Revision Number	2.0	Document Number	M-2656		
Author/Reviewer	M. Connor	Authoriser	K. Li		
Active Date	10/06/2024	Page Number	Page 1 of 1		
Effective Date	10/06/2024	Document Type	Virology Request Form		
Investigation of Bordetella pertussis (PCR)					

Send to: REGIONAL VIRUS LABORATORY, Kelvin Building, Royal Group of Hospitals Trust, Grosvenor Road, Belfast BT12 6BA. Direct Tel 028 96 155645 (9am-5pm Mon-Fri)

AFFIX LABEL OR ENTER DETAILS LEGIBLY

Female/Male Surname Forer		ame	D.O.B.			
Address			H&C	NHS 🗆		
				Private □		
Postcode			Hospital			
			HCP Code AND	Consultant /GP:		
			Source Code/ Wa	rd / Clinic:		
This test is for suspected cases in all age groups with cough <21 days duration						
Samples cannot be tested where duration of cough is not documented						
DURATION OF COUGH:						
{ABPS} □ Bordetella species PCR						
☐ Throat (TS)☐ Nasopharyr☐ Nose and th☐ Sputum (SF	ngeal swabs (NPS nroat swab (NTS <b>)</b> PT) eolar lavage (BL)	,				
Send swabs in COBAS media OR dry swabs in dry sterile container (DO NOT SEND GEL OR CHARCOAL SWABS)						
<ul> <li>Results are available via ECR</li> <li>For urgent results please phone 07889086946 (out of hours contact on call BMS via RVH switchboard on 028 90240503)</li> </ul>						
Specimen type(s)		Specimen Dat	e & Time	Lab use		
Signature						

- Transport specimens to laboratory in sealed specimen bags. Ensure specimen container lids are well secured to prevent leakage in transit.
  - For clinical virology advice contact Duty Virologist;

E-mail <u>DL-BLL-DUTY- VIROLOGIST@belfasttrust.hscni.net</u>; Mobile 07889086946

Belfast Health and Social Care Trust	Belfast Trust Laboratories Clinical Microbiology & Virology
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