

Public Health Ontario Laboratory 661 University Avenue, Suite 1701 Toronto, ON M5G 1M1 www.publichealthontario.ca

H6; Ybchmd]b[FYei Ygh: cfa

Submitter Information		
Health Unit/Institution		
Address	City	Postal Code
Contact Person	Phone	Fax
Email		
Sugnast Cluster: Defient Information		
Suspect Cluster: Patient Information	DB (yyyy-mm-dd) HIN#	Diagnosis Date (yyyy-mm-dd)
1.		
PHL# iPHIS# Reason for suspected match: Specify:		
Family Workplace Known Contact Other		
Match against: Specify:		
Entire database Homeless cluster Patient 2 Patient 3 Other		
Last Name First Name De	DB (yyyy-mm-dd) HIN#	Diagnosis Date (yyyy-mm-dd)
2.		
PHL# iPHIS# Reason for suspected match:		Specify:
Family Workplace Known Contact Other		
Match against: Specify:		
Entire database Homeless cluster Patient 1 Patient 3 Other		
Last Name First Name D	OB (yyyy-mm-dd) HIN#	Diagnopia Data (Jawa) mm dd)
3.		Diagnosis Date (yyyy-mm-dd)
PHL# iPHIS# Reason for suspected match: Specify:		
Family Workplace Known Contact Other		
Match against:		Specify:
Entire database Homeless cluster Patient 1 Patient 2 Other		
Additional Information		
Additional Comments:		
Please fill in this form electronically, print, and then fax to the PHL		
Please fill in this form electronica	lly, print, and then	tax to the PHL

Toronto TB and Mycobacteriology laboratory at 416-235-6013

For any questions please contact the TB laboratory at 647-792-3345.

The personal health information is collected under the authority of the *Personal Health Information Protection Act*, 2004, s.36 (1)(c)(iii) for the purposes specified in the *Ontario Agency for Health Protection and Promotion Act*, 2007, s.1 including clinical laboratory testing and public health purposes. If you have questions about the collection of this personal health information please contact the PHO's Laboratory Customer Service at 416-235-6556 or toll free 1-877-604-4567. F-SD-TB-105 version 004.1 (August 2024).

