



TEXAS

Health and Human Services

Texas Department of State Health Services

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

G-23-Food Sample Specimen Submission Form (January 2025)

CAP# 3024401 CLIA# 45D0660644

SPECIMEN BARCODE

This Space for DSHS Laboratory Use Only

ONE FORM PER SPECIMEN REQUIRED

Section 1. SAMPLE INFORMATION (REQUIRED)				Section 3. PAYOR SOURCE (REQUIRED)	
Reason for Testing <input type="checkbox"/> Routine <input type="checkbox"/> Food Borne Outbreak (If this box is checked, please complete Section 4 of this form)				<input checked="" type="checkbox"/> IDEAS	
Sample Description:				Section 4. OUTBREAK LINKED SAMPLES	
Date of Collection ** (REQUIRED)				Outbreak Location: (City)	
Time of Collection **		<input type="checkbox"/> AM** <input type="checkbox"/> PM**		PH Region	
Collected By **				Brand:	
Facility/ Submitter Name				Code:	
Sample Number:		Submitter Number:		Product:	
Contact Phone #		Contact Fax #		Seal:	
Section 2. TESTING INFORMATION					
***** EACH TEST REQUIRES ≥ 4 oz SAMPLE-REPEAT, EACH TEST*****					
Please Indicate Desired Testing					
<input type="checkbox"/> Food Analysis: Campylobacter		<input type="checkbox"/> Food Analysis: Listeria		Size:	
<input type="checkbox"/> Food Analysis: Cronobacter		<input type="checkbox"/> Food Analysis: Salmonella		Condition:	
<input type="checkbox"/> Food Analysis: Cyclospora, PCR		<input type="checkbox"/> Food Analysis: Shigella		Brief description of patient's symptoms:	
<input type="checkbox"/> Food Analysis: E. coli O157		<input type="checkbox"/> Food Analysis: Staphylococcus enterotoxin			
<input type="checkbox"/> Food Analysis: non-O157 STEC		<input type="checkbox"/> Food Analysis: Yersinia			
<input type="checkbox"/> Food Analysis: Other _____					
Remarks:				Date Received	
Details of test and specimen requirements can be found in the Laboratory Services Section's web site at http://www.dshs.texas.gov/lab/ .					
FOR LABORATORY USE ONLY					
Specimen Received: <input type="checkbox"/> Room Temp. <input type="checkbox"/> Cold <input type="checkbox"/> Frozen					

SAMPLED DO NOT USE