AFP Case Lab 2023

Acute Flaccid Paralysis Case Investigation
Lab Request Form

Case Details

Name:		
Gender:	DOB:	Age:
IC/Passport No:		Patient RN:
Residential Address:		
District:		State:
Parent's Name:		Tel No:
Facility Name:		
Hospitalised: Yes/No	Date of Admission:	Ward:

History

Date of paralysis onset:	Progressive paralysis ≤3 days? Yes/No/Unknown	Site of paralysis:
Fever at onset of paralysis? Yes/No/Unknown	Asymmetric: Yes/No/Unknown:	LA RA
Is paralysis: Flaccid and acute? Yes/No/Unknown	Similar case among contacts? Yes/No	LL RL
Any recent travel? Yes/No If 'Yes", state place and date		
Provisional Diagnosis:		

Stool samples

IMPORTANT : Two stool samples to be collected 24 hours apart, within 14 days of onset of paralysis

Please send each stool sample without delay (to be received by IMR within 72 hours of stool collection) in 4-8°C

1st stool	2nd stool
Date collection:	Date collection
Date sent to IMR:	Date sent to IMR:
Date received by IMR:	Date received by IMR:

Name of sender	Tel No:	Fax. No:

Send the samples to: Virology Unit, Infectious Diseases Research Centre (IDRC), Institute for Medical Research (IMR), National Institutes of Health (NIH), No. 1, Jalan Setia Murni U13/52, Seksyen U13, Setia Alam, 40170 Shah Alam, Selangor