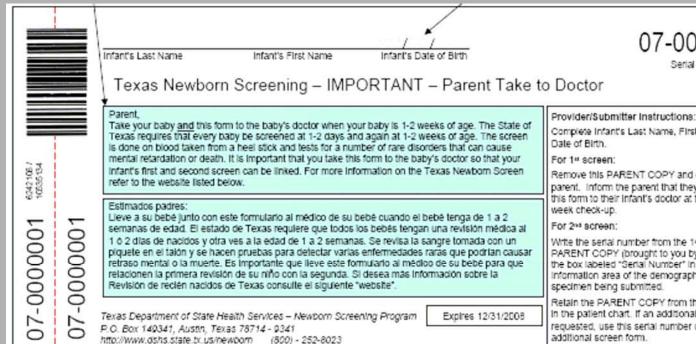
Specimen Collection Form



NBS Collection Form Parent Copy



07-0000001

Serial Number

Complete Infant's Last Name, First Name and

Remove this PARENT COPY and give to the parent. Inform the parent that they MUST take this form to their infant's doctor at the baby's 1-2 week check-up.

Write the serial number from the 14 screen PARENT COPY (brought to you by the parent) in the box labeled "Serial Number" in the Newborn Information area of the demographic form for the specimen being submitted.

Retain the PARENT COPY from the 2rd screen in the patient chart. If an additional screen is requested, use this serial number on the additional screen form.

Newborn Screening

- . This form is for the collection of a newborn screening specimen.
- · Collect the specimen and complete the form according to the instructions on the back of this form.
- . Do not touch the blood collection area of the form.
- DO NOT remove fold over flap. Cover DRIED blood spots with the flap before malling.



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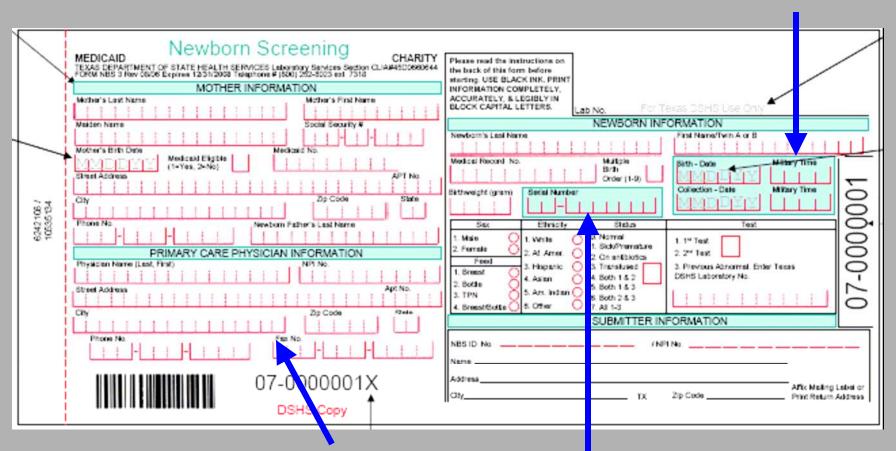
PARENT COPY

Allows for 'linking' of multiple specimens New form available in December New form NOT required for new tests.



NBS Collection Form Demographics Form

Time of Birth
Time of Collection



PCP information: 1st Screen Serial No. For Follow-up on abnormals.



NBS Collection Form Filter Paper for Blood Collection





NBS Collection Form Collection Instructions

Newborn Screening

- e This form is for the collection of a newborn screening specimen.
- Collect the specimen and according to the instructions on the back of
- Do not touch the blood. collection area of the form. • DO NOT remove fold over flap. Cover DRIED blood spots with the top before























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