

SPECIMEN SUBMISSION GUIDELINES
HIV Diagnostics and Reference Laboratory, Diagnostics and Countermeasures Branch
Center for Infectious Disease Research Walter Reed Army Institute of Research
508 Research Dr., Silver Spring, MD, 20910

Special Request Molecular Aptima HIV-1 Quantitative Dx Test Request Form (Serum)

Quant assay using serum as a matrix requires Laboratory Director Approval (301) 319 -3123

Test Requested	Specimen Requirement	Draw Tube	Shipping Conditions
<input type="checkbox"/> Quant HIV-1 (Viral Load)	<input type="checkbox"/> 3 ml serum (SST) Consult HDRL for this order via phone at (301) 319 -3123	SST tubes – Centrifuge tubes within 2 hours of collection. Centrifuge ≤ 1300 RCF for 10 minutes. Freeze serum aliquot at less than -20°C .	Frozen -20°C – Ship frozen aliquoted specimen with dry ice if specimen will be received at HDRL after 24 hours of collection. When shipping frozen, use 2+ lbs. dry ice per day of transport. Shipment with an additional 6 lbs. of dry ice is recommended in case of shipment delay.

Please fill the request form completely to ensure timely specimen processing.

PATIENT IDENTIFICATION	CONTACT INFORMATION
Patient identifiers <u>MUST INCLUDE</u>: Full Name _____ DoDID _____ OR FMP/SSN _____ DOB _____ Specimen Draw Date / Time: _____ Ship Date: _____	POC _____ Physician Name _____ Clinic / Center _____ Center Address _____ _____ _____ Telephone Number _____ Fax Number _____ (Commercial # only; please include area/country code) Alternate POC Name _____ Alternate POC Phone _____

PROCESSING LABORATORY (For HDRL use only)

BARCODE	DATE RECEIVED	QUANTITY & TYPE RECEIVED / INITIALS

Fax/Email a FedEx tracking and/or invoice number to ensure all shipments sent to the HIV Diagnostics and Reference Laboratory are received, IAW CAP GEN.40530
Shipping Address: 508 Research Drive, Silver Spring, MD 20910