REQUEST FORM
CRYPTOSPORIDIUM TYPING (HC)

MDU No.
(MDU Use only)

Microbiological Diagnostic Unit Public Health Laboratory
Department of Microbiology & Immunology, The University of Melbourne (APA)
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Director: Prof. Benjamin Howden, MBBS, FRACP, FRCPA, PhD, 206527 QB

FM1698

Report to: Name
Address

cc: Name
Address

Test Requested: Speciation and Genotyping of Cryptosporidium which have been identified in stool

Specimen Details

NB: For each specimen, please include photocopy of:
(a) Original Request Form (This avoids need to transcribe)
(b) Referring Laboratory Report (If readily available, but all should be known cryptosporidium positives)

MDU Number	Patient Name		Referring Lab Number	Photocopy of Original Request Form included? (✓)	Photocopy of Report included? (✓)
	Surname	Given Name			