###### Carbapenem Resistant Enterobacteriaceae (CRE) Molecular Performance Evaluation Program Enrollment Form

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| If your laboratory participated in a previous CDC educational exercise, please provide your WSLH PT ID number: |  |

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| --- | --- |
| Real Time Platform (Instrument w/ model number and software version): |  |
|  |  |
| Please list the CRE DNA target(s) for which your facility tests (e.g., KPC, NDM-1, etc.): |  |

|  |  |
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|  | Ship samples to: |
| Facility Name: |  |
| Contact Name: |  |
| Dept, Rm, Ste, etc: |  |
| Street Address: |  |
| PO Box: | N/A Samples cannot be shipped to a PO Box |
| City/State/Zip: |  |
| Country (if not US) |  |
| Email: |  |
| Phone: | ( ) |

|  |  |
| --- | --- |
|  | Send reports/evaluations to: |
| Facility Name: |  |
| Contact Name: |  |
| Dept, Rm, Ste, etc: |  |
| Street Address: |  |
| PO Box: |  |
| City/State/Zip: |  |
| Country (if not US) |  |
| Email: |  |
| Phone: | ( ) |