

Bloodborne Pathogen Exposure Laboratory Requisition

REQUIRED: COMPLETE ALL INFOI INCOMPLETE FORMS WILL		
SOURCE TESTING		Place patient label here
Ordering Physician:		
Collection Date/Time:		Location/Room # for drawing the Source Mother
Collected by:	Site:	for phlebotomy: (For breast milk exposure only)
CHECK APPROPIATE BOX (only one per requisition): BODY FLUID EXPOSURE: Source Patient Blood BREAST MILK EXPOSURE: Source Mother Blood Milk		
Nursing Notes:		

Drawing Blood for Source Patient Testing (including Breast Milk Exposures)

- Label & draw 2 Red Gel/Gold SST tubes and 1 pink tube (or 3 gold microtainers for source baby) and send to the main laboratory with this form. If source is not an ED patient, please call laboratory (x55260) to request a phlebotomist.
- Please note that a blood draw is also required on the source mother following a breast milk exposure. Provide
 the location above where the source mother can be found. Have source mother registered via phone (x55220)
 with UCH patient access if she has already been discharged.

Breast Milk Exposure Testing:

• Collect remainder of milk (if available) and newly expressed milk from source mother. Label each container with the source mother's patient label and collection date/time. Send milk to the main laboratory with this form.

Laboratory:

Order the following tests:

Breast Milk Testing	Blood Testing (Order holds for 1 red/gold and 1 pink/lav)
Order tests:	Order tests:
BREAST MILK EXPOSURE TESTING LAB8188	SOURCE PATIENT TESTING LAB8187
This test panel includes:	This test panel includes:
CMV Culture	Rapid HIV
CMV PCR	Hepatitis B Ag
Send ASAP on next scheduled courier.	Hepatitis C
	Reflex testing:
	If Confirmatory HIV test is positive, then:
	Send out pink tube for HIV RNA Quantification
	If HCV Ab test is positive, then:
	Send out 2 nd red/gold tube for HCV RNA Quantification

^{***}As soon as testing is completed, results will be available in the patient EMR.***