i>	<input type="radio"/> <i>divergens</i>	<input type="radio"/> <i>duncani</i>	<input type="radio"/> <i>Babesia microti</i>	<input type="radio"/> <i>Mercury poisoning</i>	<input type="radio"/> Urine ≥ 35 µg/g creatinine	<input type="radio"/> <i>Mercury</i>
<input type="radio"/> <i>Blastomycetes spp</i>	<input type="radio"/> <i>Bordetella pertussis</i> (titer)	<input type="radio"/> PCR	<input type="radio"/> <i>Blastomycetes spp</i>	<input type="radio"/> <i>Mercury poisoning</i>	<input type="radio"/> <i>Urine</i> ≥ 35 µg/g creatinine	<input type="radio"/> <i>Urine</i> ≥ 15 µg/L
<input type="radio"/> <i>Bordetella pertussis</i> (titer)	<input type="radio"/> Culture (1)	<input type="radio"/> DFA	<input type="radio"/> <i>Bordetella pertussis</i> (titer)	<input type="radio"/> <i>Monkeypox virus</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Borrelia burgdorferi</i> (2)	<input type="radio"/> <i>Borrelia mayonii</i>	<input type="radio"/> <i>Borrelia miyamotoi</i>	<input type="radio"/> <i>Borrelia burgdorferi</i> (2)	<input type="radio"/> <i>Orthopoxvirus</i>	<input type="radio"/> IgM anti-MPXV	<input type="radio"/> Sequencing
<input type="radio"/> <i>Borrelia mayonii</i>	<input type="radio"/> <i>Borrelia miyamotoi</i>	<input type="radio"/> <i>California group virus</i> (3) spp	<input type="radio"/> <i>Borrelia mayonii</i>	<input type="radio"/> <i>Non-variola orthopoxvirus</i>	<input type="radio"/> IHC	<input type="radio"/> Sequencing
<input type="radio"/> <i>California group virus</i> (3) spp	<input type="radio"/> <i>Campylobacter</i> (1,3) spp	<input type="radio"/> Culture	<input type="radio"/> <i>Campylobacter</i> (1,3) spp	<input type="radio"/> <i>Mumps virus</i> (11) (titer)	<input type="radio"/> PCR	<input type="radio"/> PCR
<input type="radio"/> <i>Campylobacter</i> (1,3) spp	<input type="radio"/> <i>Candida auris</i> [report samples from all sites] (1)	<input type="radio"/> PCR	<input type="radio"/> <i>Candida auris</i> [report samples from all sites] (1)	<input type="radio"/> <i>Mycobacterium leprae</i>	<input type="radio"/> <i>Mycobacterium</i>	<input type="radio"/> <i>Mycobacterium</i>
<input type="radio"/> <i>Candida</i> spp, [blood isolates only] (1,3)	<input type="radio"/> <i>Carabapenem-resistant Acinetobacter baumannii</i> (CRAB) (1,4)	<input type="radio"/> <i>Carabapenem-resistant Enterobacteriales</i> (CRE) (1,3,4)	<input type="radio"/> <i>Candida</i> spp, [blood isolates only] (1,3)	<input type="radio"/> <i>Mycobacterium tuberculosis</i> Related Testing (1)	<input type="radio"/> <i>AFB Smear</i>	<input type="radio"/> Positive
<input type="radio"/> <i>Carabapenem-resistant Enterobacteriales</i> (CRE) (1,3,4)	<input type="radio"/> <i>Genus</i> spp	<input type="radio"/> <i>Carabapenem-resistant Pseudomonas aeruginosa</i> (CRPA) (1,4)	<input type="radio"/> <i>Carabapenem-resistant Pseudomonas aeruginosa</i> (CRPA) (1,4)	<input type="radio"/> <i>Legionella</i> spp	<input type="radio"/> Negative	<input type="radio"/> Negative
<input type="radio"/> <i>Genus</i> spp	<input type="radio"/> <i>Carboxyhemoglobin</i> > 5% (2)	<input type="radio"/> <i>Carboxyhemoglobin</i> > 5% (2)	<input type="radio"/> <i>Carboxyhemoglobin</i> > 5% (2)	<input type="radio"/> <i>Culture</i> (1)	<input type="radio"/> If positive	<input type="radio"/> Numerous
<input type="radio"/> <i>Chikungunya virus</i>	<input type="radio"/> <i>Chlamydia trachomatis</i> (test type)	<input type="radio"/> PCR	<input type="radio"/> <i>Chlamydia trachomatis</i> (test type)	<input type="radio"/> <i>DFA</i>	<input type="radio"/> Rare	<input type="radio"/> Indeterminate
<input type="radio"/> <i>Chikungunya virus</i>	<input type="radio"/> <i>Clostridium difficile</i> (5)	<input type="radio"/> <i>Clostridium difficile</i> (5)	<input type="radio"/> <i>Chikungunya virus</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> Few	<input type="radio"/> <i>EIA</i>
<input type="radio"/> <i>Corynebacterium diphtheriae</i> (1)	<input type="radio"/> <i>Cronobacter</i> in infants < 1 year (1,3) spp	<input type="radio"/> <i>Cryptosporidium</i> (3) spp	<input type="radio"/> <i>Corynebacterium diphtheriae</i> (1)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>EIA</i>	<input type="radio"/> <i>EIA</i>
<input type="radio"/> <i>Cryptosporidium</i> (3) spp	<input type="radio"/> <i>EIA</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>Cronobacter</i> in infants < 1 year (1,3) spp	<input type="radio"/> <i>DFA</i>	<input type="radio"/> <i>Microscopy</i>	<input type="radio"/> <i>Microscopy</i>
<input type="radio"/> <i>Cyclospora</i> (1,3) spp	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>Microscopy</i>	<input type="radio"/> <i>Cyclospora</i> (1,3) spp	<input type="radio"/> <i>Other:</i>	<input type="radio"/> <i>Other:</i>	<input type="radio"/> <i>Other:</i>
<input type="radio"/> <i>Dengue virus</i>	<input type="radio"/> <i>Eastern equine encephalitis virus</i>	<input type="radio"/> <i>Ehrlichia chaffeensis</i>	<input type="radio"/> <i>Enterotoxigenic Escherichia coli</i> (ETEC)	<input type="radio"/> <i>Ehrlichia chaffeensis</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Eastern equine encephalitis virus</i>	<input type="radio"/> <i>Enterotoxigenic Escherichia coli</i> (ETEC)	<input type="radio"/> <i>Ehrlichia chaffeensis</i>	<input type="radio"/> <i>Escherichia coli</i> O157 (1)	<input type="radio"/> <i>Enterotoxigenic Escherichia coli</i> (ETEC)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>Culture</i>
<input type="radio"/> <i>Ehrlichia chaffeensis</i>	<input type="radio"/> <i>Escherichia coli</i> O157 (1)	<input type="radio"/> <i>Escherichia coli</i> O157 (1)	<input type="radio"/> <i>Escherichia coli</i> , invasive (1,4)	<input type="radio"/> <i>Escherichia coli</i> O157 (1)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>Culture</i>
<input type="radio"/> <i>Escherichia coli</i> , invasive (1,4)	<input type="radio"/> <i>Giardia</i> (3) spp	<input type="radio"/> <i>Group A Streptococcus</i> , invasive (1,4)	<input type="radio"/> <i>Group B Streptococcus</i> , invasive (1,4)	<input type="radio"/> <i>Giardia</i> (3) spp	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Giardia</i> (3) spp	<input type="radio"/> <i>Group A Streptococcus</i> , invasive (1,4)	<input type="radio"/> <i>Group B Streptococcus</i> , invasive (1,4)	<input type="radio"/> <i>Group B Streptococcus</i> , invasive (1,4)	<input type="radio"/> <i>Group B Streptococcus</i> , invasive (1,4)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Haemophilus ducreyi</i>	<input type="radio"/> <i>Haemophilus influenzae</i> , invasive (1,4)	<input type="radio"/> <i>Haemophilus influenzae</i> , invasive (1,4)	<input type="radio"/> <i>Haemophilus influenzae</i> , invasive (1,4)	<input type="radio"/> <i>Haemophilus influenzae</i> , invasive (1,4)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Haemophilus influenzae</i> , invasive (1,4)	<input type="radio"/> <i>Hepatitis A: IgM anti-HAV</i> (6)	<input type="radio"/> <i>Hepatitis A: IgM anti-HAV</i> (6)	<input type="radio"/> <i>Hepatitis A: IgM anti-HAV</i> (6)	<input type="radio"/> <i>NAAT Positive</i> (6)	<input type="radio"/> <i>NAAT</i>	<input type="radio"/> <i>NAAT</i>
<input type="radio"/> <i>Hepatitis A: IgM anti-HAV</i> (6)	<input type="radio"/> <i>ALT</i>	<input type="radio"/> <i>ALT</i>	<input type="radio"/> <i>ALT</i>	<input type="radio"/> <i>Total Bilirubin</i>	<input type="radio"/> <i>Total Bilirubin</i>	<input type="radio"/> <i>Not Done</i>
<input type="radio"/> <i>Hepatitis B: HBsAg</i> (7)	<input type="radio"/> <i>HBsAg</i> (7)	<input type="radio"/> <i>Pos</i>	<input type="radio"/> <i>Neg</i>	<input type="radio"/> <i>IgM anti-HBc</i>	<input type="radio"/> <i>Pos</i>	<input type="radio"/> <i>Neg</i>
<input type="radio"/> <i>Hepatitis B: HBsAg</i> (7)	<input type="radio"/> <i>HBsAg</i> (2)	<input type="radio"/> <i>Pos</i>	<input type="radio"/> <i>Neg</i>	<input type="radio"/> <i>HBV DNA</i> (2)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Hepatitis B: HBsAg</i> (7)	<input type="radio"/> <i>anti-HBs</i> (7)	<input type="radio"/> <i>Pos (titer)</i>	<input type="radio"/> <i>Neg</i>	<input type="radio"/> <i>Neg</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Hepatitis C (8): Anti-HCV</i>	<input type="radio"/> <i>Anti-HCV</i>	<input type="radio"/> <i>Pos</i>	<input type="radio"/> <i>Neg</i>	<input type="radio"/> <i>Genotype</i>	<input type="radio"/> <i>Genotype</i>	<input type="radio"/> <i>Genotype</i>
<input type="radio"/> <i>Herpes simplex virus (infants < 60 days of age)</i>	<input type="radio"/> <i>Culture</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>IFA</i>	<input type="radio"/> <i>Ag detection</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Herpes simplex virus (infants < 60 days of age)</i>	<input type="radio"/> <i>Histoplasma capsulatum</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>HSTQU</i>	<input type="radio"/> <i>Titer</i>	<input type="radio"/> <i>DFA</i>	<input type="radio"/> <i>Other</i>
<input type="radio"/> <i>HIV Related Testing (Report only to the State) (9)</i>	<input type="radio"/> <i>HIV screen (IA)</i>	<input type="radio"/> <i>Pos</i>	<input type="radio"/> <i>Neg</i>	<input type="radio"/> <i>Antibody Confirmation (WB/IFA/Type-diff)</i>	<input type="radio"/> <i>Antibody Confirmation (WB/IFA/Type-diff)</i>	<input type="radio"/> <i>Antibody Confirmation (WB/IFA/Type-diff)</i>
<input type="radio"/> <i>HIV screen (IA)</i>	<input type="radio"/> <i>HIV-1: Pos</i>	<input type="radio"/> <i>Neg/Ind</i>	<input type="radio"/> <i>HIV-2: Pos</i>	<input type="radio"/> <i>Neg/Ind</i>	<input type="radio"/> <i>NAAT</i>	<input type="radio"/> <i>NAAT</i>
<input type="radio"/> <i>HIV NAAT (or qualitative RNA)</i>	<input type="radio"/> <i>HIV NAAT (or qualitative RNA)</i>	<input type="radio"/> <i>Det</i>	<input type="radio"/> <i>Not Det</i>	<input type="radio"/> <i>Det</i>	<input type="radio"/> <i>NAAT</i>	<input type="radio"/> <i>NAAT</i>
<input type="radio"/> <i>HIV Viral Load (all results)</i>	<input type="radio"/> <i>HIV Viral Load (all results)</i>	<input type="radio"/> <i>copies/mL</i>	<input type="radio"/> <i>copies/mL</i>	<input type="radio"/> <i>copies/mL</i>	<input type="radio"/> <i>copies/mL</i>	<input type="radio"/> <i>copies/mL</i>
<input type="radio"/> <i>HIV Genotype</i>	<input type="radio"/> <i>HIV Genotype</i>	<input type="radio"/> <i>CD4 count:</i>	<input type="radio"/> <i>CD4 count:</i>	<input type="radio"/> <i>cells/uL</i>	<input type="radio"/> <i>cells/uL</i>	<input type="radio"/> <i>%</i>
<input type="radio"/> <i>HPV (Report only to the State) (1)</i>	<input type="radio"/> <i>Biopsy proven</i>	<input type="radio"/> <i>CIN 2</i>	<input type="radio"/> <i>CIN 3</i>	<input type="radio"/> <i>AIS</i>	<input type="radio"/> <i>FTD</i>	<input type="radio"/> <i>FTD</i>
<input type="radio"/> <i>HPV (Report only to the State) (1)</i>	<input type="radio"/> <i>or their equivalent, (specify)</i>	<input type="radio"/> <i>Subtype:</i>	<input type="radio"/> <i>Subtype:</i>	<input type="radio"/> <i>Subtype:</i>	<input type="radio"/> <i>FTD</i>	<input type="radio"/> <i>FTD</i>
<input type="radio"/> <i>Influenza virus (report only to the State)</i>	<input type="radio"/> <i>Rapid antigen</i> (2)	<input type="radio"/> <i>RT-PCR</i>	<input type="radio"/> <i>Type A</i>	<input type="radio"/> <i>Type B</i>	<input type="radio"/> <i>FTD</i>	<input type="radio"/> <i>FTD</i>
<input type="radio"/> <i>Influenza virus (report only to the State)</i>	<input type="radio"/> <i>Type Unknown</i>	<input type="radio"/> <i>Subtype:</i>	<input type="radio"/> <i>Subtype:</i>	<input type="radio"/> <i>Subtype:</i>	<input type="radio"/> <i>FTD</i>	<input type="radio"/> <i>FTD</i>
<input type="radio"/> <i>Lead poisoning (blood lead ≥ 3.5 µg/dL within 48 hrs; < 3.5 µg/dL monthly) (10)</i>	<input type="radio"/> <i>Fingerstick</i>	<input type="radio"/> <i>µg/dL</i>	<input type="radio"/> <i>Venous</i>	<input type="radio"/> <i>µg/dL</i>	<input type="radio"/> <i>µg/dL</i>	<input type="radio"/> <i>µg/dL</i>
<input type="radio"/> <i>Neisseria gonorrhoeae (test type)</i>	<input type="radio"/> <i>Neisseria meningitidis, invasive</i> (1,4)	<input type="radio"/> <i>Neisseria meningitidis, invasive</i> (1,4)	<input type="radio"/> <i>Neisseria meningitidis, invasive</i> (1,4)	<input type="radio"/> <i>Neisseria meningitidis, invasive</i> (1,4)	<input type="radio"/> <i>Culture</i>	<input type="radio"/> <i>Other:</i>
<input type="radio"/> <i>Neisseria meningitidis, invasive</i> (1,4)	<input type="radio"/> <i>Neonatal bacterial sepsis</i> (3,12)	<input type="radio"/> <i>Genus</i>	<input type="radio"/> <i>Neonatal bacterial sepsis</i> (3,12)	<input type="radio"/> <i>Genus</i>	<input type="radio"/> <i>spp</i>	<input type="radio"/> <i>spp</i>
<input type="radio"/> <i>Oropouche virus</i>	<input type="radio"/> <i>Plasmodium</i> (1,3) spp	<input type="radio"/> <i>Plasmodium</i> (1,3) spp	<input type="radio"/> <i>Oropouche virus</i>	<input type="radio"/> <i>Plasmodium</i> (1,3) spp	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Poliovirus</i>	<input type="radio"/> <i>Rabies virus</i>	<input type="radio"/> <i>Rabies virus</i>	<input type="radio"/> <i>Poliovirus</i>	<input type="radio"/> <i>Rabies virus</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Rabies virus</i>	<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>Rabies virus</i>	<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>akari</i>	<input type="radio"/> <i>parkeri</i>	<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>akari</i>	<input type="radio"/> <i>rickettsii</i>	<input type="radio"/> <i>rickettsii (sub-spp californica)</i>
<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>Respiratory syncytial virus</i>	<input type="radio"/> <i>Respiratory syncytial virus</i>	<input type="radio"/> <i>Rickettsia</i>	<input type="radio"/> <i>Respiratory syncytial virus</i>	<input type="radio"/> <i>Respiratory syncytial virus</i>	<input type="radio"/> <i>Respiratory syncytial virus</i>
<input type="radio"/> <i>Rubella virus</i> (11) (titer)	<input type="radio"/> <i>Rubeola virus (Measles)</i> (11) (titer)	<input type="radio"/> <i>Rubella virus</i> (11) (titer)	<input type="radio"/> <i>Rubeola virus (Measles)</i> (11) (titer)	<input type="radio"/> <i>Rubella virus</i> (11) (titer)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>St. Louis encephalitis virus</i>	<input type="radio"/> <i>Salmonella</i> (1,3) (serogroup & type)	<input type="radio"/> <i>Salmonella</i> (1,3) (serogroup & type)	<input type="radio"/> <i>St. Louis encephalitis virus</i>	<input type="radio"/> <i>Salmonella</i> (1,3) (serogroup & type)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Salmonella</i> (1,3) (serogroup & type)	<input type="radio"/> <i>SARS-CoV</i> (1)	<input type="radio"/> <i>IgM/IgG</i>	<input type="radio"/> <i>Salmonella</i> (1,3) (serogroup & type)	<input type="radio"/> <i>SARS-CoV</i> (1)	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>SARS-CoV</i> (1)	<input type="radio"/> <i>SARS-CoV-2</i> (13)	<input type="radio"/> <i>NAAT</i>	<input type="radio"/> <i>SARS-CoV</i> (1)	<input type="radio"/> <i>NAAT</i>	<input type="radio"/> <i>Antigen</i>	<input type="radio"/> <i>Antigen</i>
<input type="radio"/> <i>SARS-CoV-2</i> (13)	<input type="radio"/> <i>Shiga toxin</i> (1)	<input type="radio"/> <i>Stx1</i>	<input type="radio"/> <i>SARS-CoV-2</i> (13)	<input type="radio"/> <i>Stx2</i>	<input type="radio"/> <i>Type Unkn</i>	<input type="radio"/> <i>Type Unkn</i>
<input type="radio"/> <i>Shiga toxin</i> (1)	<input type="radio"/> <i>Shigella</i> (1,3) (serogroup/spp)	<input type="radio"/> <i>Shigella</i> (1,3) (serogroup/spp)	<input type="radio"/> <i>Shiga toxin</i> (1)	<input type="radio"/> <i>Shigella</i> (1,3) (serogroup/spp)	<input type="radio"/> <i>Culture</i>	<input type="radio"/> <i>Culture</i>
<input type="radio"/> <i>Shigella</i> (1,3) (serogroup/spp)	<input type="radio"/> <i>Streptococcus pneumoniae</i>	<input type="radio"/> <i>Culture</i> (1,4)	<input type="radio"/> <i>Streptococcus pneumoniae</i>	<input type="radio"/> <i>Urine antigen</i>	<input type="radio"/> <i>PCR</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Streptococcus pneumoniae</i>	<input type="radio"/> <i>Treponema pallidum</i> (14)	<input type="radio"/> <i>Treponema pallidum</i> (14)	<input type="radio"/> <i>Streptococcus pneumoniae</i>	<input type="radio"/> <i>Other (4)</i>	<input type="radio"/> <i>FTD</i>	<input type="radio"/> <i>FTD</i>
<input type="radio"/> <i>Treponema pallidum</i> (14)	<input type="radio"/> <i>RPR</i> (titer)	<input type="radio"/> <i>RPR</i> (titer)	<input type="radio"/> <i>Treponema pallidum</i> (14)	<input type="radio"/> <i>FTA</i>	<input type="radio"/> <i>FTA</i>	<input type="radio"/> <i>EIA</i>
<input type="radio"/> <i>Treponema pallidum</i> (14)	<input type="radio"/> <i>VDRL</i> (titer)	<input type="radio"/> <i>VDRL</i> (titer)	<input type="radio"/> <i>Treponema pallidum</i> (14)	<input type="radio"/> <i>TP-PA/TPPA</i>	<input type="radio"/> <i>TP-PA/TPPA</i>	<input type="radio"/> <i>FTA-ABS</i>
<input type="radio"/> <i>Trichinella</i>	<input type="radio"/> <i>Varicella-zoster virus</i>	<input type="radio"/> <i>Culture</i>	<input type="radio"/> <i>Trichinella</i>	<input type="radio"/> <i>DFA</i>	<input type="radio"/> <i>Other</i>	<input type="radio"/> <i>Other</i>
<input type="radio"/> <i>Varicella-zoster virus</i>	<input type="radio"/> <i>Vibrio</i> (1,3) spp	<input type="radio"/> <i>Vibrio</i> (1,3) spp	<input type="radio"/> <i>Varicella-zoster virus</i>	<input type="radio"/> <i>Vibrio</i> (1,3) spp	<input type="radio"/> <i>Culture</i>	<input type="radio"/> <i>PCR</i>
<input type="radio"/> <i>Vibrio</i> (1,3) spp	<input type="radio"/> <i>West Nile virus</i>	<input type="radio"/> <i>West Nile virus</i>	<input type="radio"/> <i>Vibrio</i> (1,3) spp	<input type="radio"/>		

Supplemental Information for Isolate or Specimen Submission to the Connecticut State Public Health Laboratory

Reportable Finding	Which specimens should be submitted?
<i>Bordetella pertussis</i> and non-pertussis <i>Bordetella</i> spp.	Submit all isolates.
<i>Campylobacter</i>	Submit all isolates.
<i>Candida auris</i>	Submit first isolate/specimen from any source. Submit upon first identification of colonization and first identification of clinical infection. Submit additional isolates once every 30 days; additional susceptibility testing for clinical management may be requested. See <i>Candida</i> spp. for <i>C. auris</i> isolated from blood.
<i>Candida</i> spp.	Blood isolates only. Submit all <i>C. glabrata</i> and <i>C. auris</i> isolates. For other species, submit isolate upon identification of new species and every 30 calendar days for each species identified.
CRAB	See detailed guidance for multidrug resistant organisms.
CRE	See detailed guidance for multidrug resistant organisms.
<i>Cronobacter</i> in infants (<1 year)	Submit all isolates.
CRPA	See detailed guidance for multidrug resistant organisms.
<i>Corynebacterium diphtheria</i>	Submit all isolates.
<i>Cyclospora</i>	Submit positive stool.
<i>Escherichia coli</i> O157	Submit first isolate per specimen source. If tested by non-culture methods, send isolate if available from reflex culture; send stool/broth specimen if no isolate available.
<i>E. coli</i> , invasive	Cases < 1 year of age or upon request from DPH; from sterile sites. ¹ Submit one isolate per specimen source per collection date.
Group A <i>Streptococcus</i> , invasive	From sterile sites. ¹ Submit one isolate per specimen source per collection date.
Group B <i>Streptococcus</i> , invasive	Cases < 1 year of age only; from sterile sites. ¹ Submit one isolate per specimen source per collection date.
Human papilloma virus	Upon request from DPH, submit fixed issue from the diagnostic specimen for HPV typing.
<i>Haemophilus influenzae</i> , invasive	From sterile sites. ¹ Submit one isolate per specimen source per collection date.
<i>Legionella</i> spp.	Submit all isolates.
<i>Listeria monocytogenes</i>	Submit all isolates.
<i>Mycobacterium tuberculosis</i> Related Testing	Submit first isolate, unless otherwise specified by DPH.
<i>Neisseria meningitidis</i> , invasive	From sterile sites. ¹ Submit one isolate per specimen source per collection date.
<i>Plasmodium</i> spp.	Submit first specimen.
<i>Salmonella</i> spp.	Submit first isolate per specimen source. If tested by non-culture methods, send isolate if available from reflex culture; send stool specimen if no isolate available.
SARS-CoV	Submit all positive specimens.
Shiga toxin	Submit first positive broth or stool specimen.
<i>Shigella</i> spp.	Submit first isolate per specimen source.
<i>Staphylococcus aureus</i> , vancomycin MIC \geq 4 μ g/mL	Submit one isolate per specimen source per collection date. <i>May require discussion with DPH if multiple positives identified depending upon stability of MIC values at clinical lab.</i>
<i>Staphylococcus epidermidis</i> , vancomycin MIC \geq 32 μ g/mL	Submit one isolate per specimen source per collection date. <i>May require discussion with DPH if multiple positives identified depending upon stability of MIC values at clinical lab.</i>
<i>Streptococcus pneumoniae</i>	From sterile sites. ¹ Submit one isolate per specimen source per collection date.
<i>Vibrio</i> spp.	Submit first isolate per specimen source. If tested by non-culture methods, send isolate if available from reflex culture; send stool specimen if no isolate available.
Bioterrorism Agents	
<i>Bacillus anthracis</i> <i>Brucella</i> spp. <i>Burkholderia mallei</i> <i>Burkholderia pseudomallei</i> <i>Variola</i> virus <i>Yersinia pestis</i>	Call DPH immediately Weekdays: (860) 509-7994 Evenings, weekends, holidays: (860) 509-8000 Submit all specimens.

¹ Sterile site: sterile fluids (blood, CSF, pericardial, pleural, peritoneal, joint, or vitreous), bone, internal body site (lymph node, brain, heart, liver, spleen, kidney, pancreas, or ovary), or other normally sterile site, including muscle.



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

DPH Authority to Conduct Public Health Activities

Pursuant to Connecticut General Statutes (CGS) and Regulations of Connecticut State Agencies included below, the requested information is required to be provided to the Department of Public Health (DPH). Health care providers must complete this form for patients diagnosed with any reportable disease, emergency illness, or health condition.

Connecticut General Statutes

[CGS § 19a-2a](#) authorizes the Commissioner of Public Health to employ the most efficient and practical means for the prevention and suppression of disease.

[CGS § 19a-215](#) defines the Commissioner's lists of reportable diseases, emergency illnesses and health conditions and reportable laboratory findings. Reporting requirements and describes the reporting requirements for health care providers and clinical laboratories.

[CGS § 52-146o\(b\)\(1\)](#) authorizes the release of medical information to DPH without patient consent.

Regulations of Connecticut State Agencies

[Conn. Agencies Regs., § 19a-36-A2: List of reportable diseases and laboratory findings](#) includes the reporting category of each disease, procedures for the reporting, and minimum investigation and control measures for each disease. Listed diseases are declared reportable diseases as of the effective date of approval by the commissioner.

[Conn. Agencies Regs., § 19a-36-A3: Persons required to report reportable diseases and laboratory findings](#) identifies professionals responsible for disease reporting including:

- 1) health care providers;
- 2) the administrator serving a public or private school or day care center attended by any person affected or apparently affected with such disease;
- 3) the person in charge of any camp;
- 4) the master or any other person in charge of any vessel lying within the jurisdiction of the state;
- 5) the master or any other person in charge of any aircraft landing within the jurisdiction of the state;
- 6) the owner or person in charge of any establishment producing, handling, or processing dairy products, other food, or non-alcoholic beverages for sale or distribution;
- 7) morticians and funeral directors.

[Conn. Agencies Regs., § 19a-36-A4: Content of report and reporting of reportable diseases and laboratory findings](#) describes what information each report should include:

- 1) name, address and phone number of the person reporting and of the physician attending;
- 2) name, address, date of birth, age, sex, race/ethnicity, and occupation of person affected; and
- 3) the diagnosed or suspected disease, and date of onset.

In addition, the federal [Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#) provides the legal framework necessary to allow health care providers to release protected health information (PHI) and for DPH to collect PHI for public health activities.

Code of Federal Regulations (CFR)

[45 CFR § 164.501: Definitions.](#)

DPH is a "public health authority" Please note: "health oversight agency" includes entities "acting under a grant of authority from or contract with such public agency."

[45 CFR § 164.512: Uses and disclosures for which an authorization or opportunity to agree or object is not required.](#)

[\(a\)\(1\)](#) authorizes health care providers to disclose PHI when required by law which includes statutes or regulations that require the production of PHI.

[\(b\)\(1\)](#) authorizes health care providers to disclose PHI for public health activities.

[\(b\)\(1\)\(i\)](#) authorizes health care providers to disclose PHI to a public health authority authorized by law for the purpose of preventing or controlling disease, injury, or disability, including the reporting of disease, public health surveillance, public health investigations, and public health interventions.

[45 CFR § 164.514: Other requirements relating to uses and disclosures of protected health information.](#)

[\(d\)\(3\)\(iii\)](#) providers may rely upon public officials' position that PHI disclosures are the minimum amount necessary to achieve the purpose of the disclosure.

For questions about this form or disease reporting, please call (860) 509-7994.



State of Connecticut
Department of Public Health
410 Capitol Avenue, MS#11FDS
P.O. Box 340308
Hartford, CT 06134-0308