

302 Unity Plaza Latrobe, PA 15650 P: 724.853.4047 F: 724.853.4049

labcom@usmslab.com

LABORATORY TEST REQUEST - CHAIN OF CUSTODY

Customer Name:					Phone #:	FAX #:				
Address:					City: State: Zip:					
Attention To:					E-Mail:					
Sample Obtained	Ву:				Results:	#				
Project Name/Nu	mber:							•		
Turn-Around-Time (Spore Trap & DN			Standard (48-	-72 hr) Ne	xt Day (24 hr, M-F) Same Day (6 hr, M-F) 3-Hour (M-F)			(M-F)	Saturday	
Comments:										
Sample #	Saı Date	mple / Time	Sample Code	Analysis Code	Sam	ple Location & Des	cription		Sample Volume/Area	
Relinquished By ((Customer	MUST sign)					Date 8	& Time		
Received By – Lab Use Only					Date	e & Time	Lab #			
Page 1 of 3	SAM	02.01 Form	n 3 v7 D	CR 23-182	Effect	ive 06-23-23	•			

Sample Code						
Α	Air Plate					
В	Bulk					
ST	Spore Trap					
S	Swab Water					
W						
Т	Таре					
O Other						

Analysis Code								
DME	Direct Microscopic Exam	Colilert – Presence/absence of <i>E. coli</i> , coliforms						
SPT	Spore Trap ☐ Allergenco-D ☐ AirOCell ☐ M5	HPC	Heterotrophic Plate Count					
FUNG	Fungal Culture – Counts w/ Identification	MYC	Mycobacteria Culture (nontuberculous)					
BACT	Bacterial Culture – Counts w/ Identification	LEG	Legionella Culture					
BACT24	Bacterial Culture (24 hr) - Counts w/ presence/absence of gram-negatives	DUO	Duodenoscope Culture					
SS24	Sewage Screen (24 hr) - Presence/absence E. coli, coliforms, enterococci (fecal streptococci)	нси	Heater/Cooler Water Culture includes nontuberculous mycobacteria and HPC					
IDS	Species Identification by MALDI-TOF	OPP	Opportunistic Pathogen Panel (or separate) PSA - Pseudomonas aeruginosa Culture					
BART	Microbially Influenced Corrosion Panel Iron-related, sulfate-reducing, slime-forming bacteria		BURK - Burkholderia cepacia complex Culture ACIN - Acinetobacter Culture					

^{*}All samples received after 1:00 p.m. Monday-Friday will be considered received the NEXT business day.

Same Day and Next Day samples received on Saturday will be reported on Monday and Tuesday, respectively.



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AN ENVIRONMENTAL MICROBIOLOGY LAB

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Customer Name:						Project Name/Number:			
Sample #	Sample Date / Time		Sample Code	Analysis Code		Sample Location	mple Location & Description		Sample Volume/Area
2 1 12								"	
Received By – La	b Use Only					Date & Time		Lab#	