Te Whatu Ora
Health New Zealand
Counties Manukau

Middlemore Hospital Laboratory Request Form

NEOLEV3 STUDY

Study ID number: ..... **Collection Date & Time**.....

DOB: ..... **Collected by:** .....

Coordinator: Kelly Roczniac kelly.roczniak@middlemore.co.nz ext 57997 or 58363

Visit: Please tick. **Use a separate form for each sample**

- ❑ Sample 1 – pre escalation dose
- ❑ Sample 2 - 60-90m post esc
- ❑ ~~Sample 3 – 60-90m post esc2 (NOT FOR PHASE 1)~~
- ❑ Sample 4 – Pre 3,4,5 maint
- ❑ Sample 5 – Pre 12,13,14 maint

CENTRAL REGISTRATION

Register with Study ID & DOB (no encounter number)
Doctor: NEOLE
Location: NEOLE
Reference: Study Visit eg Sample 1

TESTS STOR (Storage for Study)

Collection Instructions: Invert EDTA Vial 10 times to mix
Note time of collection
Send to Lab on ice

CSR Instructions: See doc CSRr447
EDTA sample should be received on ice & processed within 2 hours-if not, note in log. **DO NOT LOAD ON TRACK**

- Spin immediately at 2000g for 10 min at 4°C
- REPRINT EXTRA LABELS. Cut the plain Lab Number part of the registration number label (No name, NHI or barcode)
- STICK a Lab number to a NUNC tube & label with a Study Label from Trials folder. Fill out required information
  Do not cover the Study label
  - SCAN the Request form as per CSR Protocol.
- Aliquot EDTA plasma into NUNC tube
  - FILL out the CSR potting sheet.
- FILL OUT LOG kept in the CSR Trials Manual.
- **Immediately** after aliquoting STORE in the CSR -20°C freezer in the box labelled "NEOLEV3 Study" Caroline or delegated person will transfer daily to -80 freezer. Samples collected from any participant should be added sequentially into the freezer storage box