

### Q. 1: - Who should get tested?

**Ans.** As per current guidelines, if you develop the acute onset of fever and symptoms of respiratory illness, such as cough or shortness of breath, you should visit your nearest health facility and the doctor will decide if you need to be tested for 2019-novel Coronavirus (SARS-CoV-2) depending upon your history of travel to affected countries or contact with any suspects.

### Q. 2: - What documents are to be presented for getting tested for 2019-novel Coronavirus (SARS-CoV-2)?

**Ans.** Form 44 (COVID -19) duly filled by physician along with signature with stamp and the referring doctor's prescription, also Govt. photo-id (Aadhaar card/ Voter Id/ Passport) to support the current address and contact number of the suspect patient to be provided at the time of sample collection. These are mandatory requirements defined by Govt. of India without which testing of 2019-novel Coronavirus (SARS-CoV-2) is not allowed. You may download form 44 from [www.lalpathlabs.com](http://www.lalpathlabs.com).

### Q. 3: - If I have symptoms and my doctor prescribes the test, in that case can I get my family also tested?

**Ans.** Family member's testing will be subject to availability of duly filled form 44 for specified member with physician signature with stamp along with referring doctor's prescription.

### Q. 4: - What are the ways to book 2019-novel Coronavirus (SARS-CoV-2) testing?

**Ans.** You can register yourself by visiting Dr Lal PathLabs website [www.lalpathlabs.com](http://www.lalpathlabs.com) or mobile app & book your home collection slot online or else you can call at our customer care no. 011-3988-5050. We will reconfirm the sample pickup after validating your Form44 and prescription.

### Q. 5: - What kind of sample to be given and what is the medium of collection?

**Ans.** As of now, RTPCR is the recommended method. The Nasopharyngeal and Oropharyngeal swab will be collected by taking due precaution.

### Q. 6: - Can I visit any of the nearest centres to book the test or give the samples?

**Ans.** No, you will be required to book the test online via DLPL website [www.lalpathlabs.com](http://www.lalpathlabs.com) or mobile app else you can call at our customer care no. 011-3988-5050. The sample will be collected from your home (Home collection service) by an expert collection agent only.

### Q. 7: - What's the sample transportation process?

**Ans.** The sample will be collected in a viral transport medium (VTM) to maintain the stability of the sample. This will further get transported in a cold chain.

### Q. 8: - What are the guidelines on test report sharing with the Govt.?

**Ans.** We will share all patient's report with defined Govt bodies as per the guidelines of Govt of India/ICMR.

### Q. 9: - By when can I get my report?

**Ans.** We will endeavor to upload the report on our website [www.lalpathlabs.com](http://www.lalpathlabs.com) and mobile app within 48 hours of sample reaching the lab, subject to govt rules and regulations.

### Q. 10: -How do I access my report?

**Ans.** You can access your report from our website [www.lalpathlabs.com](http://www.lalpathlabs.com) or mobile app.

### Q. 11: -How do I interpret my report?

**Ans.** You are advised to visit your referring doctor with the report for the final interpretation.

PATIENT PROFORMA FOR 2019-nCoV (SARS-CoV-2) TESTING (Form 44)

THIS FORM NEEDS TO BE SIGNED AND STAMPED BY A DOCTOR  
SHOULD BE ACCOMPANIED BY A PRESCRIPTION AND A VALID GOVT ID.

Name of the Patient			
Age		Gender	
Address			
Telephone number		Mail ID	
Doctor's Name		Mobile No:	
Hospital Name			
Clinical symptoms (Pl mention beside each symptom if date of onset is different)			
Date of symptoms onset:			
Fever:	Y/N	Chills:	Y/N    Duration:<    <7days    >7days
Cough:	Y/N	Productive:	Y/N    Sore Throat:    Y/ N
Breathlessness:	Y/N	Myalgia:	Y/N    Headache:    Y/ N
Nausea:	Y/N	Vomiting:	Y/N    Abdominal pain:    Y/ N
Diarrhea:	Y/N	Any other symptom: (pl. mention with date) onset:	

History of possible exposure to 2019-nCoV (SARS-CoV-2):	
International Travel: Y/ N	Country *(China/other):..... Place(Wuhan/other):.....
Duration of stay:	Date of departure:
Date of arrival to India:	
*In case of travel to multiple countries, even transiently (please mention details):	
H/o exposure to a confirmed/ suspected case of 2019-n CoV (SARS-CoV-2): Y/N	Date:
H/o exposure to any person with above symptoms who has further H/o of exposure to a confirmed case of 2019-nCoV(SARS-CoV-2): Y/N	Date:
Is the person, a health care worker: Y/N	
If HCW, H/o of treating an unusual cluster of cases with above mentioned symptoms: Y/N	Date:

Differential Diagnosis:

Treatment History (Please mention the details of any chronic medication also) :			
Indication	Name of the drug	Date of administration	Duration

Investigation details and findings:

Hematological:	Microbiological:
Radiological:	Any other:
Details of the sample:	
Type of sample (Pl tick, including more than one type): Nasopharyngeal swab/ Oropharyngeal swab	
Date of sample collection:	Valid Govt ID attached _____-(Specify: Aadhaar/VoterID/Driving License)
Doctor Signature:	Stamp: