MTN-014 Screening Visit LDMS Specimen Tracking Sheet

For login of stored specimens into LDMS

Participant ID Site Number Participant Number Chk		Visit Code 1.0		Specimen Collection Date da MMM yy	
# of TUBES or SPECIMENS	PRIMARY SPECIMEN	PRIMARY ADDITIVE	ALIQUOT DERIVATIVE	ALIQUOT SUB ADD/DER	INSTRUCTIONS FOR PROCESSING LAB
	Vaginal Biopsies – Gene Expression (VGL) Collection Time: Hour: Min	RNL	BPS	N/A	Store at 4°C overnight then transfer to ≤-70°C. Must be stored at ≤-70°C for a minimum of 24 hours prior to shipping.
	Rectal Biopsies – Gene expression microarrays (FSR) Collection Time: Hour: Min	RNL	BPS	N/A	Store at 4°C overnight then transfer to ≤-70°C. Must be stored at ≤-70°C for a minimum of 24 hours prior to shipping.
	Rectal Biopsy – Histology (FSR) Collection Time: Hour: Min	FOR	BPS	N/A	Store at room temperature.
	Rectal Biopsy – Proteomics (FSR) Collection Time: Hour: Min	NON	BPS	N/A	Time Frozen:: Hour : Min Freeze at ≤-70°C within 2 hours of collection. Enter PRO into Other Spec ID field of LDMS.
	Urine from hCG (URN) Collection Time: Hour: Min	NON	URN	N/A	Store as many 1ml aliquots as possible. Store at 4°C until freezing. Time Frozen::
Comments Initials:	Sending Staff Receiving S	LD	MS Data Ent		Id MMM yy LDMS Staff

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Purpose: This non-DataFax form is used to document collection and entry of study specimens into the Laboratory Data Management System (LDMS).

General Information/Instructions: A copy of this form accompanies specimens for storage (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 specimens were collected.
- TUBES or SPECIMENS COLLECTED: In the box provided, record the total number of tubes or specimens collected for that primary specimen type. 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.

LDMS CODES:

BPS: Biopsy FOR: Formalin

FSR: Rectal biopsy by flexible sigmoidoscopy

RNL: RNALater URN: Urine VGL: Vaginal

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