# HEALTHCARE PROVIDER ALERT March 4, 2024



If you have any questions or concerns, please contact your local
Timiskaming Health Unit:

Monday to Friday 8:30 a.m. – 4:30 p.m.

#### **New Liskeard**

Tel: (705) 647-4305 Toll Free: (866) 747-4305 Fax: (705) 647-5779

#### **Kirkland Lake**

Tel: (705) 567-9355 Toll Free: (866) 967-9355 Fax: (705) 567-5476

# After-Hours or Weekend On-Call Number

(705) 647-3033

www.timiskaminghu.com

# **General Updates**

**To:** Physicians, Nurse Practitioners, Nurses, and Midwives Hospital Infection Control Departments and Emergency Departments

# **PHO Test Requisition Form**

Public Health Ontario (PHO) has revised the <u>General Test Requisition (GTR) Form</u> in an effort to enhance the user experience and streamline sample processing. Improvements were made based on stakeholder feedback following the updates in September 2023.

### What's new?

- Ordering Submitter/Health Care Provider (HCP) section has been reorganized to better
  capture contact information for the ordering health care practitioner, as well as contacts to
  be copied (i.e., laboratory, public health unit, other authorize healthcare provider).
- Updates to the instructions in the guide to better support completion of the form.

## How to complete the Submitter/Health Care Provider (HCP) Section:

- 1. The ordering healthcare provider must be authorized to order laboratory tests in Ontario as per the <u>Laboratory and Specimen Collection Licensing Act</u> O. Reg. 45 s. 18.
- 2. Fill all ordering healthcare provider information accurately for the test to be approved and results to be transmitted to the correct provider.
- 3. **HCP Full Name field**: laboratories and hospitals should provide the Laboratory Director as the submitter, or in medical clinics with rotating healthcare providers, include the name of the attending healthcare provider.
- 4. **Licence No. field**: fill with the OHIP billing number, CPSO number, or other regulated healthcare professions' college registration number.
- 5. **Copy To field**: in addition to the primary submitter, if a copy of the results needs to be shared with another provider, complete the additional fields. If submitting from hospitals, include the name of the ordering HCP.

## **Electronic Medical Record Systems**

Please keep the following technical considerations in mind when incorporating the GTR Form in Electronic Medical Record (EMR) Systems:

- Ensure the layout of the form in your EMR remains the same as the GTR.
- Scale text (font size) automatically to minimize information loss.
- Do not enable the Scroll Long Text feature.

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You can access the updated version at: <a href="www.publichealthontario.ca/requisitions">www.publichealthontario.ca/requisitions</a>. As a reminder, use of the older versions of the form predating September 11, 2023, may result in test delays or cancellations.

## **Diseases of Public Health Significance forms**

THU has updated its Diseases of Public Health Significance form. It is now in a <u>fillable pdf format</u> and can be found on our website.

Additionally, as per Public Health Ontario, "the Ontario Health Protection and Promotion Act establishes the legal obligation for a physician or registered nurse in the extended class who signs a medical certificate of death to report any death where the cause of death was a disease of public health significance. The death should be reported as soon as possible to the local health unit.".