

Appendix I (b)
Health Unit Notification to Central Public Health Lab

Ministry of Health
and
Long-Term Care

Ministère de la Santé
et
des Soins de longue
durée



FAX: FROM HEALTH UNITS TO CPHL
Version April 24, 2007

TO:	Tina Di Persiis/Christina Vecchiato		Date : [REDACTED]
ORGANIZATION:	W.R.A.P.S. DEPARTMENT		
FAX #:	416-235-6188	PHONE #:	416-235-6071 416-235-6092
FROM:	[REDACTED]		
ORGANIZATION/DEPT.:	[REDACTED]		
ADDRESS:	[REDACTED]		
PAGES:	[REDACTED]	PHONE #	[REDACTED] FAX #: [REDACTED]
CONFIDENTIAL	<input type="checkbox"/>	AS REQUESTED	<input type="checkbox"/> PER CONVERSATION <input type="checkbox"/>
URGENT	<input type="checkbox"/>	FYI	<input type="checkbox"/> PER E-MAIL NOTE <input type="checkbox"/>

REQUEST FOR INFORMATION on West Nile Virus (WNV):

As per the preceding phone call informing you of this fax, the following individual

is not a resident of this health unit, and has been forwarded to:
 Health Unit [REDACTED] Contact [REDACTED]

is a suspect case - request ELISA test results

has a travel history - request confirmation by PRNT

is possibly not a recently infected case - request Avidity testing

Name: [REDACTED] Test Result: [REDACTED]
 DOB: [REDACTED]
 Health card No: [REDACTED]
 Name of referring physician: [REDACTED]

Please return results to sender when available.

Confidentiality Notice: The contents of the document(s) accompanying this facsimile transmission are confidential and intended only for the use of the individual(s) named above. If you have received this information in error, please notify me immediately by telephone at the above number