

# NIDA GENETICS INITIATIVE PHLEBOTOMY COLLECTION FORM

SHIP AT ROOM TEMPERATURE IN SAFETY MAILER  
ENCLOSE A COPY OF THIS FORM WITH BLOOD KIT

## FOR RU LAB USE ONLY:

TO: DR. DOUGLAS FUGMAN/GENETICS  
RUTGERS UNIV./CELL REPOSITORY  
DIV. LIFE SCIENCES – NELSON LABS  
604 ALLISON ROAD (RM. C120A)  
PISCATAWAY, NJ 08854-8082

FAX: (732) 445-1149  
PHONE: (732) 445-1498

INITIAL: \_\_\_\_\_

YELLOW ML: \_\_\_\_\_

PURPLE ML: \_\_\_\_\_

ID#: \_\_\_\_\_

WEB FORM:  
<http://rucdr.rutgers.edu/shippingblood>

FROM (NIDA SITE):

# YELLOW TOP TUBES: \_\_\_\_\_

# PURPLE TOP TUBES: \_\_\_\_\_

**NIDA STAFF: PLACE TUBE LABEL HERE OR COMPLETE BY HAND**  
(VERIFY INFO AGAINST INFO ON BLOOD TUBES!!!)

SEX: M \_\_\_ F \_\_\_

AGE: \_\_\_\_\_

ALTERNATE ID#: \_\_\_\_\_

NIDA-ID#: \_\_\_\_\_

## TO BE COMPLETED AT COLLECTION SITE:

DATE BLOOD DRAWN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ TIME DRAWN: \_\_\_\_\_ AM/PM DRAWN BY: \_\_\_\_\_  
MONTH - DAY - YEAR

CONTACT THE RUTGERS CELL REPOSITORY TO CONVEY PACKAGE TRACKING NO./DATE OF SHIPMENT (SEE BELOW). IF BLOOD IS SHIPPED ON A FRIDAY FOR SATURDAY DELIVERY, NOTIFY RUTGERS AND CHECK FEDEX FORM FOR SATURDAY DELIVERY.

EMAILED/FAXED/

CALL IN TO: RUTGERS UNIVERSITY CELL REPOSITORY \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ AM/PM  
(SEE RUTGERS FAX/PHONE #S ABOVE) DATE TIME

PACKAGE TRACKING #: \_\_\_\_\_ (CHECK SATURDAY DELIVERY ON DELIVERY FORM IF APPLICABLE)

## TO BE COMPLETED BY RUTGERS UNIVERSITY CELL REPOSITORY

PRIOR NOTIFICATION REC'D: YES \_\_\_ NO \_\_\_ - IF YES, DATE/TIME \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ AM/PM

CONFIRMATION OF RECEIPT OF BLOOD  
SAMPLE TO NIDA SITE SENT BY: \_\_\_\_\_

DATE/TIME \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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