

REPORTABLE TESTS TO THE STATE

ADULTS – ANY POSITIVE RESULT:

- HEP B VIRUS
- RSV
- INFLUENZA
- HIV

INFANT

- **HIV – ANY TEST RESULT ON AN INFANT (POSITIVE OR NEGATIVE)**

SEND OUTS

- THE LIST IS POSTED IN SEND OUTS –
- ONCE WE GET THE SEND OUT REPORT BACK IT IS **VVMC LAB'S** RESPONSIBILITY TO SEND THE RESULTS TO THE STATE
- THE SEND OUT DESIGNEE WILL FILL OUT THE FORM.

PROCESS

Tech

1. There is a special report form that will need to be filled out with the correct information.
2. Forms are located on the file cabinet between the SUDS benches next to the IRIS.
3. Completed forms will be brought to a Lab Assistant to fax.

Lab Assistants

4. There are 2 numbers that the reports need to be faxed.
5. The Lab Assistant will fax the report to the state to **both** the fax numbers that are listed on the Communication Board.
6. The report will need to be faxed within **5** days.



Arizona Department of Health Services
 Bureau of Epidemiology & Disease Control
 Office of Infectious Disease Services

Tel: (602) 364-3676

Fax: (602) 364-3199

FAX TO BOTH :

FAX: (602) 364-3198

LABORATORY REPORT FORM

Reporting Laboratory

Laboratory Name:	
Laboratory Director:	
Address:	
Phone & email:	
Contact:	

Patient

Patient Name:	
Date of Birth:	
Gender:	<input checked="" type="radio"/> M <input type="radio"/> F <input type="radio"/> U <input type="radio"/> T
Address:	
Phone & email:	

Specimen

Lab Reference/Accn#:	
Collection Date:	
Specimen Type:	
Test Type:	
Result:	
Result date:	

Facility

Physician:	
Facility:	
Address:	
Phone & email:	

Lab Director or Designee Signature

Date

Revised 1/11/13

PRINT

SAVE