



PATIENT *please use BLOCK CAPITALS*

NAME _____

FIRST NAME _____

ADDRESS _____

D.O.B: ____ | ____ | ____ M F

Patient: outpatient inpatient

Physician: _____

Tel.: _____

Bill to: ordering physician patient

Dok: 4974 Version 5

Request form for diagnostic parasitological analyses

Date of collection: _____ Time of collection: _____

REQUESTING PHYSICIAN

NAME _____

ADDRESS _____

TEL. _____

FAX _____

REFERENCE: _____

Barcode Auftraggeber

Barcode IDIS

Clinical information

Symptoms

- none
- pulmonary
- dermatological
- neurological
- urological
- abdominal pain
- hepatopathy
- splenomegaly
- fever
- anaemia
- eosinophilia _____ %
- immunodeficiency
- other _____

Date of entry CH: ____ | ____ | ____

Country of origin:

Stay abroad

- Central-, Southern-, Eastern Europe
- Middle East
- Africa
- Central-, South America
- Asia
- Pacific
- other _____

Duration: _____

Date of onset: _____

Progression: _____

Therapy

medication _____

surgical _____

Further information / previous parasitological investigations:

Barcode Kostenträger

PATHOGEN	ANALYSIS	TEST	
HELMINTHS			
Helminth screening test (#1)	<input type="checkbox"/> P	Antibody detection	shelt
Helminth screening test (#2)	<input type="checkbox"/> P	Antibody detection	shel
Intestinal Helminth screening test	<input type="checkbox"/> A	Microscopy	dap
Angiostrongylus cantonensis (#6)	<input type="checkbox"/> P	Antibody detection	angi
Anisakis spp.	<input type="checkbox"/> P	Antibody detection	ani
Ascaris lumbricoides	<input type="checkbox"/> P	Antibody detection	asc
Echinococcus granulosus	<input type="checkbox"/> P	Antibody detection	ecg
Echinococcus multilocularis	<input type="checkbox"/> P	Antibody detection	ecm
Echinococcus spp.	<input type="checkbox"/> K	Microscopy	ecc
Echinococcus spp. + Taenia spp. (#12)	<input type="checkbox"/> K	PCR	ecp
Enterobius vermicularis (Pin worm)(#5)	<input type="checkbox"/> B	Microscopy	ever
Fasciola hepatica	<input type="checkbox"/> P	Antibody detection	fas
Filaria (#7)	<input type="checkbox"/> G	Microscopy	mfis
Filaria	<input type="checkbox"/> P	Antibody detection	fie
Filaria (Brugia malayi) (#6)	<input type="checkbox"/> P	Antibody detection	bmal
Filaria (Onchocerca volvulus)	<input type="checkbox"/> H	Microscopy	mfil
Filaria (Wucheria bancrofti) (#6)	<input type="checkbox"/> S	Antigen detection	wban
Gnathostoma spp. (#6)	<input type="checkbox"/> P	Antibody detection	gnat
Paragonimus spp. (#6)	<input type="checkbox"/> P	Antibody detection	parag
Schistosoma haematobium (#8)	<input type="checkbox"/> D	Microscopy + Antigen	sha
Schistosoma spp.	<input type="checkbox"/> P	Antibody detection	sie
Schistosoma spp. (CCA) (#11)	<input type="checkbox"/> R	Antigen detection	cca
Strongyloides spp.	<input type="checkbox"/> P	Antibody detection	sse
Strongyloides spp. (#9)	<input type="checkbox"/> C	Baermann + culture	bam
Taenia solium (Cysticercosis)	<input type="checkbox"/> P	Antibody detection	zye
Toxocara spp.	<input type="checkbox"/> P	Antibody detection	tce
Trichinella spiralis	<input type="checkbox"/> P	Antibody detection	tra
PROTOZOA			
Inestinal Protozoa screening test	<input type="checkbox"/> A	Microscopy	dap
Acanthamoeba spp.	<input type="checkbox"/> J	Microscopy + culture	acm
Acanthamoeba spp.	<input type="checkbox"/> J	PCR	acp
Babesia spp.	<input type="checkbox"/> F	Microscopy	babe
Cryptosporidium spp.	<input type="checkbox"/> A	Antigen detection	kspa
Cyclospora cayetanensis	<input type="checkbox"/> A	Microscopy	csp
Entamoeba histolytica	<input type="checkbox"/> P	Antibody detection	ame
Entamoeba histolytica	<input type="checkbox"/> T	Antigen detection	ehia
Entamoeba spp.	<input type="checkbox"/> A	Microscopy	ehim
Giardia intestinalis	<input type="checkbox"/> A	Microscopy	dap
Giardia intestinalis	<input type="checkbox"/> A	Antigen detection	glaa
Leishmania spp.	<input type="checkbox"/> P	Antibody detection	lee
Leishmania spp., incl. identification (#10)	<input type="checkbox"/> V	PCR	leip
Leishmania spp., visceral	<input type="checkbox"/> I	Microscopy	leim
Mikrosporidium spp. (Stuhl)	<input type="checkbox"/> A	Microscopy	msp
Mikrosporidium spp. (Urin)	<input type="checkbox"/> D	Microscopy	msp
Plasmodium spp.	<input type="checkbox"/> E	Microscopy + Antigen	mal
Plasmodium spp.	<input type="checkbox"/> G	PCR	plam
Plasmodium falciparum	<input type="checkbox"/> P	Antibody detection	pfa
Toxoplasma gondii	<input type="checkbox"/> X	PCR	tgop
Toxoplasma gondii (IgA)	<input type="checkbox"/> P	Antibody detection	tai
Toxoplasma gondii (IgG)	<input type="checkbox"/> P	Antibody detection	txga
Toxoplasma gondii (IgG avidity)	<input type="checkbox"/> P	Antibody detection	txaa
Toxoplasma gondii (IgM)	<input type="checkbox"/> P	Antibody detection	txma
Trichomonas vaginalis	<input type="checkbox"/> W	PCR	typ
Trypanosoma brucei spp. (#3)	<input type="checkbox"/> P	Antibody detection	trbi
Trypanosoma cruzi (Chagas) (#4)	<input type="checkbox"/> P	Antibody detection	trc
Trypanosoma spp.	<input type="checkbox"/> G	Microscopy	tryp
Trypanosoma spp. incl. identification (#6)	<input type="checkbox"/> G	PCR	trp
SPECIAL TESTS			
Histological slides	<input type="checkbox"/> L	Microscopy	hist
Identification of endoparasites	<input type="checkbox"/> M	Identification	endp
Identification of ectoparasites	<input type="checkbox"/> N	Identification	ektp

intern

INSTRUCTIONS

Please cross the box for the desired analysis and then the box for the required clinical specimen e.g.

(i) Plasmodium spp. X G PCR

(ii) X G = EDTA-Blut

CLINICAL SPECIMENS

- A = stool, 1g fixed in 10 ml SAF
- B = scotch tape method
- C = 10-20 g fresh stool, non-refridgerated
- D = urine, native
- E = EDTA blood, thin + thick blood film
- F = EDTA blood, blood film
- G = EDTA blood
- H = skin snips
(please inform laboratory)
- I = bone marrow in EDTA
- J = contact lenses, contact lens storage solution, corneal biopsy
- K = biopsy, aspirated fluids, native
- L = stained histological slides
- M = proglottides, helminths etc. in physiol. saline
- N = mosquitoes, flies, lice etc. native or in 70% Ethanol
- P = 2 ml serum oder 5 ml whole blood or 1 ml CSF
- R = 10 ml native urin
- S = serum
- T = fresh stool
- V = native, bone marrow in EDTA, skin (2mm punch from edge of lesion)
- W = genital smear (TRANSWAB), native urine (first portion)
- X = amniotic fluid, brain biopsy, BAL, CSF, ocular fluid

- (#1) having travelled to the tropics (Ascaris lumbricoides, Echinococcus spp., Fasciola hepatica, Filaria, Schistosoma spp., Strongyloides stercoralis, Toxocara canis, Trichinella spiralis)
- (#2) with no tropical travel history (Ascaris lumbricoides, Echinococcus spp., Fasciola hepatica, Strongyloides stercoralis, Toxocara canis, Trichinella spiralis)
- (#3) African Trypanosomiasis
- (#4) American Trypanosomiasis (Chagas)
- (#5) Enterobius, anal scotch tape method
(Collect the specimen first thing in the morning before using the bathroom, then attach the **transparent** scotch tape a to a slide and send to the lab.)
- (#6) external analysis
- (#7) lymphatic filariasis: blood collection around midnight, Loa loa: blood collection around noon
- (#8) Schistosoma eggs und antigen in urine: collect native urine over a 7-12 hour period.
- (#9) stool must not be cooled (keep at >10°C).
- (#10) visceral Leishmaniasis: bone marrow EDTA, spleen, EDTA blood, lymph nodes.
mucocutaneous Leishmaniasis: biopsy-cylinder >=3mm from the edge of the lesion (infected macrophages)
- (#11) test for Circulating Cathodic Antigen (CCA) in native urine
- (#12) incl. species identification.
Surgical specimens, native:
E.granulosus - if possible whole cysts
E.multilocularis – parts of organs and lung tissue
Biopsies (fine needle) and aspirates, native
Histological slides.
Do not freeze specimens – send via express courier!

Further information concerning the specimens: _____