



Study #021  
DFstudy90

Plate #390  
DFplate390

Seq #005  
DFseq390

Participant ID #   -     -    
id\_390

Visit Date        
day month year  
v\_date390

**Follow-up Blood/Saliva Collection Form**

**Blood Tubes Collected**

- fb1 1. Purple Top (Whole Blood) - if not previously collected .....     
    
day month year  
 fb1a a. Date of Blood Draw:        
hour minutes  
 fb1b b. Time of Blood Draw:   :   24-hr clock  
0 1  
1 2  
2 3 4 or more  
0 1  
1 2 3  
2 or more

Go to item 2

**Oragene™ Saliva Specimen**

- fb5 5. Date sample was collected:        
dd mm yy
  - fb6 6. Date sample received:        
dd mm yy
  - 7. Quality of sample received: **Mark all that apply**
- fb7\_go  Good      fb7\_lo  Low Volume (<2ml)      fb7\_cl  Colored  
 fb7\_le  Leaking      fb7\_cn  Contains Sediment      fb7\_ot  Other, specify: \_\_\_\_\_ fb7\_sp