



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
MISSOURI STATE PUBLIC HEALTH LABORATORY
ENVIRONMENTAL LEAD TEST REQUEST

101 North Chestnut Street, PO Box 570
Jefferson City, MO 65101
(573) 751-3334
<http://health.mo.gov/lab/index.php>

Environmental lead analysis is used to follow up confirmed elevated lead levels of children. Samples will only be analyzed if submitted by a State or Local Public Health official. Please fill out this form as completely as possible.

SAMPLE INFORMATION

DATE COLLECTED	LICENSED RISK ASSESSOR LAST NAME, FIRST NAME	ASSESSOR PHONE NUMBER	COLLECTION LOCATION NAME	
COLLECTION LOCATION ADDRESS		CITY	STATE	ZIP CODE

SUBMITTER INFORMATION (RESULT REPORTS ARE DELIVERED TO THIS ADDRESS)

SUBMITTING FACILITY (LPHA, BEE, BEHS, DNR, ETC)		SUBMITTER TELEPHONE NUMBER/EXT		
SUBMITTING FACILITY ADDRESS		CITY	STATE	ZIP CODE

PATIENT / PARENT/GUARDIAN INFORMATION

PATIENT ID	PATIENT LAST NAME	PATIENT FIRST NAME	PATIENT MI	PATIENT DATE OF BIRTH
PARENT/GUARDIAN NAME (LAST, FIRST)			PARENT/GUARDIAN TELEPHONE NUMBER/EXT	
ADDRESS		CITY	STATE	ZIP CODE

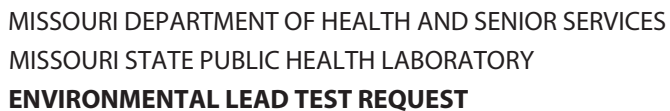
PROPERTY INFORMATION

LOCATION TYPE School Child Care Residence Other _____		OWNER LAST NAME	OWNER FIRST NAME	
OWNER TELEPHONE NUMBER/EXT	OWNER ADDRESS	CITY	STATE	ZIP CODE
LEAD RISK ASSESSMENT Samples are part of a EBL Lead Risk Assessment		OB/INV ID		

PLEASE PRINT CLEARLY AND PROVIDE ALL INFORMATION BELOW FOR EACH SAMPLE SUBMITTED

FOR LABORATORY USE ONLY

SAMPLE TYPE Soil Paint Dust Wipe	ACCESSION NUMBER
LOC DESC	
COMP TYPE	
SBSTR TYPE/COLOR	
PAINT CONDITION	SAMPLE ACCEPTABLE FOR ANALYSIS
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SAMPLE TYPE	Soil	Paint	Dust Wipe	ACCESSION NUMBER
LOC DESC				
COMP TYPE				
SBSTR TYPE/COLOR				
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