

FM2458

Carbapenem resistant isolate referral form
Microbiological Diagnostic Unit – Public Health Laboratory

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MDU no (MDU use only)

Sender information

Laboratory:
Address: Postcode:
Phone no: Fax no:
Requesting doctor: Requesting doctor phone no:
Copy to: Name: Fax no:

Patient details

Name: Sex: M F Not known
Date of birth: Postcode: Patient identifier (UR no.):
Patient phone no:

Patient risk factors

At the time of sample collection, patient was in a:
Health care facility Aged care facility GP/Medical clinic Other Not known
Facility name:
Ward or unit: Date of admission:

Isolate and sample details

Organism name (species): Submitting laboratory number:
Isolated from (sample type): Date of sample collection:
Reason for sampling: Clinically indicated Screening Not known

Submitting laboratory testing results

Tick all that apply

Meropenem MIC ≥ 0.5mg/L, or disc diffusion zone ≤ 24mm (CLSI or EUCAST) or CDS disc diffusion zone ≤ 6mm.

Positive Negative Carbapenem hydrolysis test (CarbaNP or BlueCarba)

Positive Negative Modified Hodge test

Positive Negative CIM

Positive Negative Positive carbapenem double-disc synergy test

Positive Negative molecular assay for carbapenemase gene –
state gene(s) positive:

Please send a printout of your antimicrobial results with this form

Submitted by:

Name: Signed: Date:



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