



LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS

Office of Public Health

Section of Environmental Epidemiology and Toxicology (SEET)

1450 L & A Road, Metairie, LA 70001-6235

www.seet.dhh.louisiana.gov



Use this form to report **cases of lead*, arsenic, mercury, cadmium or carbon monoxide** to SEET. Mail form to the above address or fax to (504) 219-4582. For more information call (504) 219-4518 or (888) 293-7020.

* To obtain reporting forms for childhood lead poisoning, visit the LA Childhood Lead Poisoning Prevention Program's website at www.genetics.dhh.louisiana.gov or call (504) 219-4413.

PATIENT INFORMATION

_____ Last Name	_____ First Name	_____ M. Initial
_____ Street Address	_____ City	_____ State
_____ () Phone Number	_____ / / Birthdate (month / day / year)	_____ Zip
		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female

EXPOSURE INFORMATION: Where & what are the source of the heavy metal or carbon monoxide exposure. Provide as much detail as possible.

Current Occupation & Address _____

Hobby & Address _____

Environmental & Address _____

Unknown

REFERRAL / PHYSICIAN INFORMATION

_____ Person Providing Referral	_____ Referral Phone Number
_____ Referral E-mail	
_____ Treating Physician Name	_____ Clinic, Hospital or Agency Name
_____ Mailing Address	_____ City
	_____ State
	_____ Zip

SPECIMEN INFORMATION

_____ Date Collected (month / day / year)	_____ Lab name
_____ Specimen ID number	Specimen source: <input type="checkbox"/> Venous <input type="checkbox"/> Capillary <input type="checkbox"/> Urine
Analyte: <input type="checkbox"/> Arsenic <input type="checkbox"/> Mercury <input type="checkbox"/> Lead <input type="checkbox"/> Cadmium <input type="checkbox"/> Carboxyhemoglobin	Specimen result (with unit): _____