DEPARTMENT OF HEALTH

Submit Sample(s) to:
MN Public Health Laboratory
Infectious Disease Lab
601 Robert St. N
St. Paul, MN 55155

Phone (651) 201-4538
Fax (877) 694-4502
Specimen Receiving (651) 201-4953
CLIA# 24D0651409

MDH Lab Use Only
Condition:
Ambient
Refrigerated
Frozen
Barcode Label

Vaccine Preventable Disease (VPD) Project 1712 Form

* Required Fields

Submitter

*Submitting Facility:

*Address:

City: State: Zip:

Name of Person Filling Out Form:

Phone # for questions/alert values:

State of Submitting PHL:

Project Number: 1712

Patient

*Last Name:

*First Name: MI:

County: State:

Patient MRN #:

*DOB (mm/dd/yyyy):

Sex:
- Male
- Female
- Other or Unknown

Ethnicity:
- Hispanic/Latino
- Non-Hispanic/Latino
- Not Provided

Race:
- American Indian/Alaska Native
- Asian
- Black
- Native Hawaiian/Pacific Islander
- White
- Other not listed
- Unknown/Not Provided

Specimen

Submitter Sample ID:

*Date of Collection (mm/dd/yyyy):

Time of Collection (##:##): AM PM

*Source:
- BAL
- Blood
- CSF
- Nasal Wash
- NP aspirate
- Plasma
- Scab/lesion
- Serum Acute
- Serum Convalescent
- Urine
- Extracted nucleic acid
- Swab
  - Buccal
  - Nasal
  - Nasopharyngeal
  - Throat

Other, specify:

For questions or packing and shipping information please contact
MN VPD submissions: health.vpd.submissions@state.mn.us

https://www.health.state.mn.us/diseases/idlab/vpd.html

Test and Epidemiology Information

Test Information

Submitting Lab Results

Cuture: Serology IgM:

PCR (include Ct): Serology IgG:

Test Requested

Isolate	Specimen
Bordetella species PCR (BORDPCR)	Bordetella species PCR (BORDPCR)
Haemophilus influenzae Serotyping PCR - Isolate (HFLUSERO)	Haemophilus influenzae PCR (HFLUPCRS)
Measles Virus RT-PCR (MEVPCR)	Measles Virus RT-PCR (MEVPCR)
Measles Vaccine Assay RT-PCR (MEVAPCR)	Measles Vaccine Assay RT-PCR (MEVAPCR)
Measles Virus Genotyping (MEVGENO)	Measles Virus Genotyping (MEVGENO)
Mumps Virus RT-PCR (MUVPCR)	Mumps Virus RT-PCR (MUVPCR)
Mumps Virus Genotyping (MUVGENO)	Mumps Virus Genotyping (MUVGENO)
Neisseria meningitidis Serotyping PCR - Isolate (NMENSERO)	Neisseria meningitidis PCR Specimen (NMENPCRS)
Rubella Virus RT-PCR (RUVPCR)	Rubella Virus RT-PCR (RUVPCR)
Rubella Virus Genotyping (RUVGENO)	Rubella Virus Genotyping (RUVGENO)
Varicella-zoster Virus PCR (VZV_PCR)	Varicella-zoster Virus PCR (VZV_PCR)
Varicella-zoster Virus Genotyping (VZVGENO)	Varicella-zoster Virus Genotyping (VZVGENO)

Patient Information

*Was patient vaccinated for tested disease?
Yes No Unknown

If YES: date of last vaccination:

Vaccine Type:
- MMR
- DTap
- PCV13
- MCV4
- MMRV
- Tdap
- PPSV23
- MSPV4
- Varicella
- Hib

Symptoms:

Date of symptom onset:

Date of rash onset:

Antibiotic treatment:

Cough duration:

Submitting lab comments: