FLOURISH (BHP142)
Caregiver Samples Delivery Checklist
Document No: BHHRL/ 001FR078

Version 1

Botswana-Harvard HIV Reference Laboratory (BHHRL)
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Site Code: _____ Date :_____ Page_____ of _____

Instructions: Clinic: indicate with "X" both specimen and form sent in shaded boxes. Complete clinic portions above and below; Lab – indicate "X" specimen and form received white boxes and lab portions below. Provide clinic a copy																		STOOL SAMPLE		DNA PCR		RECTAL SWAB		PLASMA CYTOKINES		FBC		Insulin		FASTING GLUCOSE		SERUM STORAGE		PLASMA STORAGE		LEAD		CHEMISTRY	
B	1	4	2	-	0	4	0	9	9									f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
B	1	4	2	-	0	4	0	9	9									f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
B	1	4	2	-	0	4	0	9	9									f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
B	1	4	2	-	0	4	0	9	9									f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
B	1	4	2	-	0	4	0	9	9									f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s	f	s

Comments: _____

Site Clinic: _____ **Initials of site personnel completing this form:** _____
Initials of site personnel delivering specimens to the laboratory: _____ **Time of departure:** _____
Laboratory:
Time Specimens Received: _____ **Initials of laboratory staff receiving samples:** _____
Comments: _____ **Date:** _____

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B	1	5	7	-														f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s
B	1	5	7	-														f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s
B	1	5	7	-														f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s
B	1	5	7	-														f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s
B	1	5	7	-														f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s
B	1	5	7	-														f	s	f	s	f	s	f	s	f	s
																		f	s	f	s	f	s	f	s	f	s

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Comments: _____ **Date:** _____