



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)
- ☐ Measles RT-PCR (nasopharyngeal swab) ☐ ¹Respiratory Panel 2.1 (nasopharyngeal swab)
- ☐ ²Warrior Panel (whole blood EDTA) ☐ ³Global 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 	Physician Name _____ Clinic/Center _____ Address _____
Travel Location, Date _____ 	
Onset Date _____ 	
Specimen Draw Date _____ 	Telephone Number _____
Specimen Storage (circle): Frozen / Refrigerated 	Fax Number _____
Ship Date _____ 	E-mail _____
Shipping (circle): Dry Ice / Cold Pack / Ambient 	

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



Test Request Form

Test Descriptions

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

¹BioFire 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*

²BioFire NGDS Warrior Panel

- Ebola virus
- *Bacillus anthracis*
- *Francisella tularensis*
- Marburg virus
- *Yersinia pestis*
- *Coxiella burnetii*

³BioFire 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.