

SPIRIT 2 – BIOBANK SHIPPING FORM 8 X 6ML TUBES TO GLASGOW

Site Details

Principal Investigator	
Hospital Name	
Hospital Address	
SPIRIT 2 Site Number	
Telephone Number	
Fax Number	
Email address	

Sample Details

SPIRIT 2 Patient Number	Patient Initials	Biohazard <i>(include details of any known biohazard)</i>	Date of Birth dd/mm/yyyy	Sample Date dd/mmm/yy
eg. 0015	JB	Hepatitis C positive	01 Jan 1970	01 Aug 09

Checklist

Shipping day: samples should be sent in the packing provided via first class post on a **Monday, Tuesday or Wednesday only**. If you need to collect samples on a Thursday please contact us (0191 282 0904) and we can send you *special delivery (next day)* boxes.

Sample requirements: Please fill 8 tubes and send them in the enclosed SafeBox

Sample tubes labeled with:

- SPIRIT 2 patient trial number (Patient number from SPIRIT 2 website)
- Patient initials
- Date of birth
- Date **and time** the sample was taken

Samples addressed to:

SPIRIT 2 BioBank Sample
 Paul O’Gorman Leukaemia Research Centre
 Gartnavel General Hospital
 1053 Great Western Road
 Glasgow
 G12 OYN
 Phone 0141 301 7880