KDHE Influenza Virus Specimen Submission Form

(Revised 9/2011)

- ! ***Print neatly*** *using capital letters.*
- ! *Form must be filled out* ***completely****.*
- ! *Hospitals may submit a specimen for any hospitalized patient.*
- ! *ILINet clinics should submit 1 specimen per week from a patient with ILI (Fever with cough and/or sore throat).*

FACILITY INFORMATION

Facility Name: _____ **KDHE Lab Facility ID:** _____

The facility ID number must represent the primary location to which results are to be sent, not a secondary shipping facility. Call 785.296.1620 with questions.

Provider Name: _____ **Contact #:** _____ **Fax #:** _____

Address: _____ **City:** _____ **County:** _____

PATIENT INFORMATION

Last Name: _____ **First Name:** _____

Date of Birth: _____ **Phone:** _____ **Address:** _____

City: _____ **County:** _____ **State:** _____ **Zip:** _____

Race:
- ☐ WHITE
- ☐ BLACK
- ☐ ASIAN
- ☐ AMER INDIAN/ALASKA NATIVE
- ☐ NATIVE HAWAIIAN/PAC ISLANDER

Ethnicity:
- ☐ HISPANIC
- ☐ NON-HISPANIC

Sex:
- ☐ MALE
- ☐ FEMALE

Has patient received 2011-2012 flu vaccine?
- ☐ YES → **Vaccination date(s):** _____
- ☐ NO
- ☐ UNKNOWN

ILLNESS INFORMATION

Symptoms (check all that apply):
- ☐ FEVER _____°F
- ☐ COUGH
- ☐ SORE THROAT

Hospitalized?
- ☐ YES → **Hospital:** _____
- ☐ NO
- ☐ UNKNOWN

Illness Onset Date: _____

Died?
- ☐ YES → **Date of death:** _____
- ☐ NO

SPECIMEN INFORMATION

Specimen collection date: _____

Source:
- ☐ NASOPHARYNGEAL (NP) SWAB*
  **Preferred for PCR testing*
- ☐ NASAL SWAB
- ☐ COMBINED NP & THROAT SWAB
- ☐ NASAL ASPIRATE
- ☐ OTHER (SPECIFY): _____

Rapid flu test result:
- ☐ POSITIVE
- ☐ NEGATIVE
- ☐ NOT DONE

SPECIAL INSTRUCTIONS

Packing and shipping instructions: www.kdheks.gov/labs/downloads/Virus_pictorial_guide.pdf
Packing or shipping questions: Contact KDHE Laboratory at 785.296.1620.
Epidemiology-related questions: Contact KDHE at 877.427.7317.
This form is available at: www.kdheks.gov/flu/download/KDHE_Influenza_Specimen_Submission_Form.pdf

Ship To:

Kansas Health and Environmental Laboratories
Forbes Field, Building #740
Topeka, KS 66620-0001

KDHE Use Only: