District of Columbia ♦ Department of Forensic Sciences ♦ Public Health Laboratory
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General Laboratory External Chain of Custody

PHL CLIA Director: Jocelyn R. Hauser, PhD, D(ABMM), MLS(ASCP)CM

CLIA#: 09D0968273

Specimen Submitted by:

Hospital/Clinic______________________

Point-of-Contact Name_____________

Phone__________________________

Fax____________________________

E-mail ______________________

Signature____________________

Date __________________ **Time**__________________

Specimen Received By:

Courier Name_______________

Date_______ **Time**____________

Initials______________________

#	Unique Specimen Identifier (e.g., MRN, sample ID)	Sample type (e.g. serum, tissue, isolate)	Date of Birth	Collection Date	Comments
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

This section is for DC PHL use only

Specimens received by _____________ Date/Time____________ Storage Temp_________