

Affix Barcode

TEST REQUISITION FORM - COVID 19 ANTIBODY TESTING

PATIENT DEMOGRAPHICS:

Patient Name:
 Patient Address:
 Contact No:
 E-Mail ID:
 Date of Birth: [][][][][][][][][] Male Female
 Years Months Days
 Height ft/cm Weightkg

CLIENT DETAILS:

CC Code:
 CC Name:

REFERRING DOCTOR DETAILS:

Name:
 Code:

TEST DETAILS:

Test Code	Test Description

SPECIMEN INFORMATION:

Sample Drawn date: DD/MM/YY
 Drawn Time: AM/PM
 Phlebotomist Emp ID:

SPECIMEN TYPE:

Serum Plasma EDTA/FL/CIT/ACD

PREVIOUS HISTORY OF CORONA:

Asymptomatic Mild to Moderate
 Severe Symptoms No Symptoms

TEMPERATURE SENT:

TEMPERATURE RECEIVED:

Ambient: 25±5°C Ambient: 25±5°C
 Refrigerated: 2-8°C Refrigerated: 2-8°C
 Frozen: -10 to -30°C Frozen: -10 to -30°C

As per ICMR guidelines please note the possible groups/community/population based on specific requirement for sero-survey by using ELISA/ CLIA test (please tick appropriate category):

- A) Immunocompromised patients
- B) Individuals in containment zone
- C) Healthcare workers
- D) Security personnel
- E) Police and paramilitary personnel civil defense & volunteers
- F) Press corps
- G) Rural, tribal population (after reverse migration)
- H) Industrial workers or Labour force
- I) Farmers, vendors visiting large markets
- J) Staff in municipal bodies
- K) Drivers/Cleaners and Helping staff
- L) Banks, post, couriers, telecom offices
- M) Air travel related staff
- N) International operations
- O) Congregate settings
- P) Prisons
- Q) Plasma therapy candidate
- R) Shops: Vendors and/or owners as well as staff working in shops for essential goods, groceries, vegetables, milk, bread, chemists working at pharmacies, eateries and take away restaurants, etc.

I fully understand that COVID Antibody testing has no diagnostic use and is meant for purposes of sero surveillance only. I have been prescribed this test by my doctor and wish to undergo the same.

.....
 Dated Signature/Thumb Impression of Patient

.....
 Dated Signature/Thumb Impression of Requisitioner

Note: It is mandatory to provide all the requested information to enable accurate and timely reporting. By signing this document, I agree to receive promotional messages, e-mail etc from the company