

Site Number: _____ Screening ID: _____ - ____ First 3 Letters of First Name: _____

A. COLLECTION INFORMATION

- Label one 1.2 ml lavender top blood collection tube. Do not use a barcode for this tube.
- Label one 1.8 ml Nunc cryovial with the appropriate barcode label from an **unused** CPEP Barcode Label sheet. Write in the first three letters of the participant's first name and the date of draw (MM/DD/YYYY) with an alcohol-proof pen. Apply label vertically and snap the appropriate color code into the lid of each cryovial(C-peptide=Lavender).
- Attach matching barcode labels from the **same barcode sheet to each page** of this Specimen Transmittal Form in **Section B**.
- Draw 1.2 ml **C-peptide** sample in lavender top plastic EDTA tube.
- Immediately invert the tube gently 6-8 times to mix, avoid jarring or shaking. Place tube upright on ice or in refrigerator.
- Centrifuge sample for 15 minutes in a chilled centrifuge within 1 hour after drawing.
- Transfer plasma to 1.8 ml cryovial. Screw top on tightly.
- Place specimen upright in a 2" partitioned freezer storage box. Samples from multiple subjects may be placed in the same box.
- Freeze samples at -20° C.

1. Date specimen collected: _____ / _____ / _____
MM DD YYYY

2. For which visit, in the study sequence, is this form being completed? (*check one*)

2 Baseline 99 Other

B. SPECIMEN INFORMATION

1. Place CPEP Barcode Label Here:



C. SHIPPING INFORMATION

- Place the 2" partitioned freezer box into a biohazard Ziploc bag with an absorbent sheet.
- Place yellow copy of this completed form in outside sleeve of bag.
- Place the bag into a larger styrofoam box filled to capacity with dry ice (at least 5 lbs or 3 kg) and tape outer cardboard box securely closed.
- Affix the following **two** labels to the outside of the box: 1) Black Diamond UN1845 Dry Ice Label, 2) Diamond UN 3373 Diagnostic Specimen Label (Placed on the same side as the Black Diamond Dry Ice Label)
- Prepare and print a pre-paid airbill to FedEx all samples **Priority Overnight** to:
Specimen Processing, Northwest Lipid Research Laboratories
401 Queen Anne Avenue North
Seattle, WA 98109-4517
Phone: (206) 685-3327
- **Ship specimens Monday-Thursday only** (except days before a U.S. federal holiday)

1. Shipped By Name: _____ 2. Phone #: (____) _____ - _____

3. Date Shipped: _____ / _____ / _____ 4. Comments: _____
MM DD YYYY

*On all questions write "?" if the desired information is currently unavailable, but is being checked and will be known in future updates.
Write "*" if the desired information is permanently unavailable (i.e. will not be known in any future updates).*