



Department of  
Health and Human Services  
Health and Environmental Testing Laboratory  
221 State Street  
# 12 State House Station  
Augusta, Maine 04333-0012  
Tel: (207) 287-2727; Fax: (207) 287-6832  
TTY: 1-800-606-0215

## SELF COLLECTION QUALITY ASSURANCE WORKSHEET

This worksheet must be filled out by the swab and send collection site and it must accompany each shipment of samples.  
Failure to complete this form may result in samples being rejected or an increase in testing turn around time.

<b>Site of Collection</b>	
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<b>SWAB</b>			
<b>Type of Swab</b>	<b>Manufacturer</b>	<b>Lot #</b>	<b>Expiration date</b>

<b>Collection Media</b>			
<b>Type of media</b>	<b>Manufacturer</b>	<b>Lot #</b>	<b>Expiration date</b>

<b>Collection Tube</b>			
<b>Type of tube</b>	<b>Manufacturer</b>	<b>Lot #</b>	<b>Expiration date</b>

<b>Medical Observer trained in the collection of Nasal mid-turbinate and Anterior nares clinical specimens</b>	
<b>Name</b>	<b>Type of provider (MD, NP etc..)</b>