



Shasta County Public Health SARS-CoV-2 Sequencing Request Form

General Variant Sequencing Information

Shasta County Public Health is interested to receive specimens for WGS based on the CDPH recommended criteria referenced in the CDPH health alert. Shasta County Public Health Laboratory (SCPHL) does not perform sequencing for SARS-CoV-2 variants onsite but is able to facilitate submission of appropriate specimens to a sequencing lab. All samples for sequencing are sent to either the CA state lab (CDPH) or the CDC for testing.

Turnaround time for sequencing is generally 3-4 weeks. Expedited sequencing may be requested if indicated (e.g., outbreaks). WGS results are for surveillance and epidemiological use only.

Not all specimens are suitable for sequencing. To be suitable for sequencing, SARS-CoV-2 positive samples must have PCR Cycle Threshold (CT) values of 28 or less. Samples will be evaluated at the SCPHL for suitability before being sent to a sequencing lab and SCPHL will notify the submitting facility if the sample is not suitable for sequencing.

Specimen Collection and Handling Instructions

Providers may send specimens for initial diagnostic testing (SARS-CoV-2 PCR) to the SCPHL (preferred) and request WGS if positive, or forward specimens on existing positive tests for WGS. Acceptable samples include: Nasopharyngeal (NP) swab (preferred sample type), Oropharyngeal (OP) swab, Nasal mid-turbinate swab, or Anterior Nasal swab. Swabs must be placed in viral transport media or sterile saline immediately after collection. Samples should be refrigerated after collection and received at SCPHL within 72 hours after collection. If sample holding time will exceed 72 hours before being received at SCPHL, the sample must be frozen at -20° or lower and remain frozen throughout transportation to SCPHL.

Providers submitting initial samples for SARS-CoV-2 diagnostic testing will receive a laboratory report indicating positive or negative result. WGS is not a diagnostic test and not for purposes of clinical management; therefore, no result reports for variant infection will be returned to the submitting facility but may be informally shared.

To request whole genome sequencing on a patient with suspected SARS-CoV-2, please complete the request form below and deliver with sample.

Additionally, if ordering diagnostic testing on a specimen (SARS-CoV-2 PCR), please complete [SCPHL's specimen requisition](#) form, or order via the SCPHL [web portal](#). To register for the web portal, complete the application at the link below and return by email to HHSAPHLab@co.shasta.ca.us or by fax to 530-225-5061.

[uShasta County Public Health Laboratory Web Portal Application](#)



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Please deliver samples to the Shasta County Public Health Lab at:

2650 Breslauer Way
Redding, CA 96001

Hours of Operation: Monday – Friday 8am-5pm

Please contact the Shasta County Public Health Lab with any questions at (530) 225-5072.

Please provide as much of the information requested on this form as possible.



Shasta County Public Health SARS-CoV-2 Sequencing Request Form

Facility Information

Name: _____

Address: _____

Sequencing Point of Contact: _____

Phone Number: _____ Fax Number: _____

County: _____

Patient Information

Name (Last, First): _____ Date of Birth: _____

Address: _____

Phone Number: _____

Race: _____ Ethnicity: _____

Patient History

Has patient tested positive in previous test? Yes No If Yes, Date of Test: _____

What is the Patient's symptom status? _____

What is the Patient's vaccination status? _____

If Vaccinated - Date of Vaccination: Dose 1: _____ Dose2: _____

Does Patient have recent travel history? Yes, Foreign Yes, Domestic No Unknown

If Yes, Location of Travel: _____

Has Patient had recent contact with known traveler? Yes No Unknown

If Yes, Location of Travel: _____

Specimen Information

Date Collected: _____ Time Collected: _____

Sample Type (e.g., Nasopharyngeal, etc.): _____

Has this specimen already been tested for SARS-CoV-2 by PCR? Yes No

If yes, please list PCR targets and CT Values if known: _____

Lab Use Only: Specimen Received _____