RESEARCH BLOOD SAMPLE REQUEST FORM	
Sample Number:  Sample Number:	ETED BY
Date sample taken:	]: 🔲 🗆
Date sample sent to lab: d d - m o n - y y y y Time sample sent to lab:	
IdD.	
REST OF FORM TO BE COMPLETED BY LAB STAFF	
Trial Arm:	
No test C-Reactive protein Procalcitonin	
Result of allocated test: µg/l or ng/mL or mg/l (delete as appropriate)	
Blood sample spoiled, no result returned	
Section completed by:(Initials)	]
Result entered onto database by:(Initials)	у

## RESEARCH BLOOD SAMPLE REQUEST FORM

## **Treating Clinical Team:**

- 1) Complete the Sample Number and Date and Time blood sample taken and sent to lab fields.
- 2) Take Blood Sample Request Form alongside blood sample to Lab

## Lab Team:

- 1) Upon receipt of the sample, in addition to local processes, log in to ADAPT-Sepsis database to identify patient trial arm and check relevant box
- 2) Hand blood sample and this annotated form to the Lab technician team running the sample
- 3) Lab technician team to run assay as specified and update this form when assay result is available
- 4) Return the updated form to lab personnel responsible for entering the data into the ADAPT-Sepsis database, immediately upon completion. *Please note that this research relies on a time sensitive automated process to communicate the results to the treating clinicians.* **DO NOT confirm the assay value anywhere else except on this form**.
- 5) Lab person entering the result in the database should initial and date the form and then file completed form in the ADAPT-Sepsis Lab Site File.

Please refer to Lab Manual and Troubleshooting page for further information.