

<b>ORGANISATION</b>		<b>LUMIERE CLINIC</b>		<b>CHECKLIST REF NO.</b>		<b>LC00518</b>	
<b>CLINIC DATE</b>	<b>29.6.22</b>	<b>CLINICIAN</b>	<b>DR Nicole</b>	<b>COURIER COLLECTION DATE (DISPATCH)</b>			
<b>CLINIC</b>						<b>LABORATORY</b>	
<b>No.</b>	<b>Patient Name Label</b>			<b>Specimen Pots (No.)</b>	<b>Nurse Initials</b>	<b>Confirmation/ Histology No.</b>	<b>Lab Initials</b>
1	David Hinde DOB: 15/04/1991			1	JM		
2							
3							
4							
5							
6							
7							
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<b>ORGANISATION</b>		<b>LUMIERE CLINIC</b>		<b>CHECKLIST REF NO.</b>		<b>LC00517</b>	
<b>CLINIC DATE</b>	<b>28.06.22</b>	<b>CLINICIAN</b>	<b>DR NICOLE</b>	<b>COURIER COLLECTION DATE (DISPATCH)</b>			
<b>CLINIC</b>						<b>LABORATORY</b>	
<b>No.</b>	<b>Patient Name Label</b>			<b>Specimen Pots (No.)</b>	<b>Nurse Initials</b>	<b>Confirmation/ Histology No.</b>	<b>Lab Initials</b>
1	Michael Taylor DOB 12/10/1991			1	AT		
2							
3							
4							
5							
6							
7							