Microbiology Chain of Custody

EMSL Order Number (*Lab Use Only*):

PHONE:
FAX:

Company Name:		**EMSL-Bill to:** ☐ Same ☐ Different If Bill to is Different note instructions in Comments** *Third Party Billing requires written authorization from third party*	
Street:			
City:	**State/Province:**	**Zip/Postal Code:**	**Country:**
Report To (Name):		**Telephone #:**	
Email Address:		**Fax #:**	**Purchase Order:**
Project Name/Number:		**Please Provide Results:** ☐ **Fax** ☐ **Email**	
U.S. State Samples Taken:	**Zip Code Sample Taken:**	**Connecticut Samples:** ☐ **Commercial** ☐ **Residential**	

**Analysis completed in accordance with EMSL's Terms and Conditions located in the Analytical Price Guide. TATs are subject to methodology requirements*

Sterile, Sodium Thiosulfate Preserved Bottle Used: ☐ **Biocide Used in Source (specify):** _____ ☐

Public Water Supply Samples: ☐ **Note: All results may automatically be reported to DOH if required by state.**

Turnaround Time (TAT) Options * - Please Check

☐ 3 Hour	☐ 6 Hour	☐ 24 Hour	☐ 48 Hour	☐ 72 Hour	☐ 96 Hour	☐ 1 Week	☐ 2 Week

Microbiology Test Codes

M001 Air-O-Cell
M174 MoldSnap
M030 Micro 5
M032 Allergenco-D
M041 Fungal Direct Examination
M169 Pollen ID & Enumeration
M280 Dust Characterization Level-1
M281 Dust Characterization Level-2
M005 Viable Fungi- Air Samples (Genus ID & Count)
M006 Viable Fungi- Air Samples (Includes *Penicillium, Aspergillus, Cladosporium, Stachybotrys* Species ID & Count)
M007 Culturable fungi - Surface Samples (Genus ID & Count)
M008 Culturable fungi - Surface Samples (Includes *Penicillium, Aspergillus, Cladosporium, Stachybotrys* Species ID & Count)
M009 Bacteria Culture Gram Stain & Count
M010 Bacteria Count & ID - 3 Most Prominent
M011 Bacteria Count & ID - 5 Most Prominent
M012 Pseudomonas aeruginosa (P/A***)
M024 Pseudomonas aeruginosa (MFT*)
M015 Heterotrophic Plate Count
M017 Total Coliform & E. coli (Colilert P/A***)
M018 Total Coliform & E. coli (MFT*)
M114 Total Coliform & E. coli Enumeration (Colilert MPN**)
M019 Fecal Coliform (MFT*)
M020 Fecal Streptococcus (MFT*)
M029 Enterococci (MFT*)
M129 Enterococci (Enterolert P/A***)
M180 Real Time qPCR-ERMI 36 Panel
M025 Sewage Screen ï Water (MFT*)
M115 Sewage Screen - Water (P/A***)
M116 Sewage Screen - Water (MPN**)
M117 Sewage Screen - Swab (P/A***)
M013 Sewage Screen - Swab (MFT*)
M133 Methicillin-resistant Staph. aureus (MRSA)
M031 Rapid-growing non-TB Mycobacteria Detection & Enumeration
M014 Endotoxin Analysis
M044 Group Allergen (Cat, Dog, Cockroach, Dust Mite)
Other See Analytical Price Guide
Legionella Analysis Please use EMSL Legionella COC

*MFT= Membrane Filtration Technique
**MPN= Most Probable Number
***P/A= Presence/Absence

Name of Sampler: **Signature of Sampler:**

Sample #	Sample Location/Description	Sample Type	Potable/ NonPotable (only for waters)	Test Code	Volume/ Area	Date/Time Collected	Temperature (˚C) (Lab Use Only)
Example A1	Kitchen Sink/Tap	Water	☒ P ☐NP	M017	100 mL	9/1/13 4:00 PM	
			☐ P ☐NP				
			☐ P ☐NP				
			☐ P ☐NP				
			☐ P ☐NP				
			☐ P ☐NP				
			☐ P ☐NP				

Client Sample # (s): -

Total # of Samples:

Samples Received Chilled? Yes / No

Relinquished (Client):	**Date:**	**Time:**
Received (Lab):	**Date:**	**Time:**

Comments/Special Instructions:

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Additional Pages of the Chain of Custody are only necessary if needed for additional sample information

Sample #	Sample Location/Description	Sample Type	Potable/ NonPotable	Test Code	Volume/ Area	Date/Time Collected	Temperature (˚C) (Lab Use Only)
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			☐ P ☐NP				
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Comments/Special Instructions: