

# 65 Analyte Saliva Confirmation

**CHAIN OF CUSTODY FORM** WESTERN SLOPE LABORATORY  
 1177 Bunker Road, Suite K, Troy, MI 48063  
 Phone 313-555-2121  
 CLIA Number: 23D1047507

Specimen ID No. B10101010  
 STEPS 1-5 COMPLETED BY COLLECTOR

**STEP 1-COLLECTION SITE, DONOR, AND MRO INFORMATION**

Collection Site/Referring Lab: ABC COMPANY  
 123 Woodward Avenue  
 Detroit, MI 48000  
 P: 313-555-1212  
 F: 313-555-2121

Donor Name (PRINT): John Doe  
 Donor ID: DL0202123456

MRO (if applicable):  
 MRO information can be preprinted here if a doctor is selected.

REASON FOR TEST (circle one): Pre-employment Random Reasonable Suspicion Post Accident Follow-Up

**STEP 2-LC/MS/MS TESTING TO BE PERFORMED BY LAB**

TEST TYPE (circle one): URINE or **SALIVA**

LC/MS/MS CONFIRMATION SERVICES (circle drug(s) that have shown presumptively positive from the point of care screening test device):  
 Amphetamine Benzodiazepines Buprenorphine Cocaine Cotinine MDMA Methadone  
 Methamphetamine Opiates/Opioids Phencyclidine (PCP) THC Other: **65 Analyte Saliva**

ADVANCED TOXICOLOGY PANELS - If Panel testing is required, circle only one test per Chain of Custody Form. If multiple Panel tests are required, use a separate Chain of Custody Form.

A. 5 Panel Drug Test  
 E. Lead (Pb) Testing  
 I. 5 Panel with EIG/EIS (Urine only)  
 B. 10 Panel Drug Test  
 F. 10 Panel with EIG/EIS (Urine only)  
 J. 10 Panel with EIG/EIS (Urine Only)  
 C. Urine Specific Gravity (USG)  
 D. Bath Salts Panel  
 G. Synthetic Cannabinoids Panel (K2/Spice)  
 H. Other: \_\_\_\_\_

**DO NOT FILL OUT ADVANCED TOX SECTION FOR STANDARD CONFIRMATIONS**

**STEP 3-SEAL SPECIMEN**  
 Collector affixes barcode seal (located at the bottom of this form) to the specimen container. Donor initials and dates the seal.

**STEP 4-COLLECTOR CERTIFICATION OF TESTING**  
 I certify that the specimen given to me by the donor identified in the certification step 6 of this form was collected, labeled, sealed, and released to a delivery service accustomed to transporting such specimens.

Signature of Collector: [Signature] Time of Collection: 1:15 PM  
 Collector Prints Name Here: [Name] Date of Collection: 3/7/13

**STEP 6-COMPLETED BY DONOR**  
 I certify that I provided my specimen to the collector, that it is fresh and I have not adulterated it in any manner, the specimen container was sealed with a tamper evident seal in my presence, and that the information provided on this form and on the label affixed to specimen container is correct. I also understand that the results of this test will be provided directly to the collection site/referring lab documented on this form.

Donor Signs Here: [Signature] Date: 3/7/13  
 Donor Prints Name Here: [Name]  
 Donor Daytime Phone: 313-282-1212 Donor Evening Phone: Same

**STEP 5-Remarks Regarding Collection Process**  
 Do not document any medications on this form. Medication lists must be supplied to the MRO if applicable.

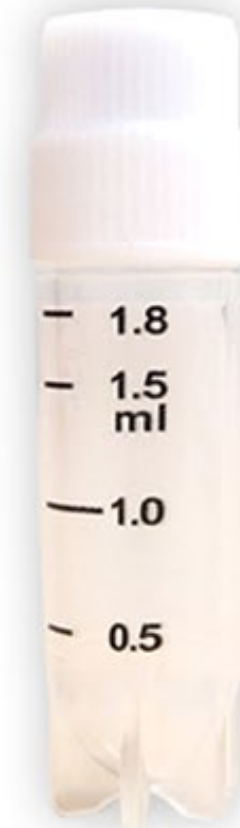
**STEP 7-SPECIMEN TRANSPORT**  
 Sealed and packaged specimen container released to courier: FedEx  
 Name of Delivery Service Transferring Specimen to the Laboratory: \_\_\_\_\_

**REMAINING SECTIONS ARE FOR LABORATORY USE ONLY**

RECEIVED AT LAB: PRIMARY SPECIMEN CONTAINER SEAL INTACT? YES  NO  LAB  STORAGE

INITIALS OF ACCEPTANCE: [Initials] DATE: 3/7/13 WESTERN LAB

TOP COPY 1-LABORATORY COPY 2-COLLECTOR/MRO COPY 3-EMPLOYER COPY 4-OTHER

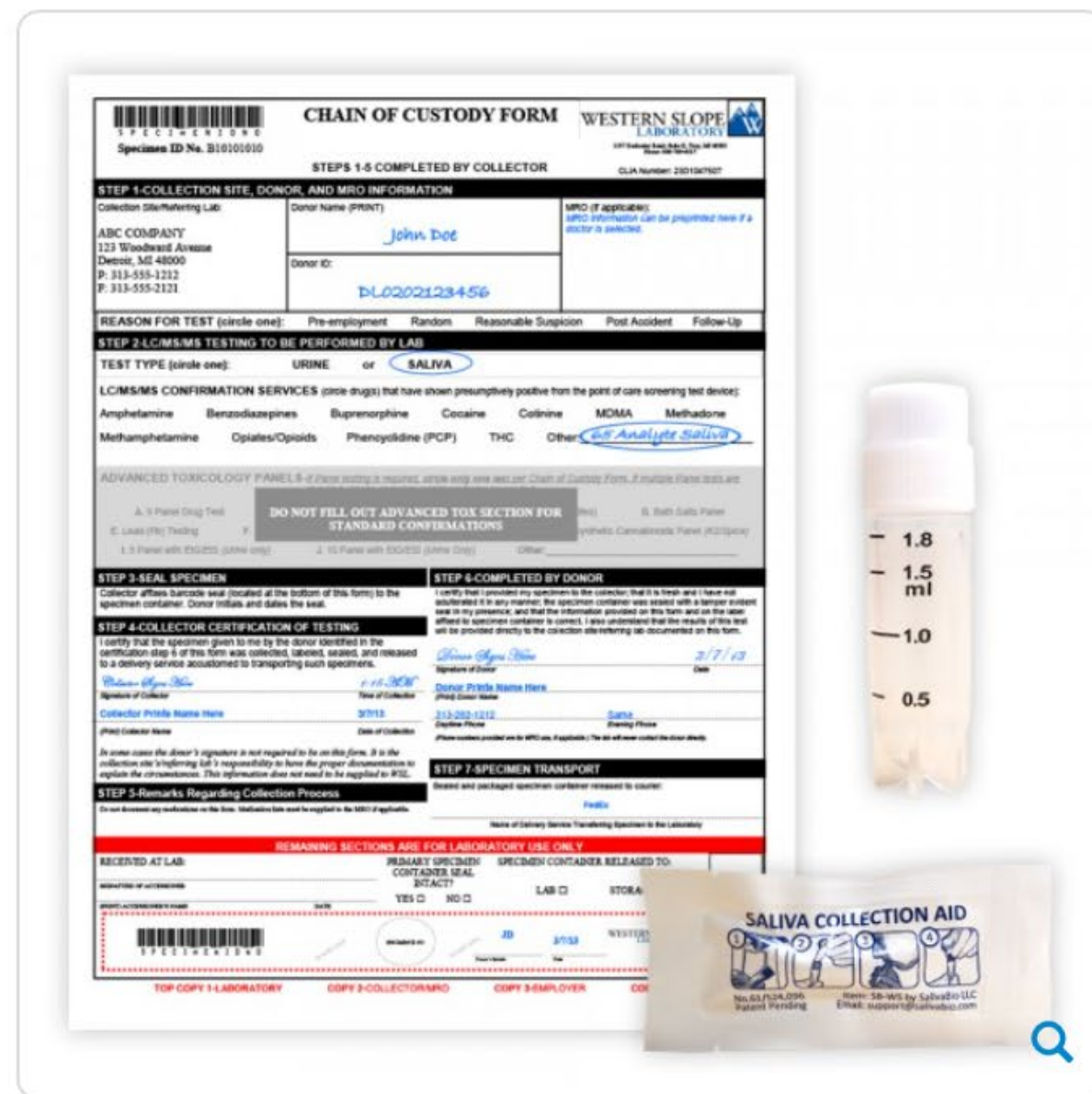


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 Keeping Businesses Safe, One Test at a Time!

Please click the link below to see what drugs are covered on the 65 Analyte saliva confirmation



## Saliva Lab Confirmation 65 Drugs Drug Test

- Saliva Bio Collection Instructions
- Specimen Submission Service Manual
- 65 Panel Saliva Confirmation - CCF Example
- Instructions For Use for Saliva Confirmation Services

Availability: In stock

Product sold individually	
1-4	5+
\$85.00	\$80.00
* Discounts may vary based on options above	



**i** 65 Panels Tested

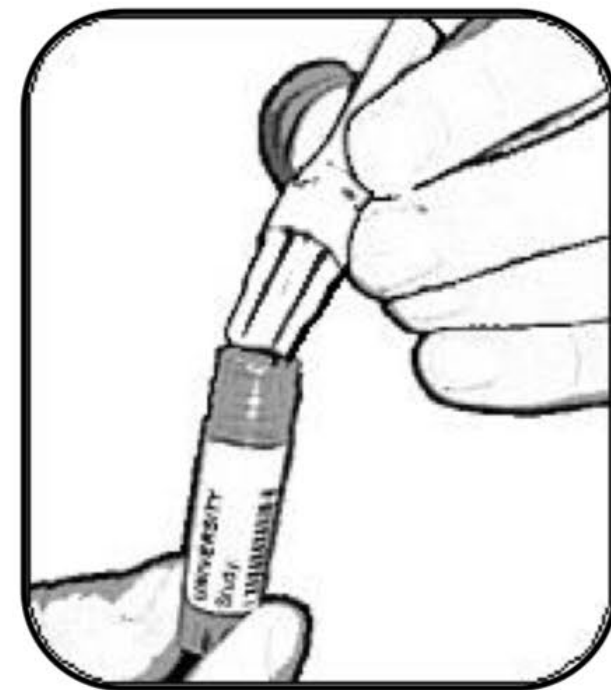
**i** 65 Panel Guide

- Please note: Our lab DOES NOT accept instant saliva devices for confirmation.
- Please follow the Instructions for use for the SalivaBio Collection device

### Instructions for Use:



**Step 1:**  
Open foil pouch and remove the Saliva Collection Aid (SCA).



**Step 2:**  
Place ribbed-end of the SCA securely into a pre-labeled collection vial (*see Caution 3 above*).



**Step 3:**  
Allow saliva to pool in mouth. Then, with head tilted forward, **gently** guide saliva through the SCA into the vial. Fill to the required volume.\*



**Step 4:**  
Remove and discard SCA. Attach cap to collection vial and tighten.



## **Sample Handling and Processing (As described in the Saliva Collection Handbook):**




- Immediately after collection, freeze samples at or below -20°C. If freezing is not possible, refrigerate immediately at 4°C and maintain at this temperature for no longer than necessary (ideally less than 2 hours) before freezing at or below -20°C (temperature of a regular household freezer).
- Samples stored for more than 4 months should be frozen at -80°C.
- Freeze-thaw cycles should be minimized for some analytes. It is critical that storage conditions are researched prior to initiation of sample collection.
- It is recommended that tubes be organized into cryostorage boxes (9x9 grids, 81 tubes) before storing or shipping.
- Please refer to attached SalivaBio document for further instructions



# Completing the CCF

## Step-By-Step

- Complete Step 1-document the donor's name, donor ID, and the reason for testing the individual.
- Prepopulated for 65 Analyte Saliva Panel
- Step 3 requires you to remove the label at the bottom of the CCF, place it on the sample container to seal it; then have the donor write their initials and the date on the label.
- The collector will complete Step 4 by printing and signing their name, as well as providing the date and time of collection.
- Step 5 is optional. If anything out of the norm happened or was presented at the time of collection, document it in this section.
- The donor completes Step 6 by printing, signing, and providing the date and the best way for the MRO to reach them by phone.
- Step 7 should have the method in which the sample is being transported to WSL: FedEx, postal service, or courier.

CHAIN OF CUSTODY FORM		WESTERN SLOPE LABORATORY
 SPECIMEN ID NO Specimen ID No. B10101010		1197 Rochester Road, Suite K, Troy, MI 48063 Phone: 800-789-4317 CLIA Number: 23D1047507
<b>STEPS 1-5 COMPLETED BY COLLECTOR</b>		
<b>STEP 1-COLLECTION SITE, DONOR, AND MRO INFORMATION</b>		
Collection Site/Referring Lab: ABC COMPANY 123 Woodward Avenue Detroit, MI 48000 P: 313-555-1212 F: 313-555-2121	Donor Name (PRINT) <u>John Doe</u> Donor ID: <u>DL0202123456</u>	MRO (if applicable): <i>MRO information can be preprinted here if a doctor is selected.</i>
<b>REASON FOR TEST (circle one):</b> Pre-employment   Random   Reasonable Suspicion   Post Accident   Follow-Up		
<b>STEP 2-LC/MS/MS TESTING TO BE PERFORMED BY LAB</b>		
<b>TEST TYPE (circle one):</b> URINE   or <u>SALIVA</u>		
<b>LC/MS/MS CONFIRMATION SERVICES</b> (circle drug(s) that have shown presumptively positive from the point of care screening test device): Amphetamine   Benzodiazepines   Buprenorphine   Cocaine   Cotinine   MDMA   Methadone Methamphetamine   Opiates/Opioids   Phencyclidine (PCP)   THC   Other: <u>65 Analyte Saliva</u>		
<b>ADVANCED TOXICOLOGY PANELS</b> -If Panel testing is required, circle only one test per Chain of Custody Form. If multiple Panel tests are required, check all that apply.		
<b>DO NOT FILL OUT ADVANCED TOX SECTION FOR STANDARD CONFIRMATIONS</b>		
<b>STEP 3-SEAL SPECIMEN</b> Collector affixes barcode seal (located at the bottom of this form) to the specimen container. Donor initials and dates the seal.		
<b>STEP 4-COLLECTOR CERTIFICATION OF TESTING</b> I certify that the specimen given to me by the donor identified in the certification step 6 of this form was collected, labeled, sealed, and released to a delivery service accustomed to transporting such specimens.		
<u>Collector Signs Here</u> Signature of Collector <u>1:15 PM</u> DATE	<u>Donor Signs Here</u> Signature of Donor <u>3/7/13</u> DATE	<b>STEP 6-COMPLETED BY DONOR</b> I certify that I provided my specimen to the collector; that it is fresh and I have not adulterated it in any manner; the specimen container was sealed with a tamper evident seal in my presence; and that the information provided on this form and on the label affixed to specimen container is correct. I also understand that the results of this test will be provided directly to the collection site/referring lab documented on this form.
<u>Collector Prints Name Here</u> Signature of Collector <u>3/7/13</u> DATE	<u>Donor Prints Name Here</u> (Print) Donor Name <u>313-282-1212</u> Daytime Phone <u>Same</u> Evening Phone <small>(Phone numbers provided are for MRO use, if applicable.) The lab will never contact the donor directly.</small>	<b>STEP 7-SPECIMEN TRANSPORT</b> Sealed and packaged specimen container released to courier: <u>FedEx</u> Name of Delivery Service Transferring Specimen to the Laboratory
<b>STEP 5-Remarks Regarding Collection Process</b>		
Do not document any medications on this form. Medication lists must be supplied to the MRO if applicable.		
<b>REMAINING SECTIONS ARE FOR LABORATORY USE ONLY</b>		
RECEIVED AT LAB: SIGNATURE OF ACCESSIONER (PRINT) ACCESSIONER'S NAME	PRIMARY SPECIMEN CONTAINER SEAL INTACT? YES <input type="checkbox"/> NO <input type="checkbox"/>	SPECIMEN CONTAINER RELEASED TO: LAB <input type="checkbox"/> STORAGE <input type="checkbox"/>
 SPECIMEN ID NO <u>JD</u> Donor's Initials		 DATE <u>3/7/13</u> Date
TOP COPY 1-LABORATORY		COPY 2-COLLECTOR/MRO
COPY 3-EMPLOYER		COPY 4-DONOR



# Packing and Shipping the Specimen

- Place the SalivaBio collection device in the specimen bag you have been provided and tape it securely shut.
- Place the Specimen Bag with the SalivaBio collection device along with the CCF in the FedEx Clinical Pak for shipping. Seal the bag.
- Place the right side of the pre-addressed shipping label (the sticker) on the outside of the Clinical Pak.
- Deliver the package to the nearest FedEx shipping location.
- Please allow up to 72 hours from the time the sample has arrived to the laboratory to receive your results

# ADDITIONAL SUPPORT

**Client Services Tel: 866.465.2855**  
**Or email us [britzel@drugtestsinbulk.com](mailto:britzel@drugtestsinbulk.com)**



**DrugTestsInBulk.com**

Keeping Businesses Safe, One Test at a Time!