

# Suspicious Packages / Material for the Investigation of Agents of Bioterrorism

*Public Health Laboratories  
Ontario Agency for Health Protection and Promotion*

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## Suspicious Packages/Material for the Investigation of Agents of Bioterrorism:

### Guidelines for Submission

The decision to test a sample for agents of bioterrorism is made by the police in consultation with the local Health Unit. All suspicious packages presenting a bioterrorism threat are also treated as legal specimens. Since these materials may become part of a criminal trial a complete record of the chain of custody is required.

#### PROCESS

##### 1) Sample Collection

- Prior to submission of any sample, contact OAHPP Public Health Laboratory Bioresponse Team.
  - **Business Hours: 416-235-6012 (toll-free 1-866-998-0901).**
  - **After Hours number: 416-524-0414.**
  - 24-hour alternate contact number: 416-458-9271
- Ensure collection and packaging complies with the Public Health Requisition for Submitting Environmental Samples for Laboratory Testing. (see PHL Test Requisition for Submitting Environmental Samples Form)

##### 2) Transportation

- Suspicious packages are transported to the Public Health Laboratory by the Law Enforcement Agency or their delegate. The Law Enforcement Agency or delegate maintains chain of custody (COC) during transport.
- Suspicious packages must be submitted to the Security Desk.

### 3) Sample Receipt

During normal business hours (8:00 am – 5:00 pm, Monday to Friday)

- The Bioresponse Team (BT) member will receive the package and examine it to determine that it is properly packaged (see procedure for packaging) and a specimen submission requisition form (F-C-BT-002) has been completed.
- The submitter and the BT member will complete and sign the sample submission label and affix it to the back of the specimen submission requisition form.
- The BT member will sign the submitter's form to acknowledge receipt of the package.

Non-business hours, weekends and holidays.

- The security guard will receive the package and ensure that a specimen submission requisition form has been completed.
- The submitter and the security guard will complete and sign the sample submission label and affix it to the back of the specimen submission requisition form.
- The security guard will sign the submitters form to acknowledge receipt of the package.

Protocol for Submitting Environmental Samples for Laboratory Testing

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Packaging Material Needed

- Three zip lock bags per specimen
- Duct Tape
- Red permanent marker
- Chain of Custody Form

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Procedure for Packaging

- Place the suspected environmental material in the zip lock bag and seal completely
- Place the zip lock-sealed envelope in a 2nd zip lock bag and seal completely
- Place the double sealed zip lock in a 3rd zip lock bag and seal completely
- Label the outer zip lock bag: BIOHAZARD
- Place the triple bagged sample into the airtight container and seal container firmly
- Rinse outer bag with 1% bleach. Let it sit for 10 minutes before rinsing
- Label the outer bag: BIOHAZARD
- Complete the chain of custody form and place it around the container with a rubber band
- Tape test requisition form to the outside bag – DO NOT USE STAPLES

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Sample Size/Number


- A single sample per incident is adequate
- A minimal amount of material is necessary – no more than a few grams; in the case of a letter or envelope, package the whole item

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Responsibility for Transport

- Local law enforcement is responsible for arranging for specimen transport.

Public Health Laboratory Test Requisition Form for Submitting Environmental Samples for Laboratory Testing

 <b>Ontario</b> <small>Agency for Health Protection and Promotion                  Agence de protection et de promotion de la santé</small>		<b>Public Health Laboratory</b> <b>Test Requisition for Submitting Environmental Samples for Laboratory Testing</b>		PHL No. <b>B.T.</b>
Date Collected: <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <small>yyyy / mm / dd</small>		Time Collected: <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <small>hr / min / am / pm</small>		PHL Case No. <input type="text"/>
Collector By: <input type="text"/> <input type="text"/> <input type="text"/> <small>Last Name / First Name</small>		Police Officer Badge No. & Police Contact: <input type="text"/>		Date Received <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <small>yyyy / mm / dd</small>
Collector's Phone: <input type="text"/>		Police Unit Address or return: <input type="text"/>		Time Received <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <small>hr / min / am / pm</small>
Name of Health Unit Contact: <input type="text"/> <input type="text"/> <input type="text"/> <small>Last Name / First Name</small>		Police Telephone: <input type="text"/>		
Health Unit: <input type="text"/>		Incident Site: <input type="text"/>		
Health Unit Telephone: <input type="text"/>		Address: <input type="text"/>		
Description of Material Submitted for Examination: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Is a Chain of Custody form included? <input type="radio"/> Yes <input type="radio"/> No		
<b>Laboratory Results:</b>				
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
Tested By: <input type="text"/> <input type="text"/> <input type="text"/> <small>Last Name / First Name</small>	Results: <input type="checkbox"/> Phoned <input type="checkbox"/> Faxed <input type="checkbox"/> Hard Copy			
Date Tested: <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <small>yyyy / mm / dd</small>	Checked By: <input type="text"/> <input type="text"/> <input type="text"/> <small>Last Name / First Name</small>			
Date Reported: <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <small>yyyy / mm / dd</small>	Results Telephoned to: <input type="text"/> <input type="text"/> <input type="text"/> <small>Last Name / First Name</small>			
Time Reported: <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <small>hr / min / am / pm</small>	Organization: <input type="text"/>	Telephone No.: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>( )</small>		
CONFIDENTIAL WHEN COMPLETED				
F-C-BT-002-001				

Note: Most recent version of the Guide is available on [www.oahpp.ca](http://www.oahpp.ca)

**Sample Submission Label**

Attach to the back of the PHL Test Requisition for Submitting Environmental Samples Form

Submitted by: _____ (Print Name)
Signature: _____
Date: _____ Time: _____ yyyy/mm/dd
Received by: _____ (Print Name)
Signature: _____
<b>Secured in</b> _____
Date: _____ Time: _____ yyyy/mm/dd