

ORGANISATION		LUMIERE CLINIC		CHECKLIST REF NO.		LC00514	
CLINIC DATE	22.6.22	CLINICIAN	DR Nicole	COURIER COLLECTION DATE (DISPATCH)			
CLINIC						LABORATORY	
No.	Patient Name Label			Specimen Pots (No.)	Nurse Initials	Confirmation/ Histology No.	Lab Initials
1	Laura Littlewood DOB: 15/03/1983			1	CL		
2							
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5							
6							
7							

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