

**Laboratory Specimens - Transported via CHS Courier to
Meadville Medical Center Laboratory**



Reference Specimen Packing List

Nursing staff is to complete this form. For patient name it is acceptable to use the initial of first name and the first 3 letters of last name. (E.g., M Smi will be acceptable for Mary Smith.) Circle if stat or lock box is used. For each patient, please record the quantity of specimens for each temperature indicated. At the bottom of this form, record total number of patient specimen bags sent per temperature.

Present this packing list to the courier when he/she collects the specimens.

Office Name			Courier Name <i>(Completed by courier)</i>		
Date	STAT	Lock Box		Time	AM route PM route
Patient Name	Spec # Room Temp	Spec # Refrigerated	Spec # Frozen	Quality Comments (Lab use)	
Total Specimen Bags Sent					
Lab Staff Initials:	Total Specimens Received			Date and Time <i>(Order entry completed)</i>	

Comments: