



SAN JOAQUIN COUNTY
PUBLIC HEALTH LABORATORY
1601 E. HAZELTON AVE., STOCKTON, CA 95205
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CLIA # 05D0643989

LABORATORY USE ONLY

LAB NUMBER

DATE / TIME RECEIVED

Rev. 3.19.26

Cultures For Identification Submission Form
Use for Bacteriology, Mycobacteriology, Mycology, Malaria and Title 17 submissions

Asterisk Indicates Required Fields

Patient Information

Last Name*: _____ First Name*: _____ MI: _____ Age: _____ Units: _____
Ethnicity*: _____ Race*: _____ Gender*: _____ Pregnancy Status*: _____ DOB*: _____
Patient Street Address*: _____ City*: _____
County*: _____ State*: _____ Zip*: _____
Suspected Disease: _____ Onset Date: _____ Medical Record: _____
CalREDIE #: _____ Travel History: _____

Submitting Lab Information

Submitter Name*: _____ Submitter Specimen #: _____
Submitter Address*: _____ Submitter City*: _____ ZIP*: _____
Phone*: _____ Fax*: _____ E-Mail: _____

Ordering Provider Information

Physician Name*: _____ Physician NPI#*: _____ Diagnosis Code: _____
Physician Address: _____ Physician City: _____
Physician State: _____ Physician Zip: _____

Specimen Submittal Information

Date Collected*: _____ Time: _____ Material Submitted: _____
Specimen Media: _____ Specimen Source*: _____ Title 17* (Y/N/UNK) _____
Specimen Source Site: _____ Reason for Submittal: Title 17 Culture for Identification Other
 Select Agent Rule-out CRE/CRPA/CRAB
Brief clinical history, symptoms, therapy:

Submitter Identification of Organism*: _____

(Please attach a copy of any supplementary identification paperwork)

Important: Enter pre-submission specimen information on the top of 2nd page

Culture made from original clinical sample were:	Pure	Mixed
If mixed list other organisms:		
Laboratory colony counts where applicable (e.g., urine):		Number of times organism submitted:
Isolated from patient:		
Medium on which primary growth was obtained:		
Medium on which organism is being submitted:		
Condition of incubation prior to mailing:	Temperature	Atmosphere
		Length
Date Inoculated:		

Title 17, California Code of Regulations (CCR), Section 2505 June 2025

When a laboratory receives a specimen or request for the laboratory diagnosis of a suspected human case of one of the following diseases, the laboratory must communicate immediately with the San Joaquin County Communicable Disease section at 209-468-3822: **Anthrax, Botulism, Brucellosis, Glanders, Influenza (Novel Strains), Melioidosis, Plague, Smallpox, Tularemia, Viral hemorrhagic Fever agents**. Please refer to the Title 17 June 2025 document for additional reporting or specimen submittal requirements for the Public Health Laboratory.

(m)(1) Specimens:

- Malaria positive blood film slides (see (h) for additional reporting requirements)
- Neisseria meningitidis eye specimens
- Shiga toxin-positive fecal broths
- Vibrio positive by culture independent diagnostic test
- Zika virus immunoglobulin M (IgM)-positive sera

(m)(2) Isolates:

- Cronobacter sakazakii isolates in infants less than one year of age
- Drug resistant Neisseria gonorrhoeae isolates (cephalosporin or azithromycin only)
- Legionella
- Listeria monocytogenes isolates
- Mycobacterium tuberculosis isolates (see (f) for additional reporting requirements)
- Neisseria meningitidis isolates from sterile sites
- Salmonella isolates (see section 2612 for additional reporting requirements)
- Shigatoxin-producing Escherichia coli (STEC) isolates, including O157 and non-O157 strains
- Shigella isolates
- Vibrio cholerae

Additional Instructions for (m)(2) Isolates (Section 2505 Subsection (m)(3)):

If a laboratory test result indicates infection with any one of the pathogens listed in (m)(2), then the testing laboratory must attempt to obtain a bacterial culture isolate for submission to a public health laboratory in accordance with (m)(2). This requirement includes identification of Shiga toxin in a clinical specimen. If latent tuberculosis infection is identified, an attempt to obtain a bacterial culture isolate is not required. The testing laboratory shall take steps necessary to obtain an isolate, including requesting that additional specimens be collected and sending specimens to a laboratory able to carry out bacterial culture as soon as possible.