



Please Print Clearly

State of Washington Department of Health  
**PUBLIC HEALTH LABORATORIES**  
 1610 N.E. 150th Street  
 Shoreline, Washington 98155-9701  
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 #1327 CLIA #50D0661453

FOR PHL USE ONLY

Lab Number

Date/Time Received

## Zika Virus Test Request

Submitting Institution Name: Address:	Area Code & Phone# (    )    -	County
	Fax# (    )    -	Person Completing Form

## Specimen Information

Urine <input type="radio"/>	Serum <input type="radio"/>	CSF <input type="radio"/>	Amniotic Fluid <input type="radio"/>	Tissue <input type="radio"/>	Other <input type="radio"/> : _____	
Specimen Collection Date			MO	DAY	YEAR	Clinician Name
			<input type="text"/>	<input type="text"/>	<input type="text"/>	

## Patient Information

(First Name)		(Middle Initial)		(Last Name)			
Address		City	State	Zip Code	County		
Male <input type="radio"/>	Female <input type="radio"/>	D.O.B	MO	DAY	YEAR	Chart or Patient ID#	Specimen#
		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

Please note: Failure to provide all information requested may result in testing delays or specimen rejection

### PHL USE ONLY

Specimen shipping condition:

Cold   Dry Ice   Ambient   Unknown

#### GENERAL INSTRUCTIONS:

- **PLEASE PRINT LEGIBLY.**
- **Please fill out the requisition form COMPLETELY. Delays in processing the specimen or reporting results may occur if information is incomplete.**
- **Each specimen submitted to the Public Health Laboratories (PHL) must be clearly marked with at least two unique identifiers for positive identification. These include:**
  - **Patient Name**
  - **Chart or Patient ID number**
  - **Specimen number**
  - **Patient Date of Birth**
- **Send specimens to the PHL as soon as possible to help ensure valid test results.**
- **All specimens being shipped must meet DOT (Department of Transportation) and US Postal Service regulations. It is the shippers responsibility to ensure that packages being shipped meet these regulations.**
  - **Copies of the regulations can be obtained by contacting the Postal Service at [Http://a257.g.akamaitech.net/7/257/2422/01jan20061800/edocket.access.gpo.gov/2006/e6-18062.htm](http://a257.g.akamaitech.net/7/257/2422/01jan20061800/edocket.access.gpo.gov/2006/e6-18062.htm)**
- **Specimens mailed with insufficient postage will not be delivered by the Postal Service.**
- **Do NOT use this form to submit specimen for any test request other than Zika. Using the incorrect form may delay processing of the specimen.**