

Client Summary Label	Test Summary Label	Demographic Label
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Private Pay - Patient Somasave Products & Services

Patient Name Address Tel	Date of Birth Day Month Year	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male
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Ordering Physician Name and MSC Number	Copy Report to 90015SOM	Phone or Fax:	Specimen Collected by: Date & Time:
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Fasting <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - hours	Diagnosis/Comments:
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Designated Collection Site(s): LifeLabs Dunbar PSC - #112 - 3540 West 41st Ave - Vancouver - 604-264-9815

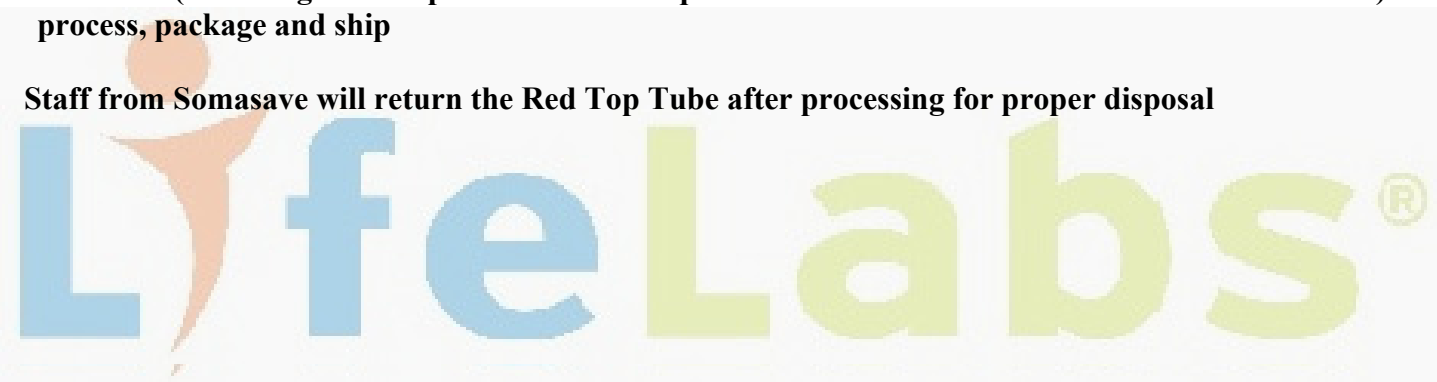
Service Required

Patient

– please record you medical doctor name in the indicated space above –
– without ordering doctor a collection cannot be done –

Test Mnemonic: KITPP

- Patients will come to the Dunbar lab Tuesdays between 09h00 to 10h30
- Patient will have collection kit with one Red Top Tube, glass pipet, transfer vial and shipping container
- Collect Red Top Tube
 - allow to clot @ Room Temperature
 - keep upright
 - do NOT spin or separate serum
- Staff from Somasave Products and Services, Ltd. (“Somasave”) will pick up sample and other materials (including the completed Oncolab requisition and Somasave's Patient Declaration forms) to process, package and ship
- Staff from Somasave will return the Red Top Tube after processing for proper disposal



Physician Signature	Date:
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