

NEWBORN SCREENING DRIED BLOOD SPOT SPECIMEN SHIPPING LOG

INSTRUCTIONS FOR USE	Complete this form to document the Newborn Screening specimens enclosed in your shipment to the North Carolina State Laboratory of Public Health and place the completed form inside your package. This record helps support quality assurance by confirming that all specimens sent are received. We also recommend that the submitter keeps a copy for their records, as this can be helpful if any questions arise regarding the shipment or receipt of specimens.
SUBMITTER NAME (include HOSPITAL UNIT if applicable, for example NICU, Newborn Nursery)	
PHONE #	
FAX #	
UPS TRACKING NUMBER:	

[illegible]