

Date received

yyyy / mm / dd

PHOL No.

General Test Requisition

ALL Sections of this Form MUST be Completed

1 - Submitter	2 - Patient Information		
Courier Code Provide Return Address:	Health No. Medical Record No.	Sex Date of Birth: yyyy / mm / dd	t.
	Patient's Last Name (per OHIP card) Patient Address	First Name (per OHIP card)	
Clinician Initial / Surname and OHIP / CPSO Number	Postal Code Patient Phone Submitter Lab No.	one No.	
	Public Health Unit Outbreak No.		
cc Doctor Information Name: Tel: Lab/Clinic Name: Fax: CPSO #: Address: Postal Code: Fax:	Public Health Investigator Information Name:		
3 - Test(s) Requested (Please see descriptions on reverse) Test: Enter test descriptions below	Hepatitis Serology See Tests Requested box		
4 - 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 □ □ □		
5 - Reason for Test diagnostic immune status needle stick follow-up prenatal chronic condition immunocompromised yyyy / mm / dd post-mortem yyyy / mm / dd other - (specify)	Clinical Information fever STI STI Pregnant jaundice other - (specify) finituation (specify)) Finituation (specify		

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 F-SD-SCG-1000. Current version of Public Health Laboratory requisitions are available at www.publichealthontario.ca/requisitions The personal health information is collected under the authority of the Personal Health Information Protection Act, s.36 (1)(c)(iii) for the purpose of clinical laboratory testing. If you have questions about the collection of this personal health information please contact the PHOL Manager of Customer Service at 416-235-6556 or toll free 1-877-604-4567. F-SD-SCG-1000 (08/2013)





Public Health Laboratories Testing Menu

For HIV, please use the HIV Serology form.

For historical duplex code information please access website at www.publichealthontario.ca/requisitions

Test (enter in Test Description Section 3)	Test (enter in Test Description Section 3)	
Adenovirus (virus detection only)	Mycoplasma pneumoniae - Culture	
Antimicrobial Susceptibility Testing - Bacteria	Mycoplasma pneumoniae - PCR	
Antimicrobial Susceptibility Testing - Fungi, Nocardia	Mumps IgG Immune Status	
Antimicrobial Susceptibility Testing - Mycobacteria	Mumps IgG/IgM Diagnosis	
Arbovirus Serology	Mumps Virus Detection	
Arthropod identification (ticks, lice, mites from human sources)	Neisseria gonorrhoeae - NAAT/Culture	
Bacterial Culture and Sensitivity	Norovirus Detection	
Bacterial Vaginosis - Gram Stain	Parainfluenza 1, 2, 3 (virus detection only)	
Bordetella - PCR	Parvovirus B19 (Fifth Disease, Erythema Infectiosum) IgG Immune Status	
Cat Scratch Fever (Bacilliary angiomatosis, Bartonella)	Parvovirus B19 (Fifth Disease, Erythema Infectiosum) IgG/IgM Diagnosis	
Chlamydia trachomatis - NAAT/Culture	Q Fever Serology	
Chlamydophila pneumoniae - PCR	Rabies Virus Antibody Screen	
Clostridium difficile toxin	Referred Culture - Fungus Nocardia	
Cytomegalovirus (CMV) Culture/Early Antigen	Referred Culture - TB	
Cytomegalovirus (CMV) IgG Immune status	Respiratory Syncytial Virus (RSV) (virus detection only)	
Cytomegalovirus (CMV) IgG/IgM Diagnosis	Rickettsia (Typhus, RMSF) Serology	
Dengue Virus Serology	Rotavirus (virus detection only)	
Diphtheria antitoxin antibody ¹	Rubella (German Measles) IgG Immune Status	
Electron microscopy	Rubella (German Measles) IgG/IgM Diagnosis	
Enterovirus (Coxsackie, ECHO, Polio) (virus detection only)	Rubella (German Measles) Virus Detection	
Epstein Barr Virus (EBV) - EBV VCA IgG/EA/EBNA	Serology - Bacterial (specify agent)	
Epstein Barr Virus (EBV) - EBV VCA IgM	Serology - Bacterial (specify agent) Serology - Mycotic (specify agent)	
Fungus - Superficial - Microscopy & Culture	Serology - Parasitic (specify agent)	
Fungus - Systemic - Microscopy & Culture	Stool parasites	
Haemorrhagic Fever Serology (Yellow Fever, Ebola, Lassa) ²	Syphilis - Direct Fluorescence	
Hantavirus Serology	Syphilis CSF (VDRL)	
Helicobacter pylori serology (H. pylori)		
Hepatitis A Virus Immune Status	Syphilis screen	
Hepatitis A Virus Acute	TB - Culture and Susceptibility (Mycobacteria culture)	
Hepatitis B Virus Immune Status	Tetanus antitoxin antibody	
Hepatitis B Virus Acute	TORCH (Toxoplasma, Rubella, CMV, Herpes Simplex) Diagnostic Screen	
Hepatitis B Virus Acute Hepatitis B Virus Chronic	TORCH (Toxoplasma, Rubella, CMV, Herpes Simplex) IgG Screen Torovirus (virus detection only)	
Hepatitis B - HBclgM ³		
Hepatitis B - HBeAb ³	Toxoplasmosis - Serology	
•	Urogenital mycoplasma/ureaplasma	
Hepatitis B - HBeAg ³	Varicella - Zoster (Chicken Pox) IgG Immune Status	
Hepatitis B Virus DNA ⁴	Varicella - Zoster (Chicken Pox) IgG/IgM Diagnosis	
Hepatitis C Virus Serology	Varicella - Zoster (Chicken Pox) Virus Detection	
Hepatitis C Virus RNA - Genotyping ⁴	Viral Diarrhea (virus detection only)	
Hepatitis C Virus RNA - Quantitative ⁴	Virus Isolation/Detection	
Hepatitis D Virus (Delta Agent)	West Nile Virus - Serology	
Hepatitis E Virus	Worm Identification	
Herpes Simplex Virus (HSV) IgG Immune Status	1. Testing is available only for the rare event of an adverse reaction to	
Herpes Simplex Virus (HSV) Virus Detection	Diphtheria vaccine or the possibility of humoral immunodeficiency in the	
Human Herpes Virus 6 (Roseola, Exanthema Subitum) - PCR	patient. This must be indicated on the test requisition in order for testing to	
Influenza A, B (Flu) Virus Detection	be performed.	
Legionnaires Disease	2. Contact Medical Officer of Health and Public Health Ontario Laboratory	
Lyme Disease - Serology	before ordering, 416.235.6556 or toll: 1.877.604.4567.	
Measles IgG Immune Status		
Measles IgG/IgM Diagnosis	3. Individual Hepatitis B virus markers may be ordered individually.	
Measles Virus Detection Molluscum contagiosum (Poxvirus) Virus Detection	4. The General Test Requisition is not required. Use the form F-C-HE-036, Hepatitis PCR Requisition and Information Form located at: www.publichealthontario.ca/requisitions	

Public Health Ontario Laboratories

Customer Service Centre

7:30 am - 7:00 pm, Monday to Friday 8:00 am - 3:45 pm, Saturday

tel:	416.235.6556
toll free:	1.877.604.4567
fax:	416.235.6552
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Emergency After-Hours Duty Officer

tel: 416.605.3113 website: www.publichealthontario.ca

