



November 17, 2023

To All OSPHL Microbiology Testing Clients,

Beginning in December, the Oregon State Public Health Laboratory (OSPHL) will need to close its Biosafety Level 3 (BSL-3) testing suite for an estimated five weeks for equipment replacement and maintenance. During the period of the BSL-3 closure at OSPHL, select agent rule-out specimens will be referred to Washington Department of Health (WADOH) for testing. We anticipate resuming testing at OSPHL in mid-January 2024.

This includes but is not limited to rule-outs for:

- *Bacillus anthracis*
- *Brucella melitensis*, *B. abortus*, and *B. suis*
- *Burkholderia mallei* and *B. pseudomallei*
- *Coxiella burnetii*
- *Francisella tularensis*
- *Yersinia pestis*

Due to the urgency of these specimens, **WADOH will accept these specimens directly from submitters.** Submitting specimens to OSPHL will delay testing.

Submission Steps:

Step 1: Notify the Oregon Health Authority (OHA) or your local public health authority (LPHA)

- OHA Acute & Communicable Disease Prevention section (971) 673-1111

Step 2: Notify the Oregon State Public Health Laboratory at (503) 693-4100

Step 3: Complete both the OSPHL and WADOH test requisitions

- OSPHL: <https://apps.state.or.us/forms/served/le0060.pdf>
- WADOH - attached

Step 4: Fax both test requisitions to the OSPHL at (503) 693-5604

Step 5: Ship specimen and both test requisitions to WADOH

- NOTE: FedEx is the only commercial carrier who will transport Category A
- Washington's facility routinely accepts packages Monday – Friday

WADOH Specimen Receiving Address:

CONSIGNEE:
Washington Department of Health Laboratories
ATTN: Emergency Response/JohnAric Peterson
1610 NE 150th Street
Shoreline, WA 98155 PH: (206) 418-5400

Your facility is responsible for appropriately categorizing, packaging, and shipping infectious materials in accordance with Department of Transportation's and the International Air Transport Association's hazardous materials regulations.

What submitters can expect:

- OSPHL intends to refer rule-out testing from December 4, 2023 to January 16, 2024. Subsequent communications will be distributed when testing resumes at OSPHL.
- WADOH performs rule-out testing using the same methodologies used at OSPHL. For more information, please visit the [WADOH Lab Test Menu](#).
- While submitters will send specimens directly to WADOH, the OSPHL will be listed as the submitting facility on result paperwork. Results will be reported by WADOH to OSPHL, who will release results to the submitter via normal methods. This minimizes report changes for submitters, reduces data entry burdens on the WADOH team, and ensures appropriate parties receive test results.
- If additional follow-up is needed, the WADOH team will reach out to the submitting laboratory directly.

If you have any additional questions, please reach out:

- Lab Response Network Coordinator: Macey Henning – (503) 693-4123 or macey.henning@oha.oregon.gov
- Laboratory Manager: Marisa Frieder, General Microbiology Section Manager – (503) 693-4139 or marisa.d.frieder@oha.oregon.gov
- OHA Epidemiology Team: (971) 673-1111



DOH 302-018

State of Washington Department of Health PUBLIC HEALTH LABORATORIES 1610 N.E. 150th Street Shoreline, Washington 98155-9701 Phone: (206) 418-5400 Fax: (206) 364-0072 MTS #1327 CLIA #50D0661453 Http://doh.wa.gov/PHLForms

FOR PHL USE ONLY

Lab Number

Date/Time Received

BIOTERRORISM SUBMITTER

Please Print Clearly

MAIL RESULTS TO: Oregon State Public Health Laboratory GM Manager/Marisa Frieder 7202 NE Evergreen Pkwy Suite 100 Hillsboro, OR 97124 AREA CODE & PHONE # (503) 693 - 4100 FAX # (503) 693 - 5604 COUNTY Washington NAME OF PERSON COMPLETING THIS FORM

SPECIMEN INFORMATION

SPECIFIC AGENT SUSPECTED: BACILLUS ANTHRACIS BRUCELLA SPP. BURKHOLDERIA MALLEI / PSEUDOMALLEI COXIELLA BURNETII CLOSTRIDIUM BOTULINUM TOXIN EBOLA VIRUS FRANCISELLA TULARENSIS MERS CoV NON-VARIOLA ORTHOPOX ORTHOPOX VARICELLA ZOSTER VIRUS YERSINIA PESTIS OTHER (Specify)

SPECIMEN TYPE: ISOLATE STOOL SERUM BLOOD PLASMA CSF OROPHARYNGEAL BRONCHIAL WASH SPUTUM WOUND URINE NASOPHARYNGEAL TISSUE FLUID OTHER DATE COLLECTED TIME OF DAY OF ONSET SPECIMEN ID

PATIENT INFORMATION

LAST FIRST MIDDLE ADDRESS CITY STATE ZIP CODE COUNTY MALE FEMALE DATE OF BIRTH CHART OR PATIENT ID NUMBER CLINICIAN CLINICIAN'S PHONE #

TEST RESULTS OBTAINED BY: MALDI VITEK

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Preliminary Results:

Date/Time Reported:

Final Results:

Date/Time Reported:

Submitter Comments: Submitting Laboratory Name, Address, and Contact Number:

PHL Comments:

GENERAL INSTRUCTIONS:

- PLEASE PRINT LEGIBLY.
- Please fill out the requisition form COMPLETELY. Delays in processing the specimen or reporting results may occur if information is incomplete.
- Each specimen submitted to the Public Health Laboratories (PHL) must be clearly marked with at least two unique identifiers for positive identification.
- Send specimens to the PHL as soon as possible to help ensure valid test results.
- All specimens being shipped must meet DOT(Department of Transportation) and US Postal Service regulations. It is the shipper's responsibility to ensure that packages being shipped meet these regulations. Specimens mailed with insufficient postage will not be delivered by the Postal Service.
- This form replaces:
Microbiology
Form Number
DOH 302-013
- Using the incorrect form may delay processing of the specimen.
- To obtain additional collection kits, please contact the PHL Mail Room at (206) 418-5579.

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

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