



Division of Laboratory Services
 630 Hart Lane
 Nashville, TN 37216
 615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

Disease/Agent Suspected or Test Requested:

Hepatitis A Serology

Provider Requirements	<ul style="list-style-type: none"> • PRIOR CONSULTATION REQUIRED. • Requested through consultation with epidemiology only. • Contact CEDEP prior to submission. 	
Acceptable Specimen Sources/Type(s) for Submission	<ul style="list-style-type: none"> • Whole, clotted blood • Serum • Plasma 	
TDH Requisition Form Number	PH-4182	
Media Requirements	Glass Tubes: <ul style="list-style-type: none"> • Serum (Red Top) • Serum Separator 	Plastic Tubes: <ul style="list-style-type: none"> • Serum (Red Top) • Serum separator • Lithium heparin plasma separator • Sodium heparin • Dipotassium EDTA
Special Instructions	<ul style="list-style-type: none"> • Specimens may be stored on or off the clot, red blood cells, or separator gel for up to 3 days at room temperature (20 to 23°C) or up to 7 days at 2-8°C. • If testing will be delayed more than 3 days for specimens stored at room temperature or more than 7 days for specimens stored at 2-8°C, remove serum or plasma from the clot, red blood cells, or separator gel and store at -20°C or colder. • Avoid more than three freeze/thaw cycles. 	
Shipping Instructions	Ship on cold packs; or if frozen, ship on dry ice.	
Laboratory Section Performing Testing	Serology	
Lab Location Performing Test	Nashville	

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).