



RABIES TEST REQUISITION FORM

***Required Field**

<u>SUBMITTER INFORMATION</u>	<u>LABORATORY USE ONLY</u>
Facility Name*: _____ (Include full facility name) _____ _____ Telephone Numbers: Weekday: _____ Weekend/Afterhours*: _____ Send Report To: _____ _____ _____	Date Received: _____ Condition: _____ Specimen No.: _____ Branch: _____ <u>RESULTS</u> FRA Test: _____ Date Reported: _____
<u>ANIMAL HISTORY</u>	
Kind of Animal*: _____ Animal ID: _____ Color*: _____ Breed*: _____ Stray* ☐ Pet* ☐ Symptoms*: _____ Animal Killed* ☐ Found Dead* ☐ Date*: _____ Animal Inoculated Against Rabies*: Yes ☐ No ☐ Unknown ☐ Date Inoculated*: _____ Owner: _____ Telephone: _____ Owner Address: _____ City, State & Zip code: _____ Exposure*: Human ☐ Animal ☐ Date*: _____ Name*: _____ Type of Exposure/Details*: _____ Address: _____ City, Zip: _____ Telephone: _____	
SHIPPING INSTRUCTIONS ON BACK	

Rabies testing can be electronically ordered using Merlin. Print Merlin lab slip and send with specimen.

<https://merlin.doh.ad.state.fl.us/MerlinCore/>

Contact merlin.helpdesk@flhealth.gov with any questions.

DIRECTIONS FOR THE SUBMISSION OF ANIMAL HEADS

- (1) The animal head should be shipped priority overnight, or hand delivered to the laboratory as soon as possible for a satisfactory examination. **DO NOT FREEZE HEAD.**
- (2) Place the animal head inside two thick plastic bags (bags should be thick enough to not allow any leakage of blood or other body fluids) or in one bag inside a water-tight container. Bags should be sealed in a manner as to not allow any liquid to escape. Place the wrapped head into a leak proof shipping cooler. Add enough frozen ice packs to maintain refrigeration temperature. Do not use dry ice, bagged ice, or wet ice.
- (3) The rabies test form with all required fields completed and bite report form should be placed in a water-tight bag. Attach bag to corresponding animal head in cooler.
- (4) Call or email the laboratory to advise the expected time of arrival, mode of shipment, and tracking number. In addition, enter the specimen into Merlin with the mode of shipment and tracking number.
 - a **Note:** Testing laboratory needs to be notified if there is a high priority weekend specimen in order to provide testing services.
- (5) **All positive, unsatisfactory, inconclusive, and high priority reports will be phoned to the health department. Weekend/afterhours telephone numbers must be provided on the Rabies Test Form for emergency contact related to testing and results.**

Weekend Emergency Contacts

BPHL-Jacksonville

Attn: Rabies Laboratory

1217 N. Pearl Street

Jacksonville, Florida 32202

Laboratory Phone: **(904) 791-1540**

Fax: (904) 791-1542

24/7 Telephone: (904) 253-0439

Amanda Davis (904) 891-0735

Email: bphl.jacksonvillevirology@flhealth.gov

BPHL-Tampa

3602 Spectrum Boulevard

Tampa, FL 33612

Phone: (813) 233-2282

Main: (813) 233-2203

Fax: (813) 233-2379

Grey Dennis (813) 477-7233

Marshall Cone (813) 833-5112

Email: DLBPHL29TampaRabies@flhealth.gov

Emergency Rabies Testing Only

BPHL-Miami

1325 N.W. 14th Avenue

Miami, Florida 33125

Phone: (305) 325-2536

Fax: (305) 325-2560

Elesi Quaye (305) 322-1488

Email: DLBPHL13Rabies@flhealth.gov

