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**Utah Department of Health**

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**Division of Disease Control and Prevention**

Robyn M. Atkinson-Dunn, Ph.D, HCLD/PHLD  
Director, Utah Public Health Laboratory

Date: January 3, 2018

Dear Clients of the Utah Public Health Laboratory,

This letter is to inform you of a new Infectious Disease (ID) Test Request Form that will be **required** beginning February 1, 2018. Specimens submitted after this date with old versions of the ID Test Request Form will trigger a “test canceled” notification and you will be required to send the updated form.

Specimen processing at UPHL is a manual process involving the input of patient demographic data, specimen description and requested tests into our Laboratory Information System. As such, unintelligible hand-written information and missing required information slow down the lab and the overall turn-around time of testing. In order to reduce the frequency of data-entry errors and exception handling, we have implemented a new ID Test Request Form (downloadable in pdf format at <http://health.utah.gov/lab/infectious-diseases/index.html>) whose use will be **mandatory starting February 1 2018**.

Major differences include:

- 1) Separated boxes for patient’s Last Name and First Name (to decrease Last and First name swapping errors)
- 2) Redesign of the testing options windows.
  - a. For bacteriology testing, you can now mark the name of the organisms you would like tested.
  - b. For tuberculosis testing, you can select molecular detection by GeneXpert and provide patient’s clinical information (e.g. cavitary disease detected in X-rays). This information is part of the CDC guidelines for the use of molecular tests.
  - c. For virology/serology testing, Zika, Dengue and Chikungunya viruses (Trioplex PCR) are available for selection.

The new test request form is attached as an excel spreadsheet. On the tab marked “Provider Code”, you are able to look up the proper code for your facility. Upon entering the code into the form, you may save the file as a pdf and conveniently print partially pre-filled forms.

As a reminder the following fields are **required**: 1) Last and First Name; 2) Date of Birth or Age; 3) Sex; 4) Provider Code; 5) Specimen collection date (and time if applicable); 6) Specimen source; 7) Test requested. Missing or incorrect (e.g. in conflict with specimen label) information on the Test Request Form may lead to significant delay and potentially to test cancellation!

Please do not hesitate to contact us with any question you may have and thank you for working with us to protect Utahans’ health.

Sincerely,

Robyn Atkinson-Dunn, Ph.D., HCLD/PHLD  
Director, Utah Public Health Laboratory  
PH: 801-965-2400  
rmatkinson@utah.gov

Alessandro Rossi, Ph.D., D (ABMM)  
ID Chief Scientist, Utah Public Health Laboratory  
PH: 801-965-2554  
arossi@utah.gov



Utah Public Health Laboratory  
4431 South 2700 West • Taylorsville, UT 84129-6000  
Phone (801) 965-2400 • Fax (801) 965-2520  
Web: [www.health.utah.gov/lab](http://www.health.utah.gov/lab)