### Blood and Body Fluid Exposure Testing Requisition

**Provincial Laboratory for Public Health**

**Blood and Body Fluid Exposure Testing Requisition**

Edmonton Site 8440-112 St. T6G 2J2  
Phone 780.407.7121  Fax 780.407.3864  
Virologist/Microbiologist-on-call 780.407.8822

Calgary Site 3030 Hospital Dr NW T2N 4W4  
Phone 403.944.1200  Fax 403.270.2216  
Virologist/Microbiologist-on-call 403.944.1200

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**At Exposure**

- **Source person (BBFE)** – draw ASAP / STAT
  - HIV antibody rapid test (if available)*
  - HIV antibody
  - HCV antibody
  - Hepatitis B surface antigen
  - Hepatitis B surface antibody
  - Adult: Collect one - 5 mL in a serum separator tube
  - Child: Collect one - 2 mL in a serum separator tube
  - *Collect additional one - 5 mL in serum separator tube for rapid HIV testing

**Recipient/Exposed Person: 4 - 6 week follow-up**

- HIV antibody (HIVAB)
  - Test when source is HIV positive, or unknown
  - Collect one – 5 mL in a serum separator tube

**Recipient/Exposed Person: 12 week follow-up**

- HIV antibody (HIVAB)
  - Test when source is HIV positive, or unknown
  - Collect one – 5 mL in a serum separator tube

**HBV Susceptible Recipient/Exposed Person: 1 - 6 months after exposure even if HBV prophylaxis was given**

- To rule out Hepatitis B infection after exposure (6 months):
  - Hepatitis B core total antibody (anti-HBc) (Date)
  - Hepatitis B surface antigen (HBsAg) (Date)
  - Collect one – 5 mL in a serum separator tube
  - Hepatitis B immunity after vaccine (1-6 months):
  - Hepatitis B surface antibody (anti-HBs)(Date)
  - Collect one – 5 mL in a serum separator tube

**Special Scenarios**

- **When HIV seroconverting illness is strongly suspected in the source OR if source is known HIV positive:**
  - HIV VL - Collect one – 5 mL in an EDTA tube

- **When source is known to be HCV antibody positive:**
  - HCV PCR (HCVRNA) - Collect two – 5 mL in an EDTA or serum separator tube

- **Testing for infant (less than18 months of age)**
  - Collect one 2 ml in EDTA tube for each test selected
    - HIV antibody (HIVAB)
    - Hepatitis B core total antibody (anti-HBc) (Date)
    - Hepatitis B surface antigen (HBsAg) (Date)

- **Test recipient 6 months post-exposure if source is 1) co-infected with HCV and HIV; 2) HIV-2 positive; OR 3) if recipient HIV PEP prescription extended greater than 28 days**

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**Specimen**

- Blood Date Collected (yyyy-Mon-dd)  
  - Time (24 hr)  
  - Location  
  - Collector ID  
  - EI or AHS/CH Case #

- AHS Occupational Exposure, lab calls 1-855-450-3619 with HIVAB rapid results  
  - Community member

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**Provider(s)**

- Authorized Provider Name (last, first, middle)  
  - Copy to Name (last, first, middle)  
  - Copy to Name (last, first, middle)  
  - Address  
  - Phone  
  - Provider ID  
  - Submitter ID  
  - Phone  
  - Clinic Name  
  - Clinic Name  
  - Clinic Name

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**Patient**

- PHN  
  - Expiry:  
  - Legal Last Name  
  - Legal First Name  
  - Date of Birth (dd-Mon-yyyy)  
  - Preferred Name  
  - Male  
  - Female  
  - Non-binary/Prefer not to disclose  
  - Phone  
  - Address  
  - City/Town  
  - Prov  
  - Postal Code

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**Additional Information**

- Scanning Label or Accession # (lab only)

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**Special Instructions**

- Provinces Laboratory for Public Health

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**Provider Information**

- Virologist/Microbiologist-on-call 780.407.8822

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**Lab Information**

- ☑ Blood and Body Fluid Exposure Testing Requisition

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**Other Information**

- PHN  
  - Expiry:  
  - Legal Last Name  
  - Legal First Name  
  - Date of Birth (dd-Mon-yyyy)  
  - Preferred Name  
  - Male  
  - Female  
  - Non-binary/Prefer not to disclose  
  - Phone  
  - Address  
  - City/Town  
  - Prov  
  - Postal Code

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**Provider Name**

- Authorized Provider Name (last, first, middle)  
  - Copy to Name (last, first, middle)  
  - Copy to Name (last, first, middle)  
  - Address  
  - Phone  
  - Provider ID  
  - Submitter ID  
  - Phone  
  - Clinic Name  
  - Clinic Name  
  - Clinic Name

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**Recommended**

- HIV antibody rapid test (if available)*
  - HIV antibody
  - HCV antibody
  - Hepatitis B surface antigen
  - Hepatitis B surface antibody

- Adult: Collect one - 5 mL in a serum separator tube
- Child: Collect one - 2 mL in a serum separator tube

- Collect additional one - 5 mL in serum separator tube for rapid HIV testing

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**At Exposure**

- Source person (BBFE) – draw ASAP / STAT
- Recipient/Exposed Person (BBFE)
  - HIV antibody
  - HCV antibody
  - Hepatitis B surface antigen
  - Hepatitis B surface antibody

- Adult: Collect one - 5 mL in a serum separator tube
- Child: Collect one - 2 mL in a serum separator tube

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**Recipient/Exposed Person: 4 - 6 week follow-up**

- HIV antibody (HIVAB)
  - Test when source is HIV positive, or unknown
  - Collect one – 5 mL in a serum separator tube

- HCV PCR (HCVRNA) (≥ 6 weeks)
  - Test when source is HCV positive, or unknown
  - Collect two – 5 mL in an EDTA or serum separator tube

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**Recipient/Exposed Person: 12 week follow-up**

- HIV antibody (HIVAB)
  - Test when source is HIV positive, or unknown
  - Collect one – 5 mL in a serum separator tube

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**HBV Susceptible Recipient/Exposed Person: 1 - 6 months after exposure even if HBV prophylaxis was given**

- To rule out Hepatitis B infection after exposure (6 months):
  - Hepatitis B core total antibody (anti-HBc) (Date)
  - Hepatitis B surface antigen (HBsAg) (Date)
  - Collect one – 5 mL in a serum separator tube

- Hepatitis B immunity after vaccine (1-6 months):
  - Hepatitis B surface antibody (anti-HBs)(Date)
  - Collect one – 5 mL in a serum separator tube

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**Special Scenarios**

- **When HIV seroconverting illness is strongly suspected in the source OR if source is known HIV positive:**
  - HIV VL - Collect one – 5 mL in an EDTA tube

- **When source is known to be HCV antibody positive:**
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- **Testing for infant (less than 18 months of age)**
  - Collect one 2 ml in EDTA tube for each test selected
    - HIV antibody (HIVAB)
    - Hepatitis B core total antibody (anti-HBc) (Date)
    - Hepatitis B surface antigen (HBsAg) (Date)

- **Test recipient 6 months post-exposure if source is 1) co-infected with HCV and HIV; 2) HIV-2 positive; OR 3) if recipient HIV PEP prescription extended greater than 28 days**
  - HIV antibody (HIVAB)
  - Collect one – 5 mL in a serum separator tube

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**Additional Instructions**

- AHS Occupational Exposure, lab calls 1-855-450-3619 with HIVAB rapid results  
  - Community member