

ENTERIC DISEASE INVESTIGATION MULTIPLE SPECIMEN SUBMISSION FORM

<p>1. HEALTH UNIT RETURN ADDRESS</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	<p>3. OUTBREAK NUMBER</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 33%; height: 25px;"></td> <td style="border: 1px solid black; width: 33%; height: 25px;"></td> <td style="border: 1px solid black; width: 33%; height: 25px;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">HU</td> <td style="text-align: center; font-size: small;">YY</td> <td style="text-align: center; font-size: small;">FILE #</td> </tr> </table>				HU	YY	FILE #
HU	YY	FILE #					
<p>2. HEALTH UNIT CONTACT</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	<p>4. LOCATION (INSTITUTION /OCCASION/DAY CARE CENTRE etc.)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>						
<p>Telephone: ()</p>	<p>5. ADDRESS</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>						
<p>Fax: ()</p>	<p>Telephone: ()</p>						
<p>Fax: ()</p>	<p>Fax: ()</p>						

<p>6. INITIAL OR FOLLOW-UP SPECIMENS (CHECK BELOW)</p> <p><input type="checkbox"/> INITIAL <input type="checkbox"/> FOLLOW-UP</p>	<p>7. OTHER HEALTH UNITS INVOLVED HU # - YY - FILE # IF AVAILABLE</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
<p>8. SPECIFY SUSPECT /CONFIRMED AGENT OR ADDITIONAL TEST REQUEST</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>	

LABEL	PHL LAB. NO.	LABORATORY RESULTS AND COMMENTS <input type="checkbox"/> Bacteriology <input type="checkbox"/> Parasitology <input type="checkbox"/> Virology

For PHL use only.

DATE RECEIVED: _____ DATE REPORTED: _____

**ENTERIC DISEASE INVESTIGATION
MULTIPLE SPECIMEN SUBMISSION**

Tests Available:

A. Bacteriology

Routine Enteric Bacteriology

- *Salmonella* (including lactose and sucrose fermenters)
- *Shigella*
- *Yersinia*
- *Campylobacter*
- *E.coli* 0157:H7
- *Clostridium perfringens* enterotoxin

Non-Routine Enteric Bacteriology (Performed selectively based on clinical and epidemiological information).

- *Vibrio* species
- *E.coli* (enteropathogenic, enterotoxigenic, enteroinvasive, enterohaemorrhagic)

B. Parasitology

- *Entamoeba histolytica*
- *Giardia lamblia*
- *Dientamoeba fragilis*
- *Cryptosporidium*
- *Cyclospora*

C. Virology

- Electron microscopy
- Rotavirus antigen detection
- Culture (based on symptoms, time of year, other results, etc)