

To obtain information regarding test requisition forms or to find a courier stop for free specimen transport, go to www.health.mo.gov/lab. Please call (573) 751-4830 if you have any questions.

NEWBORN SCREENING	IMMUNOLOGY – **Test Request Form Available Online
Filter Paper - Initial Form (\$65.00)	YOU MUST BE AN APPROVED SITE
Filter Paper - Repeat Form (\$65.00)	Swab Collection Kit for Endocervical, Male Urethral, Rectal,
Envelopes 🗆 Courier 🗆 Prepaid	Pharyngeal (Gonorrhea/Chlamydia)
Listing Pads	Urine Collection Kit (Gonorrhea/Chlamydia)
Labels	Vaginal Swab Collection Kit (Gonorrhea/Chlamydia)
Hemoglobin Test Kit, Finger/Heel Stick (Child)	Gonorrhea/Chlamydia Mailer [1's] [4's] [16's]
Hemoglobin Test Kit, Venous Blood (Adult)	Gonorrhea/Chlamydia Prepaid Envelope
	Syphilis (RPR) and/or HIV Antibody Kit
	[1's] [4's] [16's]
MICROBIOLOGY - **Test Request Form Available Online	
Enteric Kit Complete Kit (For Feces)	
Enteric Kit (For Feces) Components Only	VIROLOGY – **Test Request Form Available Online
🗆 Cary Blair Media	Virus Isolation Kit
Enteric/Special Bacteriology Kit Double Wall Mailing Containers	Virus Isolation Kit - Rash Kit (Unknown Rash)
(For Culture)	Virus Isolation Kit - Seasonal Influenza Surveillance Kit
Scabies Kit	Virus Isolation Kit - Respiratory (Avian Flu)
Bordetella Pertussis Complete Kit (Whooping Cough)	Virus Isolation Kit - Mumps
Bordetella Pertussis (Whooping Cough) Components ONLY	Hepatitis Screening Kit [1's] [4's]
🗆 Media 🗆 Saline 🗆 Media & Saline	Viral Serology Kit
Intestinal Parasites Kit	(Measles, Rubella, Arbovirus, Rickettsial, West Nile)
Gastrointestinal Outbreak Kit (Includes Norovirus)	
CHEMISTRY	TUBERCULOSIS - **Test Request Form Available Online
Blood Lead - Complete Capillary Kit	AFB for Clinical Specimens (Category B mailer)
Blood Lead - Capillary Kit Individual Components	AFB Reference Culture (Category A mailer)
Device Sticker Form Mailer	
Blood Lead - Venous Kit	
Lead Testing 🛛 Dust Wipes 🗌 Soil Kit 🔲 Paint Kit	
Cubitainers (For Water Collection)	ENVIRONMENTAL
	Drinking Water Kit (For Bacteria) - Private
	Complete Kit D Forms Only
	Drinking Water - Official (Forms Only)
	Recreational Water Kit
CONTACT NAME	TELEPHONE NUMBER LAB USE ONLY
FACILITY NAME	DATE ORDER RECEIVED
ADDRESS (STREET, CITY, ZIP) [STREET ADDRESS REQUIRED FOR UPS DELIVERY]	DATE ORDER SHIPPED