

MTN-012/IPM 010 LDMS Specimen Tracking Sheet (non-DataFax)

For login of MTN-012/IPM 010 stored specimens into LDMS

Participant ID <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <small>Site Number Participant Number Chk</small>			Visit Code <input type="text"/> <input type="text"/> . <input type="text"/>		Specimen Collection Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <small>dd MMM yy</small>		
# of TUBES or SPECIMENS	PRIMARY SPECIMEN	PRIMARY ADDITIVE	ALIQOT DERIVATIVE	ALIQOT SUB ADDITIVE/ DERIVATIVE	NOTES FOR LAB		
<input type="checkbox"/>	Blood (BLD) <i>Plasma</i> Collection Time: ____:____ <i>hour : min</i>	EDTA (purple top)	PL1/2	N/A	Prepare as many 1mL to 2 mL aliquots as possible with a total volume of aliquots greater than or equal to 5mL. If at room temp, freeze within 2 hours. If refrigerated or on ice after collection, freeze within 24 hours of collection.		
<input type="checkbox"/>	Blood (BLD) <i>Dapivirine level</i> Collection Time: ____:____ <i>hour : min</i>	EDTA (purple top)	PL1/2	N/A	Transport to lab and process within 2 hours. Prepare 2 tubes and label one as "primary sample" and the other as "back-up sample". Freeze immediately after centrifugation.		

Comments: _____

Initials: _____ LDMS Data Entry Date: / / _____
Sending Staff Receiving Staff dd MMM yy LDMS Staff

MTN-012/IPM 010 LDMS Specimen Tracking Sheet (non-DataFax)

For login of MTN-012/IPM 010 stored specimens into LDMS

Purpose: This non-DataFax form is used to document collection and entry of MTN-012/IPM 010 blood specimens into the Laboratory Data Management System (LDMS).

General Information/Instructions: A copy of this form accompanies enrollment plasma and PK blood specimens (in their original specimen collection containers) to the LDMS entry laboratory. Once the specimens have been entered into LDMS, this form is kept on file at the LDMS entry laboratory. If the site chooses, a copy of this completed form may be made once the specimens have been entered into LDMS and the copy kept in the participant's study notebook. This is not required, however. Because this form is a non-DataFax form, this form should NOT be faxed to SCHARP DataFax.

Item-specific Instructions:

- **Visit Code:** Record the visit code of the visit at which the LDMS specimens were collected.
- **NUMBER OF TUBES COLLECTED:** In the box to the left of each additive type, record the total number of tubes collected. If no LDMS specimens of the primary specimen type were collected, record "0."
- **Initials – Sending Staff:** The clinic staff person who completed the form and/or who is sending the LDMS form and specimens to the LDMS entry lab, records his/her initials here.
- **Initials - Receiving Staff:** The laboratory staff person who received this form (and the LDMS specimens accompanying the form), records his/her initials here.
- **LDMS Data Entry Date:** Record the date the LDMS specimens listed on this form were entered into LDMS.
- **LDMS Data Entry Date - LDMS Staff:** The LDMS laboratory staff person who entered the specimens into LDMS, records his/her initials here.