

S03r0 Phlebotomy And Genomics Form

Ad Hoc Event ID _____

Visit Date: _____

Correction? Yes
 No

All specimens must be received by 2 p.m. (U.S. East Coast time) on Friday

1. Airbill Number: _____

2. Ship date: _____

3. Carrier: _____

4. Date of blood draw: _____

5. Time of blood draw: _____

6. Phlebotomy - check the tubes collected and note the volume of each collection.

Explanation codes: A) Inadequate volume; B) Possible contamination; C) Inability to obtain blood after a reasonable number of attempts; or D) Other (specify)

6A-1 6 ml. yellow top (x.x) _____

6A-2. Not done? Not done

6A-3. Explanation: _____

6B-1 6 ml. yellow top (x.x) _____

6B-1. Not done? Not done

6B-3. Explanation: _____

6C-1. 5 ml. purple top (x.x) _____

6C-1. Not done? Not done

6C-3. Explanation: _____

6D-1. 5 ml. purple top (x.x) _____

6C-1. Not done? Not done

6D-3. Explanation: _____

Fax a copy of this form to (410) 323-4729. Keep a copy of this form for your records. Include the original form in the shipment of samples. Follow procedures outlined in the Biological Repository Manual of Operations for shipping samples to: The GRCF Cell Center, Johns Hopkins University School of Medicine, Blalock 1017B, 600 North Wolfe Street, Baltimore, MD 21287, Phone: (410) 955-3320, Attention: Ms. Tanya Ray

Staff I.D. #:
