



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:**

**Rocky Mountain spotted fever serology (*Rickettsia rickettsii*)**

<b>Provider Requirements</b>	<ul style="list-style-type: none"> <li>• ROUTINE SAMPLES SHOULD BE SENT TO COMMERCIAL LABORATORIES.</li> <li>• Testing of routine samples will not be performed.</li> </ul>
<b>Acceptable Specimen Sources/Type(s) for Submission</b>	
<b>TDH Requisition Form Number</b>	
<b>Media Requirements</b>	
<b>Special Instructions</b>	
<b>Shipping Instructions</b>	
<b>Laboratory Section Performing Testing</b>	
<b>Lab Location(s) Performing Test</b>	

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