



BC Centre for Disease Control
Provincial Health Services Authority

Public Health Laboratory

655 West 12th Avenue, Vancouver, BC V5Z 4R4
www.bccdc.ca/publichealthlab

Sample Container Order Form

Ordering Instructions: For instructions on what container to use and how to collect and submit the sample please consult the BCCDC Public Health Laboratory **eLab Handbook** at <http://www.elabhandbook.info/PHSA/Default.aspx>.

Using this *Sample Container Order Form* please either **email** the request to **kitorders@hssbc.ca** OR **fax** request to **(604) 707-2606**

- Please order in single units
- Please DO NOT order in pads, bags, packs, flats, trays, boxes or cases
- A lot of sample containers have components that have a short shelf-life and therefore have expiry dates. Please order according to your needs instead of "stock-piling"

Orders will be processed and mailed using Canada Post. Allow 5-14 business days for arrival.

For RUSH orders, provide the following information:

Courier Name: _____ Courier Account #: _____

CLINIC/FACILITY NAME & DEPARTMENT (PLEASE PRINT CLEARLY)		DATE
SHIPPING ADDRESS		CITY
NAME (PLEASE PRINT CLEARLY)		POSTAL CODE
EMAIL		TELEPHONE NO.

Standard Sample Containers

NOTE: EACH* CONSISTS OF (1) SAMPLE CONTAINER, (1) SAMPLE BAG & (1) REQUISITION/FORM UNLESS SPECIFIED
PLEASE **DO NOT** ORDER IN PADS, BAGS, PACKS, FLATS, TRAYS, BOXES OR CASES

				EACH*
CONTAINER TYPE / TEST		DESCRIPTION	TESTING INFORMATION AND FURTHER DETAILS	No.
SWABS	APTIMA NUCLEIC ACID TESTING (NAT) SWAB	Aptima Unisex Swab Sample Collection Kit for Endocervical and Male Urethral Swab specimens (purple label)	<i>Chlamydia trachomatis</i> AND <i>Neisseria gonorrhoeae</i> for Nucleic Acid Testing (NAT).	
		Aptima Multitest Swab Sample Collection Kit (suitable for vaginal, throat, rectal, eye collection) (orange label)	<i>Trichomonas vaginalis</i> for Nucleic Acid Testing (NAT) in females only.	
	APTIMA NUCLEIC ACID TESTING (NAT) URINE	Aptima Urine Sample Transport Kit (yellow label)	Syphilis Nucleic Acid Testing (NAT) use Aptima orange label ONLY.	
	BACTERIAL CULTURE SWAB	COPAN (green-top) eSwab + Liquid Amies	Do not use for viral testing	
	INFLUENZA / OTHER RESPIRATORY VIRUSES, MEASLES and MUMPS	COPAN (red-top) + Universal Transport Media	Culture for bacterial pathogens and validated nucleic amplification tests: refer to eLab Handbook. Do not use for viral testing	
	VIRAL NUCLEIC ACID TESTING (NAT) SWAB, HSV, VZV and Mpox	COPAN (blue-top) + Universal Transport Media	Nucleic Acid Testing (NAT) for nasal/nasopharyngeal and throat specimens. Do not use for Chlamydia trachomatis or bacterial culture testing	
BLOOD TUBES	BLOOD PARASITES	K2EDTA (EDTA/Lavender top) vacutainer	Malaria: 3 thick and 3 thin smears to be submitted in addition to blood in EDTA	
	HEPATITIS C PCR		Specimen to be submitted in EDTA vacutainer tube	
	SEROLOGY SCREENING	Serum separator tube (SST/Gold top) vacutainer (no requisition)	Hepatitis, HIV, Prenatal, Rubella, Syphilis, Virus Serology	
	ZOONOTIC DISEASES & EMERGING PATHOGENS		ASOT, AntiDNase B, <i>Brucella</i> , <i>Borrelia</i> , <i>Coccidioides</i> , Diphtheria, Tetanus, Tularemia, Parasitic Serology, <i>Bartonella</i> , <i>Cryptococcus</i> , Referred Bacterial, Fungal & Parasitic Testing, Arboviruses (West Nile virus), Hantavirus, <i>Rickettsia</i> , <i>Ehrlichia</i> / <i>Anaplasma</i> , <i>Leptospira</i> , Referred Testing	
FECES CONTAINERS	ENTERIC PATHOGENS	Fecal collection container with integrated fecal spork cap	Bacterial culture requires non-fixed stool collected within 3 days	
	OVA and PARASITES	SAF (preservative) vial	Orders must be approved by the Parasitology Section	
	PINWORM	Pinworm sticky paddle	Orders must be approved by the Parasitology Section	
	VIROLOGY	Plastic container, 118 mL, with metal cap	Gastrointestinal virus testing (including Norovirus, Adenovirus, Astrovirus, Rotavirus and Sapovirus)	
	ZOONOTIC DISEASES & EMERGING PATHOGENS	Plastic container, 118 mL, with metal cap (no requisition)	<i>Helicobacter pylori</i> Stool Antigen	
SLIDES	MICROSCOPIC EXAM	Package of 100 glass slides and 50 double-slide covers; supplies for 100 slides	Gonorrhea, Bacterial Vaginosis, Yeast & Malaria	
OTHER CONTAINERS	ORANGE TOP PLASTIC CONTAINER	Sterile, 90 mL (no requisition)	Sputum, urine & other body fluids (all <i>Mycobacteria</i>) Tissue parasites Please order requisitions separately on the backside of this form as this container is used for various tests	
	TUBERCULOSIS TREATED GLASS JAR	Glass jar for <i>Mycobacteria</i> testing	Stomach washings (all <i>Mycobacteria</i>) (Request these prepared jars 2 weeks in advance)	



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Non-Standard Containers (Outbreak Kits & Environmental Samples)			EACH*
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CONTAINER TYPE / TEST	DESCRIPTION	TESTING INFORMATION AND FURTHER DETAILS	No.
OUTBREAK KITS	GASTROINTESTINAL DISEASE OUTBREAK KIT	Kit consists of 6 sterile vials for feces, 2 sterile vials for vomitus, 8 biohazard bags, 8 GI Outbreak Requisition and 1 GI Outbreak Fax Notification form	
BOTTLES	250 ML PLASTIC BOTTLE	Sterile, 250 mL bottle, treated with sodium thiosulfate. Each bottle comes with 1 plastic sealable bag and 1 rubber band (no requisition)	Water Bacteriology (drinking water, raw water, recreational water)
	1 L STERILE PLASTIC BOTTLE	Sterile, 1 L bottle, treated with sodium thiosulfate (no requisition)	Legionella or treated water testing Orders must be approved by Environmental Microbiology
	1 L NON-STERILE PLASTIC BOTTLE	Non-sterile, 1 L bottle, without sodium thiosulfate (no requisition)	Wastewater or untreated water testing Orders must be approved by Environmental Microbiology
OTHER CONTAINERS	ENDOTOXIN-FREE VIALS	50 vials (yellow cap)/order (no requisition)	Endotoxin/Limulus Amoebocyte Lysate (LAL) Testing
	ICE PLASTIC JAR	Sterile, 500 mL, treated with sodium thiosulfate (no requisition)	Water Bacteriology (ice samples)
	FOOD MICROBIOLOGY JAR	Sterile, 500 mL (no requisition)	Food Quality and Food Poisoning Samples
	ENVIRONMENTAL SPONGE	Sponge with stick, pre-hydrated with D/E neutralizing buffer (no requisition)	Food Quality testing Orders must be approved by Environmental Microbiology

Requisition Forms Only			EACH*
All forms are available online at http://www.elabhandbook.info/PHSA/Default.aspx			
NOTE: EACH CONSISTS OF (1) COPY OF THE REQUISITION/FORM *Unless ordering the Serology Screening Requisition which is only available in a 50-page pad			
REQUISITION/FORM NAME	DESCRIPTION	ADDITIONAL INFORMATION	No.
BAM	Bacteriology & Mycology Requisitions	2 sided form: Side 1 – Specimens for Bacteriology and Mycology testing Side 2 – Isolates for Identification	
PARA	Parasitology Requisition	Ova & Parasites, Blood & Tissue Parasites, Parasite Identification (arthropods, worms, proglottids)	
SER	Serology Screening Requisition	High volume serology testing; only available in 50-page pad	
TB	Mycobacteriology/TB Requisition	Mycobacteriology testing	
VI	Virology Requisition	Non-serological virology testing	

If filling out the form digitally, click the "Submit Form" button below to automatically email your completed form

Submit Form

otherwise send us your completed form via

email the request to **kitorders@hssbc.ca** OR **fax** request to **(604) 707-2606**