**Microbiology Water Sterility Testing Requisition**

**All fields below are required**

|  |  |
| --- | --- |
| **Beaker Submitter Name (see list below):** |  |
| **Beaker Submitter ID (Name):** |  |
| **Room Number / Location Specifics:** |  |
| **Culture source:** |  |
| **Date/time collected:** |  |
| **Contact:** |  |
| **Phone:** |  |
| **Please Fax Results To:** |  |

|  |  |
| --- | --- |
| **Sterility Test Order for:** | |
| **🞎 Water Sterility Check (MIC059)** | **🞎 Environmental Legionella (IMML36)** |

**For Epidemiology**

|  |  |
| --- | --- |
| **BEAKER SUBMITTER NkAME** | **BEAKER SUBMITTER ID** |
| Infection Surveillance | 500013 |
| Infection Surveillance – James | 500014 |
| Infectious Surveillance - East | 500072 |

**For Clinical Laboratories**

|  |  |
| --- | --- |
| **BEAKER SUBMITTER NAME** | **BEAKER SUBMITTER ID** |
| Cambridge, CaDC | 430993 |
| Clinical Laboratory West Campus | 500696 |
| Columbus Torah Academy | 431006 |
| Critical Care Lab | 500025 |
| Cytogenetics Lab | 500033 |
| Dept. of Developmental Disabilities | 430943 |
| East Dialysis | 500023 |
| East Lab | 500032 |
| Histology Lab | 500012 |
| James Lab | 500011 |
| James Molecular Lab | 500028 |
| LabCorp of America | 830553 |
| Lifeline of Ohio | 500035 |
| Madison Co Hospital Reference Lab Acct | 422480 |
| Morehouse Lab | 500027 |
| Northwest Ohio Toledo, NODC | 430995 |
| Southwest Ohio Batavia, SODC | 430996 |
| Special Functions Lab | 500029 |
| SSCBC Lab | 500026 |
| Tiffin, TDC | 430997 |
| Toxicology Lab | 500030 |
| Warrensville, WDC | 430998 |