INSTRUCTIONS FOR NB SPIN SITE: Send completed requisition and refrigerated specimen to your laboratory as soon as possible. Specimen and requisition must be identified with patient's full name and medicare number.

INSTRUCTIONS FOR REGIONAL LAB: Send completed requisition and refrigerated specimen to the Dr. G. L. Dumont University Hospital Centre Virology Laboratory (address at bottom of form). Do not separate requisition from specimen.

<table>
<thead>
<tr>
<th>Referred hospital</th>
<th>Specimen #</th>
<th>Patient name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antibiotics</td>
<td>Allergies</td>
<td>Date of birth: y m d</td>
</tr>
<tr>
<td>Site</td>
<td></td>
<td>Medicare #</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Address</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Attending physician</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Collection date: y m d</td>
</tr>
</tbody>
</table>

Test

Please specify required test: 

- PCR Influenza surveillance

Specimen

- Nasopharyngeal swab
- Nasopharyngeal aspiration
- Nasal swab
- Other:

Relevant clinical and epidemiological information

- Fever: Yes ☒ No ☐ Unk ☐
- Pregnant: Yes ☒ No ☐ Unk ☐
- Received Oseltamivir/Zanamivir: Yes ☒ No ☐ Unk ☐ Specify:
- Received current seasonal influenza vaccine: Yes ☒ No ☐ Unk ☐ Specify:
- Contact with infectious person with respiratory illness within the last 10 days: Yes ☒ No ☐ Unk ☐ Specify:
- Travelled in the last 10 days: Yes ☒ No ☐ Unk ☐ Specify:
- Exposure to swine or poultry in the last 10 days: Yes ☒ No ☐ Unk ☐ Specify:

Laboratory use only

- Bathurst
- Campbelton
- Caraquet
- Edmundston
- Fredericton
- Georges L.-Dumont
- Grand-Sault
- Lameque
- Miramichi
- Moncton Hospital
- Tracadie

** The original requisition and the specimen must be sent to: DR ALFRED BASTARACHE LABORATORY, DR G.L. DUMONT UNIVERSITY HOSPITAL CENTRE, VIROLOGY LABORATORY 330 University avenue, Moncton, N.B. PH: (506) 862-4140 Fax: (506) 862-4827

Date and hour received in G.L.-Dumont

Last updated: September 2018