

**If you are a member of the public who requires testing and are unable to visit an assessment centre, please contact us at 905-799-7700. This form is for congregate setting requests only.**

The Ministry of Health has been working with Public Health Units to consolidate all swab requests. This request is for use in the Region of Peel. We will contact you once the request has been reviewed. If supplies are not available, the Key Contact will be notified.

To submit this completed form and for any questions, please email [zzg-PHSwabRequests@peelregion.ca](mailto:zzg-PHSwabRequests@peelregion.ca)

### Contact Information

#### Settings

Shelter
  Group Home
  Assisted Living  
 Other

Facility Name

Address (Street)  City

Postal Code  Phone Number

Key Contact Name  Key Contact Phone number with ext.

Key Contact Email address

Alternate Contact Name (for evening/weekends)

Alternate Contact Phone number, including extension

Today's date

#### Resident/Staff Information

Are you requesting swabs for residents, staff or both?

Residents
  Staff
  Both

How many residents live in your facility?  How many staff work in your facility?

Are you requesting swabs for entire or partial facility?

Entire Facility
  Partial – specify floor/unit

#### COVID Outbreak Status

Do you have a confirmed positive case of COVID in your facility?

Yes
 • # of residents 
 • # of staff

No

Has Peel Public Health (PPH) already completed an exposure assessment for your facility by phone?

Yes
  No (NOTE: PPH will be in touch to assess exposure and need for swabs)

**Swab Order Information**

How many swabs are you requesting?

Do you require assistance with swabbing in your facility?

Yes

No

If no, are you able to pick up swabs at 7120 Hurontario, Mississauga, ON  Yes  No

**FOR PUBLIC HEALTH UNIT USE ONLY**

Approved number of swabs to release

Does facility need support for testing?  Yes  No

Main Contact email if not given above

Investigation #