

LimsNet Guide for COVID-19 Test Orders



Indiana State
Department of Health

Objectives

- Demonstrate how to successfully log in to LimsNet and change and update personal information
- Successfully and correctly log specimens into LimsNet
- Successfully print cover page and ship specimens to ISDH laboratories
- Show how to troubleshoot cover page
- Successfully search for results in LimsNet
- Discuss appropriate transit times and specimen rejection criteria

Contact Information



LIMSAppSupport@isdh.in.gov

Help Desk Phone: (317) 921-5506

- **DO NOT** leave a voicemail message
- Please email or call again

LOGGING IN

TSP

Version 3.23.2020

Logging In to LimsNet

<https://eportal.isdh.in.gov/LimsNet/Login.aspx>

- Log in to LimsNet with your username and password acquired from the LimsNet Helpdesk.
- Below the login are announcements that may be important to your work; please read these **daily** for updates.

Your password
MUST be
reset every
2 MONTHS.

Indiana State
Department of Health

User Name:

Password:

Log In

IP Address=10.170.67.107

[Forgot Your Password?](#)

3/22/20 - COVID-19 update
Some samples are showing as "In Transit" even though they have been received. We are working on a fix.

3/22/20 - COVID-19 update
Please make sure to include your LimsNet cover sheet with every package that you send to ISDH Lab or to Lilly.

3/19/20 - COVID-19 update
Certain coronavirus samples should now be sent to Eli Lilly for testing. Pay attention to the destination address listed on the LimsNet cover sheet when shipping.

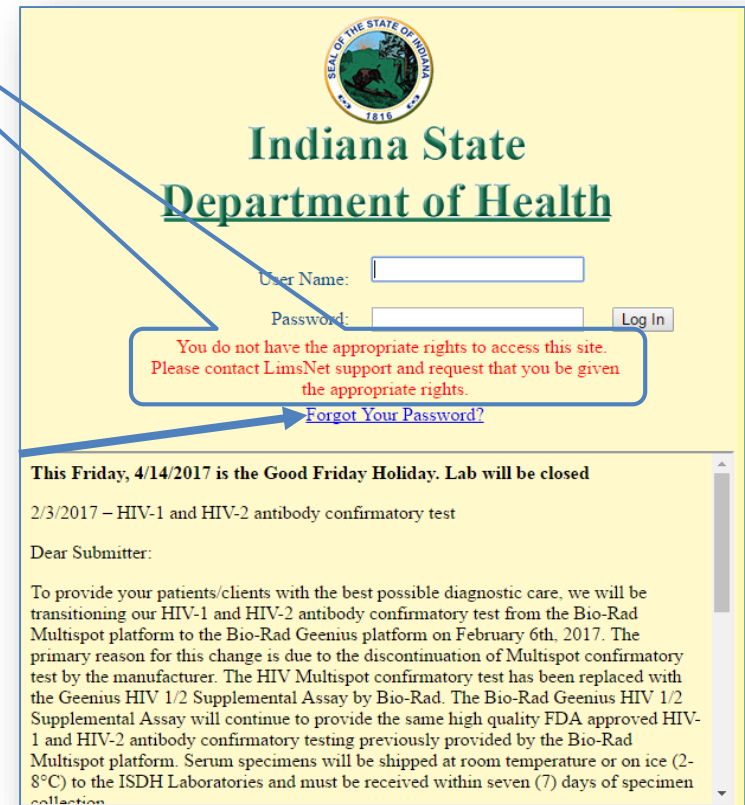
3/11/20 - Important COVID-19 update: All specimens submitted to ISDH Laboratory for SAR-COV-2 (COVID-19) testing require a PUI #. Please remember to enter the patient PUI # into LimsNet at this time.

Problems? [Email LimsNet Support](#) or call 317-921-5506.
[LimsNet Training\(PDF\)](#) [LimsNet Manual](#)

Problems Logging In

If you see the following error message:

- Your username and/or password may be incorrect
- OR
- Your password has expired
 - Click here for a password reset email to be sent to you
 - OR
 - Call the Help Desk at **317-921-5506**



The screenshot shows the login page for the Indiana State Department of Health. At the top is the state seal and the text "Indiana State Department of Health". Below this are input fields for "User Name:" and "Password:", followed by a "Log In" button. A red error message box is displayed, stating: "You do not have the appropriate rights to access this site. Please contact LimsNet support and request that you be given the appropriate rights." Below the error message is a blue link that says "Forgot Your Password?". A blue arrow from the text "If you see the following error message:" points to the error message box. Another blue arrow points from the "Forgot Your Password?" link to the text "Click here for a password reset email" in the list on the left.

SEAL OF THE STATE OF INDIANA
1816

**Indiana State
Department of Health**

User Name:

Password:

You do not have the appropriate rights to access this site.
Please contact LimsNet support and request that you be given
the appropriate rights.

[Forgot Your Password?](#)

This Friday, 4/14/2017 is the Good Friday Holiday. Lab will be closed

2/3/2017 – HIV-1 and HIV-2 antibody confirmatory test

Dear Submitter:

To provide your patients/clients with the best possible diagnostic care, we will be transitioning our HIV-1 and HIV-2 antibody confirmatory test from the Bio-Rad Multispot platform to the Bio-Rad Geenius platform on February 6th, 2017. The primary reason for this change is due to the discontinuation of Multispot confirmatory test by the manufacturer. The HIV Multispot confirmatory test has been replaced with the Geenius HIV 1/2 Supplemental Assay by Bio-Rad. The Bio-Rad Geenius HIV 1/2 Supplemental Assay will continue to provide the same high quality FDA approved HIV-1 and HIV-2 antibody confirmatory testing previously provided by the Bio-Rad Multispot platform. Serum specimens will be shipped at room temperature or on ice (2-8°C) to the ISDH Laboratories and must be received within seven (7) days of specimen collection.

CHANGING YOUR PERSONAL SETTINGS

Version 3.23.2020

Personalized Settings

319 unsubmitted tests.	JylMadlem	Site: ABC TESTING SITE
Log new test: <input type="text" value="Virology"/>	Submit Tests	Packages
AdminCreateUser	AdminUserSiteTree	Test Results
Groups	Audit	Personalized Settings
Log Off		

In **Personalized Settings**, you have 3 options:

1. Change My Password
2. Change My Personal Information
3. Change My Password Recovery Question

319 unsubmitted tests.	Jyl Madlem	Site: ABC TESTING SITE
Log new test: <input type="text" value="--- Select One ---"/>	Submit Tests	Packages
AdminCreateUser	AdminUserSiteTree	Test Results
Groups	Audit	Personalized Settings
Log Off		
Profile Settings		
1	2	3
Change My Password	Change My Personal Information	Change My Password Recovery Question

Changing Your Password

Profile Settings

[Change My Password](#)

[Change My Personal Information](#)

[Change My Password Recovery Question](#)

Passwords must contain all of the following:

- 1 Lowercase letter
- 1 Uppercase letter
- 1 Number
- 1 Character (non-letter or number)

Enter your current password **BEFORE**
you enter your new password.

And be a minimum of 8 characters long.

*All fields are required

Current Password:

New Password (15 characters max):

Verify Password:

Change My Password

Changing Your Personal Information

Profile Settings

[Change My Password](#) [Change My Personal Information](#) [Change My Password Recovery Question](#)

*All fields are required

First Name:

Last Name:

Email Address:

☒ [Subscribe To Email Notifications](#) ☐

Your name/
email may be
updated here

You may also **Subscribe to Email Notifications**, allowing you to receive an email when a test result is posted.

If any changes are made, you must click **Update My Information** here.

Changing Your Password Recovery Question

Profile Settings

[Change My Password](#) [Change My Personal Information](#) [Change My Password Recovery Question](#)

*All fields are required

Current Password:

Password Recovery Question:

Password Recovery Answer:

To change your recovery question/answer:

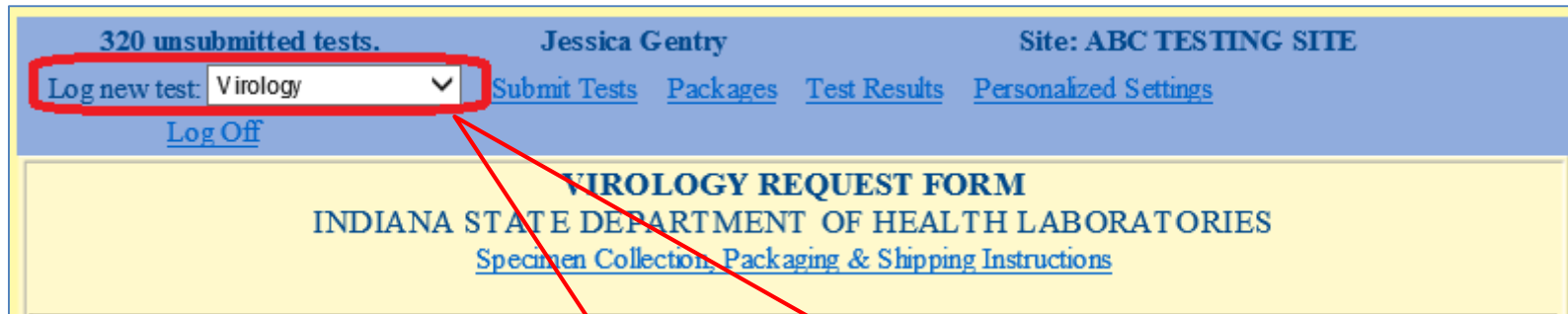
1. Enter your current password.
2. Choose your question from the list.
3. Provide your recovery answer.

When finished, click "**Update**".

ENTERING A SPECIMEN

EXAMPLE: COVID-19 Specimen

Using LimsNet



The screenshot shows the LimsNet interface. At the top, there is a blue header bar. On the left, it says '320 unsubmitted tests.' In the center, the user's name 'Jessica Gentry' is displayed. On the right, the site name 'Site: ABC TESTING SITE' is shown. Below the header, there is a navigation bar with several links: 'Log new test: Virology' (which is highlighted with a red box and a red arrow pointing to a callout), 'Submit Tests', 'Packages', 'Test Results', and 'Personalized Settings'. Below the navigation bar, there is a yellow section titled 'VIROLOGY REQUEST FORM' with the text 'INDIANA STATE DEPARTMENT OF HEALTH LABORATORIES' and a link to 'Specimen Collection, Packaging & Shipping Instructions'. A red arrow points from the 'Log new test: Virology' dropdown menu to a callout box.

Click the drop-down menu under **Log New Test**
– Choose the desired test (in this example we will be completing a Virology request form)

IMPORTANT: Verify that the patient's ID, first/last name and date of birth entered into LimsNet match **EXACTLY** what is on the specimen label. Labeling mismatches will result in specimen rejection.

Patient Demographic Information

Include a patient ID number.
This allows for future search
function.

Patient Information	
Patient's Clinic ID Number:	<input type="text"/> <input type="button" value="Lookup Info"/>
Opscan Number:	<input type="text"/>
*Patient's First Name:	<input type="text"/> Middle Init: <input type="text"/>
*Patient's Last Name:	<input type="text"/>
*Street Address:	<input type="text"/>
*City:	<input type="text"/> *State: <input type="text"/> *ZIP: <input type="text"/>
*County of Residence:	<input type="text" value="Select County"/>
*Date of Birth:	<input type="text"/> *Sex: <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Unknown
*Race: <input type="radio"/> Asian <input type="radio"/> Black or African-American <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White <input type="radio"/> Other <input type="radio"/> Unknown <input type="radio"/> Multiracial	*Hispanic Ethnicity: <input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino <input type="radio"/> Unknown

Enter all **required** data
noted by **red asterisks** “*”.

Institution Information

Institution Information	
Name of: <input type="radio"/> Employer <input type="radio"/> School <input type="radio"/> Care Facility <input type="radio"/> Institution	
Name:	<input type="text"/>
Occupation:	<input type="text"/>
Facility Phone Number:	<input type="text"/>
Institution Resident? <input type="radio"/> No <input type="radio"/> Yes	
Institution Type: <input type="radio"/> None <input type="radio"/> Prison <input type="radio"/> Nursing Home <input type="radio"/> Other	
If Other:	<input type="text"/>
Hospitalized? <input type="radio"/> No <input type="radio"/> Yes	Location: <input type="text"/> Date Hospitalized: <input type="text"/>
*Deceased? <input type="radio"/> No <input type="radio"/> Yes	Date Of Death: <input type="text"/>

Specimen Information

Enter the Specimen Type by clicking the Fluid or Swab radio button in the **Clinical Information** section.

Enter the Fluid Type (**Sputum**) OR Swab type (**NP**) in the **Anatomical Source** box.

The screenshot shows a form titled "Clinical Information". Under the heading "*Specimen Information:", there are radio buttons for "Fluid", "Isolate", "Stool", "Swab (including NP, OP, or NP/OP combo)", "Tissue", and "Other". The "Fluid" radio button is selected and highlighted with a red box. Below this, there is a text field labeled "If Other: (Do not submit serum)". Under the heading "*Anatomical Source:", the text "SPUTUM" is entered in the text field. Below this, there are two date fields: "Date Of Onset:" and "*Collection Date:". The "Collection Date" field has a calendar icon next to it.

OR

The screenshot shows the same "Clinical Information" form. Under the heading "*Specimen Information:", the "Swab (including NP, OP, or NP/OP combo)" radio button is selected and highlighted with a red box. Below this, there is a text field labeled "If Other: (Do not submit serum)". Under the heading "*Anatomical Source:", the text "NP" is entered in the text field. Below this, there are two date fields: "Date Of Onset:" and "*Collection Date:". The "Collection Date" field has a calendar icon next to it.

Virus Suspected

Enter the Virus Suspected by selecting the **COVID-19** radio button.

The screenshot shows a web form titled "Virus Suspected". It contains a section labeled "*Virus Suspected?" with several radio button options: Adenovirus, Enterovirus, Herpes Simplex, Influenza, Measles, MERS-CoV, Mumps, Parainfluenza, Respiratory Syncytial Virus, Varicella, Community-Acquired Pneumonia, **COVID-19** (highlighted with a red box), and Other. Below these options is a text input field for "If Other:". A note states: "Suitable viruses for 'Other' include other respiratory viral agents, such as rhinovirus. Norovirus should be submitted on the Enterics/Norovirus form". At the bottom, there is a field labeled "COVID-19 authorization code required:" with a text input field containing "XXXXX". Two red callout boxes are present: one pointing to the "COVID-19" radio button and another pointing to the "COVID-19 authorization code required:" field.

Virus Suspected

*Virus Suspected?

☐ Adenovirus ☐ Enterovirus ☐ Herpes Simplex ☐ Influenza ☐ Measles

☐ MERS-CoV ☐ Mumps ☐ Parainfluenza ☐ Respiratory Syncytial Virus

☐ Varicella ☐ Community-Acquired Pneumonia ☐ **COVID-19** ☐ Other

If Other:

Suitable viruses for "Other" include other respiratory viral agents, such as rhinovirus. Norovirus should be submitted on the Enterics/Norovirus form

COVID-19 authorization code required:

Enter the **COVID-19** authorization code provided by RedCap.
To request access to REDCap please email RedCapAdmin@isdh.IN.gov.

Specimen Information

Enter required information as indicated by red asterisks "*", along with any other relevant information; click Save.

Patient Information	
Patient's Clinic ID Number:	<input type="text"/> <input type="button" value="Lookup Info"/>
*Patient's First Name:	<input type="text"/> Middle Init: <input type="text"/>
*Patient's Last Name:	<input type="text"/>
*Street Address:	<input type="text"/>
*City:	<input type="text"/> *State: <input type="text"/> *ZIP: <input type="text"/>
County of Residence:	<input type="text" value="Select County"/> Phone Number: <input type="text"/>
*Date of Birth:	<input type="text"/> *Sex: <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other <input type="radio"/> Unknown
*Race: <input type="radio"/> Asian <input type="radio"/> Black or African-American <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White <input type="radio"/> Other <input type="radio"/> Unknown	*Hispanic Ethnicity: <input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino <input type="radio"/> Unknown

When submitted correctly, this message will display.

<input type="button" value="Save"/>
*** Successfully created test ***

NOTE: If you do not see this message, please review the form/enter missing required information; then click Save.

SUBMITTING A SPECIMEN

Printing Cover Page

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Submitting a Test: Submit Checked Samples

Click Submit Tests

You may **Edit**
or **Delete** a test
request form
here.

Log new test: --- Select One --- **Submit Tests** Packages Test Results Personalized Settings
Log Off

Unsubmitted Samples

☐ Select All

Send	Edit	Delete	Date Created	Collection Date	Patient ID	First Name	Last Name	Test Type	User Name	Provider Code
<input checked="" type="checkbox"/>	Edit	Delete	12/20/2018 8:21 AM	12/18/2018	123	testFName	testLName	HIV/Hep	hfu	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:57 AM	11/27/2018	0000000001	Influenza	12	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:57 AM	11/27/2018	0000000001	Influenza	11	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:56 AM	11/27/2018	0000000001	Influenza	10	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:56 AM	11/27/2018	0000000001	Influenza	9	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:55 AM	11/27/2018	0000000001	Influenza	8	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:55 AM	11/27/2018	0000000001	Influenza	7	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:53 AM	11/27/2018	0000000001	Influenza	6	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:52 AM	11/27/2018	0000000001	Influenza	5	Virology	bpope1	990
<input type="checkbox"/>	Edit	Delete	11/27/2018 10:48 AM	11/27/2018	0000000001	Influenza	4	Virology	bpope1	990

1 2 3 4 5 6 7

Records Per Page: 10 ▼

Carrier: Tracking Number:

Submit Checked Samples
[Package Instructions](#)

When you are ready to send a specimen(s) to the ISDH Laboratories, select the desired entries under the **Send** column and click **Submit Checked Samples**.

Printing Cover Page

- After clicking **Submit Checked Samples**, a pop-up containing the **cover page** will appear.
- It contains a **bar code** and patient information for each specimen marked as shipped.
- Please note mailing address.
- Ship specimens accordingly.

Barcode print page Page 1 of 1

LimsNet Virology Samples
Requested
By
EAST CHICAGO HEALTH
DEPARTMENT

Package ID: 293554 3/22/2020
EAST CHICAGO
HEALTH
DEPARTMENT
Submitter Org:
Submitter ID: 309
Submitter Name: Jyl Madlem Phone: 219-391-8268

C20017420 [Barcode]	
First Name	Patient
Last Name	Test
Pat ID	0
Date of Birth	1/1/1950
Virus Suspected	COVID-19
Collection Date	03/22/2020

Mailing Address:
Indiana State Department of Health Laboratories
550 W 16th Street, Suite B
Indianapolis, IN 46202

PLEASE CHECK TO BE SURE ALL THE SAMPLES ON THE PRE-LOGGED LIST ARE IN THIS SHIPMENT - Thank you.

<https://portal.isdh.in.gov/LIMSNET/PackageCoverPageVirology.aspx> 3/22/2020

PRINT this page and include it with your specimen submission.

NOTE: No other paperwork is necessary with a specimen submission.

Troubleshooting Cover Page

If your cover page pop-up doesn't appear, the pop-up blocker on your computer may be turned on. You can either turn it off or follow these instructions:

1. Click **Packages**.
2. Click **Cover Page** for the appropriate specimen or ship date.
3. Check the pop-up blocker on your computer, and allow pop-ups for this site.

0 unsubmitted tests. Jyl Madlem Site: EAST CHICAGO HEALTH DEPARTMENT

Log new test: --- Select One --- [Submit Tests](#) [Packages](#) [Test Results](#) [Personalized Settings](#)

[Log Off](#)

Package Status

	PackageID	Assay	ShipDate	Carrier	TrackingNumber	# Samples	
Select	293554	Virology	3/22/2020			1	Cover Page
Select	289723	Blood Lead	1/30/2020			1	Cover Page
Select	289719	Blood Lead	1/30/2020			4	Cover Page

Viewing reports requires a PDF reader. You can download [Adobe's Acrobat PDF reader](#) free.

Ordering Other Tests

- Follow the same steps to order other tests.
- Simply select your desired test(s).



TEST RESULT SEARCH

Test Result Search

Click **Test Results**.

308 unsubmitted tests. User: jmadlem Site: ABC TESTING SITE
Log new test: --- Select One --- Submit Tests Packages **Test Results** Personalized Settings
Log Off

Search Test Results

Collection Date: From 12/12/2018 To 1/11/2019

1. Patient Name: First Mickey Last Mouse

Patient ID: ID
Opscan ID
Testtype Name: --- All test types ---
Site Name: ABC TESTING SITE (990)

Status
☐ Unshipped
☐ In Transit
☐ Pending
2. ☒ Released
☐ All statuses

3. Search

Enter a collection date range and search using the first and last name of the patient.

Click the **Released** radio button for a completed results search only.

Click the **Search** button.

Test Result Search

0 unsubmitted tests. Jyl Madlem Site: EAST CHICAGO HEALTH DEPARTMENT

Log new test: --- Select One --- Submit Tests Packages Test Results Personalized Settings Log Off

Search Test Results

New Search

☒ Open Reports in a new window
☐ Open Reports in this window

Select	Report	Status	Date Created	Collection Date	Patient ID	First Name	Last Name	Test Type	User Name	Provider Name
<input type="checkbox"/>	View	Released	2/2/2017 10:11 AM	1/19/2017				Blood Lead	manaya	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/31/2017 5:07 PM	1/31/2017	01312017-11			CT/GC V10	lhunter	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/31/2017 2:11 PM	1/31/2017	01312017-10			CT/GC V10	lhunter	EAST CHICAGO HEALTH DEPARTMENT
<input checked="" type="checkbox"/>	View	Released	1/30/2017 4:30 PM	1/30/2017				Blood Lead	cherrera	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/30/2017 3:00 PM	1/30/2017	01302017-09			CT/GC V10	cherrera	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/30/2017 11:03 AM	1/30/2017				Blood Lead	jrvera	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/25/2017 3:40 PM	1/23/2017				Blood Lead	manaya	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/25/2017 3:35 PM	1/23/2017				Blood Lead	manaya	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/25/2017 3:31 PM	1/23/2017				Blood Lead	manaya	EAST CHICAGO HEALTH DEPARTMENT
<input type="checkbox"/>	View	Released	1/25/2017 3:24 PM	1/23/2017				Blood Lead	manaya	EAST CHICAGO HEALTH DEPARTMENT

1 2 3 4 5 6 7 8 9 10 ...

Records Per Page: 10


[View Selected Reports](#)

Select the report from the list and click **View** to print.

Be sure the status is Released. A pop-up window will appear with your report. You can print from that screen by hovering your mouse at the bottom or by right-clicking.

Report Pop-up

PDFOutput.aspx - Google Chrome
State of Indiana [US] | https://eportal.isdh.in.gov/LIMSNET/PDFOutput.aspx

 INDIANA STATE DEPARTMENT OF HEALTH LABORATORIES
550 West 16th Street, Suite B, Indianapolis, IN 46202
Judith C. Lovchik, Ph.D, D(ABMM)
Laboratory Director

Laboratory Report
Final Report

Submitter: EAST CHICAGO HEALTH DEPARTMENT
100 WEST CHICAGO AVENUE SUITE 100 A
---FAX TO 219-391-8299---
EAST CHICAGO, IN 46312-

Patient Name:	XXXXX	ISDH Lab Number:	C16000476
Patient ID:	XXXX	Date Collected:	01/06/2016
Birth Date:	XX/XX/XXXX	Date Received:	01/11/2016
Source of Specimen:	XXXXX		

<u>Nucleic Acid Amplification</u>	<u>Results</u>	<u>Interpretation:</u>
<u>Probe DNA Assay</u>		
CT	Negative	Chlamydia trachomatis rRNA NOT detected. A negative result does not preclude infection since a result is dependent upon adequate specimen collection and sufficient, detectable RNA.
GC	Negative	Neisseria gonorrhoeae rRNA NOT detected. A negative result does not preclude infection since a result is dependent upon adequate specimen collection and sufficient, detectable RNA.

Comments:

Right-click to print.

SPECIMEN INTEGRITY

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Version 3.23.2020

Common Causes of Specimen Rejection

- Mismatch of patient name/ID:
 - Name on specimen tube and submission form (LimsNet) **must match exactly**.
- Lack of 2 patient identifiers on specimen tube:
 - Specimen tube is completely blank (**MUST** be labeled with patient **full name and date of birth**).
- Wrong specimen type collected.
- No specimen sent with submission form.
- Specimen tube is leaking or broken.

Keys to Successful Submissions

Verify that the patient ID, first/last name and date of birth entered into LimsNet match the specimen label **EXACTLY**.

If you have any questions regarding specimen labeling:

Brian Pope

Virology Laboratory Supervisor

317-921-5843

Labeling mismatches will result in specimen rejection.

Contact Information

Virology Supervisor: Brian Pope

bpope1@isdh.in.gov

317-921-5843

Outreach and Training Team: Jyl Madlem

isdh-lab-info@isdh.in.gov

317-495-4177