Houston Department of
Health and Human Services

Bureau of Laboratory Services
1115 S. Braeswood Blvd., Houston, Texas 77030
Phone: (713) 558-3400 Fax (713) 794-9697

All of the following information is REQUIRED

Collection Date: _____ Time: _____

Specimen Source: _____

Submitting Facility: _____

Physician: _____Ph: _____

* *CENTRIFUGE TIME (If Applicable)* _____

Patient Name: _____

MR #: _____

SS#: _____

DOB: _____ Race: _____ Sex: _____

# VIROLOGY/SEROLOGY

## SYPHILIS SEROLOGY

____6000 RPR, QUALITATIVE/QUANTITATIVE
____6008 TP-PA
____0000TP-PA IF RPR Reactive

## HEPATITIS SEROLOGY

Hepatitis C Virus EIA
____6415 HCV

Hepatitis B Virus EIA
____6410 HBsAg
____6430 Anti-HBs
____6440 Anti-HBc
____6450 Anti-HBc IgM
____6460 HBeAg
____6470 Anti-HBe

Hepatitis A Virus EIA
____6480 HAV Total
____6490 HAV IgM-Ab

## VIROLOGY

Viral & Chlamydial Isolation
____6190 Herpes Simplex Culture
____6210 Cytomegalovirus Culture
____6320 Chlamydia Trachomatis Culture
____6331 Viral Screen
____6340 Enterovirus Typing
____6106 Flu PCR
____2257/2258 Norovirus
____0000 Other _____

## VIRAL SEROLOGY

EIA for Antibody Presence
____6020 Rubella
____6030 Rubella IgM Antibody
____6040 Mumps
____6050 Varicella-Zoster Virus
____6060 Rubeola
____6500 HIV EIA
____6510 HIV Western Blot
____6070 Toxoplasmosis IgG

MIA for Antibody Presence
- Arbovirus MIA-
____6136 Serum ____6139 CSF

## RABIES TESTING

____6570 Fluorescence, Direct

## MISCELLANEOUS

____6290 Rotavirus Stool, Direct EIA

## SURVEILLANCE TESTING

__ 250 RPR
__ 251 TP-PA
__ 252 HIV
__ 253 HCV
__ 254 HBeAg/Anti-HBe
__ 255 HBV
__ 256 HAV (Total/IgM)
__ 258 Arbovirus
__ 259 Varicella-Zoster Ab
__ 260 Rubella
__ 261 Rubeola
__ 262 Mumps
__ 263 Viral Screen
__ 264 Enterovirus Typing
__ 265 Influenza PCR
__ 266 Other_____