County of Los Angeles
Public Health

Acute Communicable Disease Control
313 N. Figueroa St., Rm. 212, Los Angeles, CA 90012
213-240-7941 (phone) 213-482-4856 (facsimile)
www.lapublichealth.org/acd

RELEASE OF CHRONIC TYPHOID CARRIER

Patient name-last	first	middle initial	Date of Birth	VCMR ID

Address- number, street	City	State	ZIP Code

INSTRUCTIONS

1) Submit completed form when the patient has 6 consecutive negative feces and urine specimens submitted at **1-month or greater** intervals beginning **at least 7 days** after completion of therapy.
2) Obtain the Area Medical Director's signature.
3) Fax to the Acute Communicable Disease Control Program (ACDC) at (213) 482-4856 and call ACDC at (213) 240-7941 to notify them that the form is being faxed.
4) Keep original in the patient's medical records.

CULTURE REPORTS

Specimen Number	Date Specimens Taken	Result of Urine Examination	Result of Stool Examination
1			
2			
3			
4			
5			
6			

Investigator's name (print)	Investigator's signature	Date	Telephone number ( )

Area Medical Director's signature	Date