Naval Infectious Diseases Diagnostic Laboratory
503 Robert Grant Avenue, Silver Spring, MD 20910
Telephone/Fax: (301) 319 7150 / (301) 319 7451

Test Request Form

Tests Requested (*check all that apply*): TAT= 1-4 business days.
See "Test Information and Instructions" for instructions on specimen collection and storage.
Please circle the type of specimen(s) that apply. Ensure patient ID is on the specimen container(s).

Serology

- ☐ Dengue IgM ELISA (serum)
- ☐ Zika IgM ELISA¶ (serum)
- ☐ Lyme Ab IgM and IgG (serum)

Molecular

- ☐ Rickettsia PCR (whole blood EDTA, eschar)
- ☐ Dengue/Chikungunya RT-PCR (serum)
- ☐ Zika RT-PCR (serum or plasma, and urine that must be submitted together with serum or plasma)
- ☐ MERS-CoV RT-PCR (sputum, nasopharyngeal or oropharyngeal swab, aspirate/ wash from lower respiratory tract)
- ☐ Non-variola Orthopoxvirus RT-PCR (at least 2 dry swabs of the lesions)
- ☐ COVID-19 or SARS-CoV-2 RT-PCR (nasopharyngeal and/or oropharyngeal swab (can combined into one), nasal wash/aspirate, sputum, tracheal aspirate, bronchoalveolar lavage)
- ☐ RSV (nasopharyngeal swab)
- ☐ Influenza A/B RT-PCR (sputum; swab: nasal, throat, nasopharyngeal; aspirate/ wash from resp. tract)
  - ☐ Seasonal Influenza A subtyping (A/H1, A/H3) requested if sample tests positive for Influenza A
- ☐ Influenza A/H5 RT-PCR (nasopharyngeal swab)
- ☐ Influenza A/H7N9 RT-PCR (sputum; swab: nasal, throat, nasopharyngeal; aspirate/ wash from resp. tract)
- ☐ [1]Respiratory Panel 2.1 (nasopharyngeal swab)
- ☐ [2]Warrior Panel (whole blood EDTA)
- ☐ [3]Global Fever Special Pathogens Panel (whole blood EDTA)

¶ Zika PRNT is a reflexed testing of presumptive positive Zika IgM results. TAT= 1-3 weeks after Zika IgM is completed.

All fields are mandatory	
Patient Full Name, DoD ID (last four), Gender, DOB _____ _____ Travel Location, Date_____ _____ Onset Date_____ Specimen Draw Date_____ Specimen Storage (*circle*): Frozen / Refrigerated Ship Date_____ Shipping (*circle*): Dry Ice / Cold Pack / Ambient	Physician Name_____ Clinic/Center_____ Address_____ _____ _____ _____ Telephone Number_____ Fax Number_____ E-mail_____

Ship To: Naval Infectious Diseases Diagnostic Laboratory (NIDDL)
(phone: 301-319-7150; email: usn.detrick.nmrc.list.idd-dsd-niddl@health.mil)
503 Robert Grant Avenue, Room 3N60, Silver Spring MD, 20910

Processing Lab (For internal Use only)		
NIDDL No.	Date Received	Quantity/Type Received/Initials

Rev. 4 April 2025

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Test Descriptions

This page does not need to be submitted with the Patient Test Request Form and is available as a reference.

[1]BioFire Respiratory Panel 2.1	
• Adenovirus • Coronavirus HKU1 • Coronavirus OC43 • Human metapneumovirus • Human rhinovirus/enterovirus • Influenza A virus A/H1 • Influenza A virus A/H1-2009 • Parainfluenza virus 1 • Parainfluenza virus 3 • Respiratory syncytial virus (RSV) • *Bordetella pertussis* • *Mycoplasma pneumoniae*.	• Coronavirus 229E • Coronavirus NL63 • Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) • Influenza A virus • Influenza A virus A/H3 • Influenza B virus • Parainfluenza virus 2 • Parainfluenza virus 4 • *Bordetella parapertussis* • *Chlamydia pneumoniae*
[2]BioFire NGDS Warrior Panel	
• Ebola virus • *Bacillus anthracis* • *Francisella tularensis*	• Marburg virus • *Yersinia pestis* • *Coxiella burnetii*
[3]BioFire Global Fever Special Pathogens Panel	

• *Bacillus anthracis*
• *Leptospira* spp.
• Chikungunya virus
• Dengue virus (serotypes 1, 2, 3, and 4)
• Lassa virus
• West Nile virus
• *Plasmodium* spp.
  • *Plasmodium falciparum*
  • *Plasmodium vivax/ovale*
	• *Francisella tularensis*
	• *Yersinia pestis*
	• Crimean-Congo hemorrhagic fever virus
	• *Ebolavirus* spp.
	• *Marburgvirus*
	• Yellow Fever virus
	• *Leishmania* spp.