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| **REQUEST FORM** **TRAVELLER’S DIARRHOEA METAGENOMICS STUDY (PR2017-004)** |
| MDU use only | Microbiological Diagnostic Unit Public Health LaboratoryDepartment of Microbiology & Immunology, The University of Melbourne (APA) Level 1, The Peter Doherty Institute for Infection and Immunity, 792 Elizabeth Street, Melbourne, VIC 3000Ph (03) 8344 5713 Fax (03) 8344 7833 Email publichealth.lab@mdu.unimelb.edu.au. Director: Prof. Benjamin Howden, MBBS, FRACP, FRCPA, PhD, 206527 QB  | **FM2728** |
|  ***Referring Laboratory / address for report* -(Not required if a copy of the original request form is attached)**

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| Name (Person)……… **Dr Katherine Gibney** ………………… (Practice/Hosp) …… **Royal Melbourne Hospital**……………… Provider No …………**2424056Y**……....Address …… **Victorian Infectious Diseases Service, 9 North, The Royal Melbourne Hospital, 300 Grattan Street, Parkville** ……………………Postcode ……**3050**……………………………………… Phone no. ……**9035 3958**………………………………………………….………..…… Fax no. ……**9342 7277**…………………………….………………………………Copy to: Name (Person) ……………………………………………………….…………………………………………………………… (Organisation) …………………………………………………………….……………………………...…………………………. |

 Patient details

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| First Name ……………………………………..……………. Surname ……………………….…………………………………………………………….……………………………………………………………. Date of Birth ………………………………………… (or Age …………………) Sex: M □ F □Study ID No. ……………………………………………………………………………….…………………………………… **Research Project Participant (PR2017-004)** |

 ***Specimen details NB: May only include one patient’s specimens/cultures***

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| No. | Laboratory number | Specimen type and/or site | Date of Specimen Collection | MDU No. |
| 1 |   |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
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| 6 |  |  |  |  |

 Request details

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| **TEST(s) REQUESTED** ………………**DNA/RNA extraction, Storage of specimens**………………………………………………………………………………………………..…...…………………………….…………..**Signed** (Requestor) ……………..…...…………………………………………………………………….……………………..…...……………………………………………………………………. **Date** ..………….…………………………………….....……...….…...…………… |

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| 910259 |  | NATA/RCPA Accredited Laboratory No. 1019 | E:\mdu\_doc\FORMS\Request Forms\_COC forms\Word\_Excel version\FM2728-1.1 (Request Form - Traveller's Diarrhoea Metagenomics Study PR2017-004).docxDocument No:FM2728-1.1 Custodian: Michelle Sait; Authorised by: Susan BallardOriginal issue: 16.08.2017 Current issue: 05.01.2021 |