

Incollare qui l'etichetta del paziente!

Data e ora del prelievo:

Mese 123456789101112

Giorno 102030123456789

Ora 102000123456789

Minuti 0510152025303540455055

Segnare
le caselle
solo con
la matita

SERVIZIO DI MICROBIOLOGIA EOLAB

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Informazioni cliniche

216 - Virologia

	Siero	Sangue EDTA	Liquor	Lavaggio broncoalveolare	Aspirato bronchiale	Striscio nasofaringeo/gola	Striscio	Puntato articolare	Puntato	Biopsia	Feci	Urina	Altro:
PANNELLI RESPIRATORI (PCR)													
Polmoniti atipiche, PCR	1)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>
Pannello immunosoppressi, PCR	2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>
Patogeni respiratori, PCR	3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>
BATTERI													
PCR Eubatterica		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
Bartonella henselae / quintana, PCR		<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
Bartonella henselae / quintana, IgM/IgG	<input type="checkbox"/>												
Bordetella pertussis / parapertussis, PCR				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>
Borrelia burgdorferi, PCR			<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Borrelia burgdorferi, IgM/IgG	<input type="checkbox"/>												
Borrelia burgdorferi, sintesi intratecale	<input type="checkbox"/> 4)		<input type="checkbox"/> 4)										
Brucella, anticorpi	<input type="checkbox"/>												
Campylobacter jejuni, anticorpi	<input type="checkbox"/>												
Chlamydia psittaci, IgM/IgG	<input type="checkbox"/>												
Chlamydia trachomatis, PCR							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia trachomatis, IgM/IgG	<input type="checkbox"/> 5)												
Chlamydia pneumoniae, PCR				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>					<input type="checkbox"/>
Chlamydia pneumoniae, IgM/IgG	<input type="checkbox"/>												
Coxiella burnetii, IgM/IgG	<input type="checkbox"/>												
Helicobacter pylori, IgG	<input type="checkbox"/>												
Legionella pneumophila / species, PCR				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>
Leptospira, PCR		<input type="checkbox"/>										<input type="checkbox"/>	
Leptospira, IgM/IgG	<input type="checkbox"/>												
Mycoplasma pneumoniae, PCR				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>
Mycoplasma pneumoniae, IgM/IgG	<input type="checkbox"/>	<input type="checkbox"/>											
Neisseria gonorrhoeae, PCR							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Rickettsia, IgM/IgG	<input type="checkbox"/>												
Treponema pallidum, screening anticorpi	<input type="checkbox"/>	<input type="checkbox"/>											
Treponema pallidum, solo TPPA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Treponema pallidum, solo RPR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Tropheryma whippelii, PCR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Yersinia, anticorpi	<input type="checkbox"/>												
FUNGHI													
PCR panfungina				<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
Aspergillus, antigene (Galattomannano)	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>								
Aspergillus, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
Infezione fungina, antigene (1,3-beta D-glucano)	<input type="checkbox"/>												
Cryptococcus neoformans, antigene	<input type="checkbox"/>		<input type="checkbox"/>										
Pneumocystis jirovecii, PCR			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			<input type="checkbox"/>
PARASSITI													
Echinococcus, anticorpi	<input type="checkbox"/>												
Entamoeba histolytica, anticorpi	<input type="checkbox"/>												
Strongyloides, anticorpi	<input type="checkbox"/>												
Toxoplasma gondii, IgM/IgG	<input type="checkbox"/>	<input type="checkbox"/>											
Toxoplasma gondii, PCR		<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>			<input type="checkbox"/>

- 1) Legionella, C. pneumoniae, M. pneumoniae
- 2) C. pneumoniae, M. pneumoniae, CMV, Inf A/B, Aspergillus, Legionella, P. jirovecii, Metapneumovirus, M. tuberculosis
- 3) C. pneumoniae, M. pneumoniae, Adenovirus, Influenza A/B, Metapneumovirus, Parainf 1-4, Rhinovirus/Enterovirus, RSV, Coronavirus, B. pertussis
- 4) per l'analisi della sintesi intratecale, inviare siero e liquor prelevati nello stesso giorno
- 5) C. trachomatis IgM eseguite unicamente per pazienti < 12 mesi

Timbro reparto/medico

Medico: (firma)

Copia a Dr. _____

217 - Virologia / Virus

	Siero	Plasma/ sangue EDTA	Liquor	Aspirato bronchiale/BAL	Striscio nasofaringeo/gola	Striscio	Puntato	Biopsia	Feci	Urina	Altro:
EPATITI											
Pannello epatite acuta	6)	<input type="checkbox"/>	<input type="checkbox"/>								
Pannello epatite cronica	7)	<input type="checkbox"/>	<input type="checkbox"/>								
Epatite A, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite A, solamente IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, Ag HBs		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, anti HBs		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, anti HBc Ig		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, anti HBc IgM		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, Ag Hbe		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, anti Hbe Ig		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, PCR quantitativa		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite B, genotipo		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite C, screening anticorpi		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite C, Immunoblot		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite C, PCR quantitativa		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite C, genotipi		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite D, anticorpi		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite E, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Epatite E, PCR		<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>		
ALTRI VIRUS											
Adenovirus, anticorpi		<input type="checkbox"/>									
BK virus, PCR		<input type="checkbox"/>	<input type="checkbox"/>								
Cytomegalovirus, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Cytomegalovirus, solamente IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Cytomegalovirus, PCR qualitativa		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Cytomegalovirus, PCR quantitativa		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Enterovirus, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		
Epstein-Barr Virus, IgM/IgG/EBNA		<input type="checkbox"/>	<input type="checkbox"/>								
Epstein-Barr Virus, PCR qualitativa		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			
Epstein-Barr Virus, PCR quantitativa		<input type="checkbox"/>	<input type="checkbox"/>								
Herpes simplex virus, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Herpes simplex Virus, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>
HHV6 Human Herpes Virus 6, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
HIV, screening antigene/anticorpi		<input type="checkbox"/>	<input type="checkbox"/>								
HIV, Immunoblot		<input type="checkbox"/>	<input type="checkbox"/>								
HIV, PCR quantitativa		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
HTLV 1/2, anticorpi		<input type="checkbox"/>	<input type="checkbox"/>								
JC Polyomavirus, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	
Morbillo, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Morbillo, solamente IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Norovirus, PCR		<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>		
Orecchioni (Parotite), IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Orecchioni (Parotite), solamente IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Parvovirus B19, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
Parvovirus B19, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
Rosolia, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Rosolia, solamente IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Varicella zoster, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>					<input type="checkbox"/>
Varicella zoster, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Varicella zoster, solamente IgG		<input type="checkbox"/>	<input type="checkbox"/>								
ARBOVIROSI											
Chikungunya, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Chikungunya, PCR		<input type="checkbox"/>	<input type="checkbox"/>								
Dengue Virus, antigene e IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Dengue Virus, PCR		<input type="checkbox"/>	<input type="checkbox"/>								
Meningoencefalite da zecca (FSME), IgM/IgG		<input type="checkbox"/> 8)	<input type="checkbox"/>	<input type="checkbox"/> 8)							
Meningoencefalite da zecca (FSME), PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
West Nile, IgM/IgG		<input type="checkbox"/> 8)	<input type="checkbox"/>	<input type="checkbox"/> 8)							
West Nile, PCR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
Zika, IgM/IgG		<input type="checkbox"/>	<input type="checkbox"/>								
Zika, PCR		<input type="checkbox"/>	<input type="checkbox"/>							<input type="checkbox"/>	
Altro: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6) Epatite A IgM/IgG, Epatite B Ag HBs, anti HBc Ig/IgM, Epatite C Ac/viremia, Epatite E IgM/IgG

7) Epatite B Ag HBs, anti HBc Ig, anti HBs, Epatite C Ac/viremia,

8) per l'analisi della sintesi intratecale, inviare siero e liquor prelevati nello stesso giorno