

This form is intended for use by facilities outside of Stanford (including UHA locations). If your facility has not previously submitted COVID-19 testing to Stanford, BEFORE sending samples, please complete the following:

[COVID-19 - Lab Intake Form](#)

Patient Information

Patient Name (Last) (First)	Date Of Birth
Referring Facility MRN	Sex M <input type="radio"/> F <input type="radio"/> Patient's Phone Number ()
Patient Address	City State Zip Code

For Lab Use Only

BILL TO:
 PPO HMO Client Medicare Outpatient Inpatient

Insurance Info: Attach a copy of front & back of Insurance card or face sheet. Technical (lab) and professional (M.D.) charges are billed separately.

REQUIRED INFORMATION ICD Code(s) -

Requesting Physician

Requesting Facility

Facility Name & Address

Phone No. **Fax No.**

Physician Name

Physician NPI #: **Submitter ID:**

M.D. Phone No (for reporting positive results) **Fax No (for reporting all results)**

Physician Signature - REQUIRED **Date & Time**

(Name & Address, Fax & Phone)

COPIES TO:

TESTING & SAMPLE INFORMATION:

COVID-19 Molecular PCR Test (LABSARSCOV2)

SOURCE & TYPE:

- Nasopharyngeal Swab
- Nasal Midturbinate Swab
- Anterior Nares Swab
- Oropharyngeal Swab
- Bronchoalveolar Lavage (BAL) fluid (1 mL) in sterile container
- Other _____

COVID-19 Antibody IgG w/reflex to ACE2 Blocking Antibody (LABCOV2IGG)

COVID-19 Antibody IgM (LABCOV2IGM)

SOURCE & TYPE:

- Plasma in a mint-top tube (lithium heparin, gel or no-gel tube)
 - *Required Volume (adult): 2 mL plasma*
 - *Minimum Volume (pediatric): 1 mL plasma*
- Note:** only 1 tube required if both IgG and IgM are ordered

Sample Collection Date **Time**

Sample Collection Date **Time**

PCR SAMPLE COLLECTION & HANDLING GUIDELINES

- Use flocked swabs
- Other swabs are acceptable* EXCEPTIONS: Do not use calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing
- Place swab immediately into tube containing 2-3 ml of viral transport media (preferred), universal transport media, or buffered saline.*

SEROLOGY SAMPLE COLLECTION & HANDLING GUIDELINES

- Plasma is stable at 2-8°C for up to 3 days.
- All samples must be centrifuged within 6 hours of collection.
- If sending whole blood, refrigerated (2-8°C) samples must be received within 3 hours of collection. Please expedite delivery to Stanford.

SPECIMEN DELIVERY

Stanford Health Care Clinical Laboratories
3375 Hillview Avenue
Palo Alto, CA 94304

Sample(s) must be hand delivered to Front Desk Security by facility's courier services. No patient specimen drop-offs are allowed.

SPECIMENS ACCEPTED 24/7