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சுவசிரிபாய

SUWASIRIPAYA  
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சுகாதார அமைச்சு  
Ministry of Health

මගේ අංකය ) DDG/LS/CV-QAPVT/2020- 2  
எனது இல )  
My No. )

ඔබේ අංකය )  
உமது இல )  
Your No. : )

දිනය ) 05 -01-2021  
திகதி )  
Date )

General Circular Letter No: - 02-01/2021

All Heads of Private Hospitals and Private Sector Laboratories

**Recruitment and Monitoring of COVID-19 testing at Private Hospitals and Private Sector Laboratories**

Ministry of Health has decided to assess the private hospitals and private sector laboratories and allow them to perform COVID-19 PCR testing, considering the current pandemic situation in the country. Applications are invited from the private hospitals and private sector laboratories to enroll them for assessment procedure related to COVID-19 diagnosis.


The application form can be downloaded from the website of the Ministry of Health and it should be submitted in triplicate, in a sealed envelope indicating “Request of COVID-19 testing at Private Hospitals and Private Sector Laboratories “ on the top left hand corner addressed to Director General of Health Services, Ministry of Health and should be sent by registered post.

Process of assessment will be as follows;

1. Laboratories will be assessed by an expert team from the Ministry of Health and the technical recommendations will be submitted to Deputy Director General Laboratory services.
2. The Deputy Director General Laboratory services will forward the same to Director General of Health Services to get the administrative clearance
3. All the qualified laboratories shall sign the Memorandum of Understanding with the Secretary to the Ministry of Health and following that final approval shall be granted.
4. All the approved laboratories should carry out the COVID-19 testing adhering to circulars and protocols issued by the Ministry of Health.
5. The daily performance and capacity of testing should be updated via online to Ministry of Health. The link will be provided to the approved laboratories.

6. The positive cases need to be informed immediately to the Epidemiology unit, Ministry of Health. (Dr. Samitha Ginige , Contact Number: 0777-664036 , email: chepid@sltnet.lk)
7. Quality Assurance should be adhered according to the External Quality Assurance Programme of Medical Research Institute, Ministry of Health.

I thank you for your cooperation in this regard.

  
Dr Asela Gunawardena  
Director General of Health Services

**Dr. ASELA GUNAWARDENA**  
Director General of Health Services  
Ministry of Health  
"Suwasiripaya"  
385 Rev. Baddegama Wimalawansa Thero Mv.,  
Colombo 10.

Cc :

1. Secretary, Ministry of Health
2. Additional Secretary MS & PHS
3. Deputy Director General - ( Laboratory Services )
4. Deputy Director General MS I / II & PHS I / II
5. Chief Epidemiologist, Epidemiology Unit
6. Chief Legal Officer
7. Director, Private Health Sector Development

# COVID 19 RT PCR Testing Laboratory Establishment Application for Private Sector

## 1. Laboratory Identification \*

1.1 Name of the Laboratory	: .....
1.2 Name of the affiliated Institute ( If any )	: .....
1.3 Address	: .....
	: .....
	: .....
1.4 MOH area	: .....
1.5 District	: .....
1.6 Province	: .....
1.7 Registration number at Ministry of Health ( If already registered )	:.....
1.8 Telephone	: .....
1.9 Fax	: .....
1.10 E-mail	: .....
1.11 Name of the Head of Institution	: .....
1.12 Name of the Laboratory Director	: .....
1.13 Qualification of the Laboratory Director:	.....
	: .....
1.14 Contact details of the Laboratory Director :	.....
	.....
1.15 Responsible officer for the entire COVID PCR process and his/her qualification	} : .....
	: .....
1.16 Responsible officer for COVID PCR sample collection and transport and his/her qualification	} : .....
	: .....
1.17 Responsible officer for entire laboratory operations and his/her qualification	} : .....
	: .....
1.18 Responsible officer for Quality and his/her qualification	} : .....
	: .....
1.19 Responsible officer for Bio-Safety and Bio-Security and his/her qualification	} : .....
	: .....

## 2. Laboratory Testing Capacity

2.1 Laboratory capacity for COVID PCR testing  
( Number of samples tested per day ) : .....

2.2 Average number of samples performed for the previous week ( If applicable ) : .....

## 3. Target Populations for COVID PCR Testing in the Laboratory \*

(A) In-ward patients in private health care settings : ( Yes / No ) .....

(B) Screening of patients presenting with Influenza  
like illness at OPD of private health care settings : ( Yes / No ) .....

(C) Surveillance for COVID at factories under BOI : ( Yes / No ) .....

(D) Overseas travelers before departure for COVID report : ( Yes / No ) .....

(E) Screening of on arrival passengers at portal of entries  
for COVID-19 : ( Yes / No ) .....

(F) Case detection among contacts of diagnosed patients : ( Yes / No ) .....

(G) Apart from the above categories, are there any  
other population groups tested ? ( If applicable ) : ( Yes / No ) .....  
-If yes, please specify the population demographic : .....

.....

.....

## 4. Service Hours

4.1 What are the days and hours of operation of routine laboratory service ? : .....

.....

.....

4.2 If relevant, what are the days and hours of operation of out of hours service of the  
laboratory? : .....

.....

.....

.....

## 5. Human Resources \*

5.1 Is there a Consultant Virologist/Microbiologist for result authorization ? : ( Yes / No ) .....

- If yes, specify name, qualifications and years of experience ? :

.....  
 .....

5.2 Is the Consultant Virologist/Microbiologist available full time or part time ? : .....

5.3 Is there a qualified Medical Laboratory Technologist to supervise bench work procedures ? } : ( Yes / No ). .....

- If yes, specify name, qualifications and years of experience ? : .....

.....  
 .....

5.3 Is he/she available full time or part time ? : .....

5.4 Number of bench work staff available : .....

5.5 What are the qualifications of the benchwork staff available ? : .....

.....  
 .....

5.6 Are the personnel trained in pathogen related molecular biology work, its flow, cross contamination risk and biosafety aspects of benchwork ? : ( Yes / No ) .....

5.7 Does the staff work on a shift basis ? : ( Yes / No ) .....

- If yes, specify the shift hours with number of staff : .....

Shift Hours	Number of Staff

5.8 Is the basic molecular biology laboratory layout established ? : ( Yes / No ) .....

- If yes please specify details : .....

.....  
 .....

Laboratory Space	Floor Area ( SqFt )	Available Equipment
1. Sample reception area		
2. Extraction room		
3. Master mix room		
4. Mixing room		
5. Amplification room		
6. Decontamination area		

## 6. Reporting of Results \*

6.1 Average turnaround time for COVID PCR results : .....

6.2 Designation of the person/s authorizing the release of the report : .....

6.3 Duration of storage of primary sample :

a. For Positive samples : .....

b. For Negative samples : .....

## 7. Waste decontamination procedure ( Please specify )\*

.....  
 .....  
 .....

\* Mandatory / Required Fields

I undersigned certify that all the information given in the application are true and accurate.

If the application is accepted for review we undertake to provide fullest cooperation during the assessment of the laboratory process for COVID -19 and abide by all the conditions / directions given by the Ministry of Health.

I understand if the information provided is found to be inaccurate, Ministry of Health has the sole discretion to reject my application.

.....  
 Director of the Laboratory

.....  
 Head of Institution

Date of application : .....