

OPTIONAL

TRICHOMONAS VAGINALIS CULTURE

FORM L18

ID LABEL
HERE ---->

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VISIT #:
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FORM COMPLETED BY:
 — — —

VERSION DATE: **08/15/94**

ANY MISSING OR INCOMPLETE TEST RESULTS MUST BE EXPLAINED ON THIS FORM.

A1. ARE TEST RESULTS AVAILABLE?

- Yes1 (A2)
 - No, Sample Inadequate2 (END)
 - No, Other Reason3
- _____ (END)

(SPECIFY)

A2. DATE SPECIMEN TAKEN: — M — / — D — / — Y —

A3. CULTURE RESULT:

- POSITIVE1
- NEGATIVE2
- CONTAMINATED3