

Texas Department of State Health Services

CAP# 3024401 CLIA #45D0660644

☑ Zoonosis (1620)

Questions? <u>LabInfo@dshs.texas.gov</u> Specimen Acquisition: (512) 776-7598

1 FORM = 1 COLLECTION

Please complete a separate form for each trap collection

SPECIMEN BARCODE

This Space for DSHS Laboratory Use Only

G-14 Mosquito Specimen Submission Form						
SECTION 1. SUBMITTER – (** REQUIRED)						
Submitter Number ** Submitter Name**						
Address	City	1	State	Zip Code	Phone	
SECTION 2. SPECIMEN – (** REQUIRED)						
Date of Collection**: Collected By**: GPS Reading**: Latitude**: Longitude**:						
Physical Address**			Zip Code**	City**	County**	
Type of Collection**:	d □ BG-Sentine	el 🗆 Ovitrap	Submitter/ Sample ID:			
□ Adult □ Larval □ Egg □ Gravid □ Light □ Light/Gravid □ BG-Sentinel □ Ovitrap □ Aspirator □ Mosquito Magnet □ Other:						
Habitat:						
Comments:						
SECTION 3. ARBOVIRUS						
Other Arbovirus Activity from this Site During Current Season: ☐ WNV ☐ SLEV ☐ WEEV ☐ EEEV ☐ CHIKV ☐ ZIKV ☐ DENV ☐ Other:						
			YOR SOURCE			
☑ Zoonosis (1620) NOTE: Reflex testing will be performed when necessary and the appropriate party will be billed.						
Public Health Laboratory Division MC 1947 1100 W. 49 th St. Austin, TX 78756 https://www.dshs.texas.gov/lab						
January 2025						
TEXAS				SPECIMEN BARCODE		
Health and Human Texas Department of State						
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Physical Address**			Zip Code**	City**	County**	
	ethod of Collection**:	□ Light/Crovi	d DDC Continu	ol 🗆 Ovitron	Submitter/ Sample ID:	
□ Adult □ Larval □ Egg □ Gravid □ Light □ Light/Gravid □ BG-Sentinel □ Ovitrap □ Aspirator □ Mosquito Magnet □ Other:						
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SECTION 4. PAYOR SOURCE						

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