

University of Delaware
Poliovirus Survey 2002

Name (print) _____

Department _____

Phone number _____

No, I DO NOT have any materials which meet the definition Wild poliovirus infectious materials or Potential Wild Poliovirus Infectious Materials. (please sign and return form)

Signed _____ Date _____

Yes, I possess materials which meet one of the above definitions for poliovirus materials. (please check applicable materials and complete the questions for materials you possess)

Material Description	Yes	No	Location of Samples (bldg, room number)	Approximate # of samples	Approx. date and location samples were collected
Poliovirus isolates, reference strains, or infected cell cultures					
Clinical materials from polio cases					
Untyped enterovirus- like or undifferentiated poliovirus isolates					
Throat samples from geographic area where polio was endemic					
Fecal samples from geographic area where polio was endemic					
Environmental (water/sewage) samples from geographic area where polio was endemic					

Signed _____ Date _____