

Specimen Referral Form

office use only

Irish Meningitis & Sepsis Reference Laboratory, Children's Health Ireland (CHI) at Temple Street,

Dublin, D01 YC67

Phone: 01-8784432/Fax: 01-8784439



Requesting Hospital code Consultant/GP Name Contact no.  Patient Information  Hospital No.  Relevant clinical details/primary diagnosis:  Surname Forename Address  Eircode Date of oirth: Gender: Male   Female   Ethnic origin   Bacterial isolate   Other    Sample Information  Requesting lab. no.   Clinical specimen   Bacterial isolate   Other		y in dark ink	E-mail: IMSRL@cuh.ie	at Temple Street
Contact no.  Patient Information  Hospital No.	Sender's Infor	mation		
Contact no.    Patient Information	Requesting Hospi	ital	Hospital code	
Contact no.    Patient Information	Consultant/GP Na			
Patient Information   Relevant clinical details/primary diagnosis:	Contact no.	·		
Surname Forename Address    Date of onset	Patient Inform			
Surrame Forename Address  Eircode Date of birth: Gender:   Male   Female   Ethnic origin   pre-collection antibiotics YES/NO  Sample Information  Requesting lab. no.   Date & Time collected   DO / MM / YYYY   Clinical specimen   Bacterial isolate   Other  Sample type/Source   CSF RBC   Blood   Joint Fluid   Bone   Pleural Fluid   Other sterile site   Throat   Other non-sterile site   Requesting laboratory findings (i.e. culture details, molecular (in-house/commercial platform) results, etc.)  Tests Required  PCR (Selection criteria will be applied; see page 2 of this form & User Manual; contact laboratory if clarification required)   Meningitis   Septicaemia   Deep tissue Abscess   Bone/Joint infection     Empyema   Other     Isolate idenfication & typing (susceptibility testing available on request; see reverse)   Other:     Presumptive identification:   Method used (MALDI, VITEK, FilmArray, etc.):	Hospital No.		Relevant clinical detail:	s/primary diagnosis:
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**ALL SPECIMENS ARE POTENTIALLY HAZARDOUS HIGH RISK SPECIMENS MUST BE APPROPRIATELY MARKED** 

# **Irish Meningitis & Sepsis Reference Laboratory**

### LABORATORY HOURS Monday-Friday 09:00 -17:00

#### **ENQUIRIES:**

For advice on diagnostic PCR testing/results: 01-8784432

For advice on isolate identification, typing & susceptibility testing/results: 01-8784857/4854

For advice on patient investigation and interpretation of results: Consultant Microbiologist contactable via switch (01-8784200)

#### TRANSPORTATION:

Specimens for processing must be transported according to UN Transportation Standard UN3373 to IMSRL in a clearly marked biohazard bag and specimen transport box according to UN Packaging Standard P650 accompained by this completed IMSRL Request Form

#### ISOLATES

Purified isolate on chocolate agar slope or on charcoal transport swab Send isolates on slopes as soon as possible after overnight incubation

Isolate species	Test repertoire	Turnaround Time
Neisseria meningitidis	identification, grouping, typing and susceptibility testing	5-10 days Supplementary report with finetype results issued quarterly (susceptibility testing performed quarterly and results available on request). Urgent samples processed on request.
Haemophilus influenzae	identification, typing and susceptibility testing	10 days (Susceptibility testing performed quarterly and results available on request.) Urgent samples processed on request.
Streptococcus pneumoniae	identification, typing and susceptibility testing	Testing batched and carried out on a quarterly basis with reports issued quarterly (susceptibility testing results available on request). Urgent samples will be processed on request.
Streptococcus pyogenes (group A streptococcus; GAS)	identification, emm sequence typing and susceptibility testing	Testing batched and carried out on a quarterly basis with reports issued quarterly (susceptibility testing results available on request). Urgent samples processed on request.
Streptococcus agalactiae (group B streptococcus; GBS)	identification, capsular typing and susceptibility testing	Testing batched and carried out on a quarterly basis with reports issued quarterly (susceptibility testing results available on request). Urgent samples processed on request.
Kingella kingae	identification, typing and susceptibility testing	Testing batched and carried out on a quarterly basis with identification reports issued quarterly
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This form is available for electronic download (along with User Manual) from http://www.cuh.ie

## **Diagnostic PCR testing**

Ideally samples should be collected as close to onset as possible and prior to administration of antibiotics. Store samples at 4°C if delay in transportation

Minimum sample volume (for all specimen types) is 0.5ml (higher volume recommended if repeat or additional testing required)

	Syndrome (specimen type)	Meningitis (CSF) (≥7 days of age)	Sepsis (Blood) (≥7 days of age)	meningitis (< 7 days of age) :Blood	Early onset sepsis & meningitis (< 7 days of age) :CSF	Pleural fluid	Osteomyelitis/ Septic arthritis		
	Group B Streptococcus	Only if aged < 90 days	Special request only	All	All	Special request only	Special request only		
	E. coli	Only if patient has <i>E. coli</i> bacteraemia or UTI and is < 90 days and has evidence of meningitis, or has galactosaemia	Not available	Not available	Only if patient has <i>E. coli</i> bacteraemia or UTI and is < 90 days and has evidence of meningitis, or has galactosaemia	Special request only	Special request only		
	N. meningitidis	All	All	Special request only	Special request only	Special request only	Special request only		
	S. pneumoniae	All	All	Special request only	Special request only	All	All		
/ able able	H. influenzae (Type b result given for blood and CSF)	All	All	Special request only	Special request only	Special request only	Special request only		
ble	S. aureus	Special request only	Not available	Not available	Special request only	All	All		
ble	Group A Streptococcus	Special request only	Not available	Not available	Special request only	All	All		
ble	Kingella kingae	Not available	Not available	Not available	Not available	Not available	Only if <5 years		
	Listeria monocytogenes	If specifically requested. If age >90 days, must include clinical indication for testing on request form	Not available	Not available	If specifically requested. If age >90 days, must include clinical indication for testing on request form	Not available	Not available		
	Turnaround All samples received for diagnostic PCR by 11 am: Result available between 16.00-17.00 same day.								