

<p>Clinical Center Use Only</p> <p>Date Form Entered (mm/dd/yyyy) ___ ___/___ ___/___ ___ ___ ENTER_DT</p> <p>Username of person entering this form ___ ___ ___ ___ ___ ENTER_USER</p>

For DCC Use only:

190.

a. *The Histology Core flagged this specimen as unusable.* ___ NOT_USABLE

(1= no tissue blocks or slides available, 2=no vein tissue in the block; only fat and connective tissue)

b. *Date DCC notified (mm/dd/yyyy)* ___ ___ ___/___ ___ ___/___ ___ ___ NOT_USABLE_NOTIFY_DT