Enhanced COVID-19 New York State Surveillance Requisition

Please send specimens to: UR Medicine Labs – Central Laboratory

Attention: Dwight Hardy, PhD, Microbiology 211 Bailey Road, West Henrietta, NY 14586

Test requested: ☑ SARS-CoV-2 whole-genome sequencing

Patient Information					*Required Info	Required Information	
LAST NAME*			FIRST NAME*		DOB* MM/D	DOB* MM/DD/YYYY	
STREE	T ADDRESS*			CITY*	STATE* Z	IP CODE*	
SEX*	□ Male (M)	□ Female (F)	ПΧ	□ Unknown			
Submitter Information *Required Information							
SUBMI	TTING FACILIT	Y NAME*					
SUBMI	TTING FACILIT	Y ADDRESS					
CONTA	ACT PERSON N	AME		CONTACT	CONTACT PHONE OR EMAIL		
Speci	men Informa	ition			*Required Information		

COLLECTION DATE* MM/DD/YYYY

Authorization Regarding Public Health Surveillance Sequencing for COVID-19

The New York State Department of Health has authorized UR Medicine Labs to conduct sequencing of positive SARS-CoV-2 samples because it is viewed as essential public health information for tracking the viral sequence variants that contribute to the spread of disease.

① Information on COVID-19 Variant Data

The analysis of SARS-CoV-2 sequencing results for NYS samples are publicly available at the following web site: https://coronavirus.health.ny.gov/covid-19-variant-data