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|  |  | **FUNDACIÓN INNOVAGEN** | | | |
|  | **FORMATO DE REMISIÓN DE MUESTRAS BIOLOGICAS** | | | |
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|  | **CODIGO: EN PROCESO** | **FECHA:**  **${fecha}** | **VERSION 05** | **PÁGINA: 1 de 2** |
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| **INFORMACION BASICA** | | | |
| **Institución/Remitente:** | **${institucion}** | | |
| **Lugar De Remisión:** | **${lugar}** | | |
| **Teléfono Institución Remitente:** | **${telefono}** | **No. Campaña:** | **${numerocamp}** |

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| **No** | **FECHA DE TOMA** | | | **NÚMERO DE IDENTIFICACIÓN** | **CODIGO INTERNO FIG** | **EXAMEN SOLICITADO** | **OBSERVACIONES** |
| **DD** | **MM** | **AAA** |
| **${n1}** | **${f1}** | | | **${i1}** | **${c1}** | **${e1}** | **${o1}** |
| **${n2}** | **${f2}** | | | **${i2}** | **${c2}** | **${e2}** | **${o2}** |
| **${n3}** | **${f3}** | | | **${i3}** | **${c3}** | **${e3}** | **${o3}** |
| **${n4}** | **${f4}** | | | **${i4}** | **${c4}** | **${e4}** | **${o4}** |
| **${n5}** | **${f5}** | | | **${i5}** | **${c5}** | **${e5}** | **${o5}** |
| **${n6}** | **${f6}** | | | **${i6}** | **${c6}** | **${e6}** | **${o6}** |
| **${n7}** | **${f7}** | | | **${i7}** | **${c7}** | **${e7}** | **${o7}** |
| **${n8}** | **${f8}** | | | **${i8}** | **${c8}** | **${e8}** | **${o8}** |
| **${n9}** | **${f9}** | | | **${i9}** | **${c9}** | **${e9}** | **${o9}** |
| **${n10}** | **${f10}** | | | **${i10}** | **${c10}** | **${e10}** | **${o10}** |
| **${n11}** | **${f11}** | | | **${i11}** | **${c11}** | **${e11}** | **${o11}** |
| **${n12}** | **${f12}** | | | **${i12}** | **${c12}** | **${e12}** | **${o12}** |
| **${n13}** | **${f13}** | | | **${i13}** | **${c13}** | **${e13}** | **${o13}** |
| **${n14}** | **${f14}** | | | **${i14}** | **${c14}** | **${e14}** | **${o14}** |
| **${n15}** | **${f15}** | | | **${i15}** | **${c15}** | **${e15}** | **${o15}** |
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| **RESPONSABLES** | | | | | |
| **Responsable de entrega de muestras:** | | **Responsable de recepción de muestras:** | | | |
| **Nombre:** | | **Nombre:** | | | |
| **Fecha:** | | **Fecha:** | | | |
| **Hora de entrega:** | | **Hora de recibido:** | | | |
| **Recepción de Muestras** | **Nombre** | | **Fecha** | **Firma** | |
| **Área de procesamiento de muestras** |  | |  | |  |
| **Área de Facturación y Etiquetado** |  | |  | |  |
| **Entrega de resultados** |  | |  | |  |

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|  |  | **FUNDACIÓN INNOVAGEN** | | | |
|  | **FORMATO DE REMISIÓN DE MUESTRAS BIOLOGICAS** | | | |
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|  | **CODIGO: EN PROCESO** | **FECHA:**  **${fecha}** | **VERSION 05** | **PÁGINA: 2 de 2** |
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| **INFORMACION BASICA** | | | |
| **Institución/Remitente:** | **${institucion}** | | |
| **Lugar De Remisión:** | **${lugar}** | | |
| **Teléfono Institución Remitente:** | **${telefono}** | **No. Campaña:** | **${numerocamp}** |

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| **No** | **FECHA DE TOMA** | | | **NÚMERO DE IDENTIFICACIÓN** | **CODIGO INTERNO FIG** | **EXAMEN SOLICITADO** | **OBSERVACIONES** |
| **DD** | **MM** | **AAA** |
| **${n16}** | **${f16}** | | | **${i16}** | **${c16}** | **${e16}** | **${o16}** |
| **${n17}** | **${f17}** | | | **${i17}** | **${c17}** | **${e17}** | **${o17}** |
| **${n18}** | **${f18}** | | | **${i18}** | **${c18}** | **${e18}** | **${o18}** |
| **${n19}** | **${f19}** | | | **${i19}** | **${c19}** | **${e19}** | **${o19}** |
| **${n20}** | **${f20}** | | | **${i20}** | **${c20}** | **${e20}** | **${o20}** |
| **${n21}** | **${f21}** | | | **${i21}** | **${c21}** | **${e21}** | **${o21}** |
| **${n22}** | **${f22}** | | | **${i22}** | **${c22}** | **${e22}** | **${o22}** |
| **${n23}** | **${f23}** | | | **${i23}** | **${c23}** | **${e23}** | **${o23}** |
| **${n24}** | **${f24}** | | | **${i24}** | **${c24}** | **${e24}** | **${o24}** |
| **${n25}** | **${f25}** | | | **${i25}** | **${c25}** | **${e25}** | **${o25}** |
| **${n26}** | **${f26}** | | | **${i26}** | **${c26}** | **${e26}** | **${o26}** |
| **${n27}** | **${f27}** | | | **${i27}** | **${c27}** | **${e27}** | **${o27}** |
| **${n28}** | **${f28}** | | | **${i28}** | **${c28}** | **${e28}** | **${o28}** |
| **${n29}** | **${f29}** | | | **${i29}** | **${c29}** | **${e29}** | **${o29}** |
| **${n30}** | **${f30}** | | | **${i30}** | **${c30}** | **${e30}** | **${o30}** |
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| **RESPONSABLES** | | | | | |
| **Responsable de entrega de muestras:** | | **Responsable de recepción de muestras:** | | | |
| **Nombre:** | | **Nombre:** | | | |
| **Fecha:** | | **Fecha:** | | | |
| **Hora de entrega:** | | **Hora de recibido:** | | | |
| **Recepción de Muestras** | **Nombre** | | **Fecha** | **Firma** | |
| **Área de procesamiento de muestras** |  | |  | |  |
| **Área de Facturación y Etiquetado** |  | |  | |  |
| **Entrega de resultados** |  | |  | |  |