

Version:3.1 Revised: 01/31/2024

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Instructions: Part 1 of this form is to be completed by the field center staff to document the Biweekly shipping of the biospecimen collection to the ACRL. Scan the participant ID to auto-fill the ID number into your Data Entry System. Double-check participant ID # documented on this form with ID # of each sample during the packing of specimens (blood and urine samples inclusive). Part 2 is to be completed by the ACRL and UMN staff upon receipt of the shipment.

Part 1: Shipping (to be completed at the field center)

From:			To: Ron Hooge Atherosclerosi	veen s Laboratory (ACRL)			
Forsyth Count	ty Minneapolis		Baylor College 1 Baylor Plz				
Jackson City	Washington County [Anderson Bldg Houston, TX 77				
Staff Initials (shipping): +Number of Pages	L (MŇ	oped Date: //DD/YYYY) Time Packed:	/ :	/ (HH:MM in 24 hr. clock)			
Visit: 11	Field	Center Comments:					
	Example of	f Complete Sample Collecti	ion for Participant				
<u> </u>	Tube #	# of Vials		Cap Color			
#	#1 (Serum)	2 (SR) (0.5 mL)		Red			
#	#2-3(Untreated Plasma)	10 (UT) (0.5 mL)		Lavender			
#	#2, 3, 4 (Buffy Coat)	3 (BC) (0.5 mL)		Brown			
#	#4 (Treated Plasma)	4 (T) (0.5 mL)		Green			
l	Urine	2 (UR) (1.5 mL)		Yellow			
F	PAXgene Tube	1 whole tube (unspun, 2.5	mL)	Red			
Part 2: Receiving (to be completed at the ACRL lab)							
Staff Initials (receiving):		e Received: M/DD/YYYY)					
Date Buffy Coat samples picked up by Genetics Lab: (MM/DD/YYYY)							
Scan the participant ID label for each collection of specimens and record the number of vials enclosed and condition code for each category (examples below) before shipping and upon arrival . (If more than one code for a specimen, choose "Other" and specify in a note log).							

Sample Condition Codes					
00 Good Condition	06 Hemolyzed				
01 Thawed	07 Lipemic				
02 Warm	08 Short Sample				
03 Broken Bag/Vial	09 No Sample				
04 Missing Label	10 Other on arrival				
05 Other on shipping					

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Participant ID:		Affix bar-c	ode label				
		Shippir	ng		Receiv	ing	
Type (Cap Color)	# Vials/ Tube Shipped	Condition Code (Shipping)	Field Center Comments	# Vials/ Tubes Received	Condition Code (Receiving)	Lab Comments (Receiving)	
Plasma (Lavender)							
Buffy (Brown)							
Plasma (Green)							
Serum (Red/Gray)							
Urine (Yellow)							
PAXgene Tube							
Participant ID:		Affix bar-code label here					
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Buffy (Brown)		1					
Plasma (Green)							
Serum (Red/Gray)							
Urine (Yellow)							
PAXgene Tube							
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Plasma (Green)							
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Urine (Yellow)							
PAXgene Tube							
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Plasma (Green)		1					
Serum (Red/Gray)							
Urine (Yellow)							
DAVaono Tubo							
PAXgene Tube					1		