

FOR OUTPATIENT CLINIC

<b>GYDR001</b> Consent Record Date: _____ PMT3	<b>GYDR001</b> Consent File Date: _____ PMT3	<b>GYDR001</b> Consent Patient Date: _____ PMT3	<b>GYDR001</b> HEP MET/CAT Record Date: _____ PMT3	<b>GYDR001</b> HEP MET/CAT Blood Tube Date: _____ PMT3
<b>GYDR001</b> HEP MET/CAT Blood Tube Date: _____ PMT3	<b>GYDR001</b> HEP MET/CAT Blood Tube Date: _____ PMT3	<b>GYDR001</b> HEP MET/CAT Blood Tube Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3
<b>GYDR001</b> EDTA DNA Record Date: _____ PMT3	<b>GYDR001</b> EDTA DNA Blood Tube Date: _____ PMT3	<b>GYDR001</b> EDTA DNA Blood Tube Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3
<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3
<b>GYDR001</b> URIN 24 Record Date: _____ PMT3	<b>GYDR001</b> URIN 24 Urine Box Date: _____ PMT3	<b>GYDR001</b> URIN 24 Urine Box Date: _____ PMT3	<b>GYDR001</b> URIN 24 Urine Box Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT3
<b>GYDR001</b> Date: _____ PMT3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3

FOR LABORATORY USE

<b>GYDR001</b> HEP MET/CAT BANK Date: _____ PMT 3	<b>GYDR001</b> HEP MET/CAT Date: _____ PMT 3	<b>GYDR001</b> HEP MET/CAT Date: _____ PMT 3	<b>GYDR001</b> HEP MET/CAT Date: _____ PMT 3	<b>GYDR001</b> HEP MET/CAT Date: _____ PMT 3
<b>GYDR001</b> HEP MET/CAT Date: _____ PMT 3	<b>GYDR001</b> HEP MET/CAT Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3
<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3
<b>GYDR001</b> EDTA DNA Date: _____ PMT 3	<b>GYDR001</b> EDTA DNA Date: _____ PMT 3	<b>GYDR001</b> EDTA DNA Date: _____ PMT 3	<b>GYDR001</b> EDTA DNA Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3
<b>GYDR001</b> URIN 24 BANK Date: _____ PMT 3	<b>GYDR001</b> URIN 24 Date: _____ PMT 3	<b>GYDR001</b> URIN 24 Date: _____ PMT 3	<b>GYDR001</b> URIN 24 Date: _____ PMT 3	<b>GYDR001</b> URIN 24 Date: _____ PMT 3
<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3	<b>GYDR001</b> Date: _____ PMT 3