

Form 3-5: Dried Blood Spot Tracking Form

T1. Interviewer Name: Code: Tablet Code:	T2. Supervisor Name: Code:	T3. District Name District CODE:
T4. Date Arrived at Site:	SITE NAME:	SITE ID:
Name of Lab:	Name of Contact at Lab:	Call PHONE CONTACT:

Instructions:

- After dried blood spots are dried and packaged appropriately, they should be sent to the lab on a daily basis.
- After dispatching the samples, the lab should be contacted to ensure receipt of the samples.

STICKER	DATE COLLECTED	DATE SENT TO LAB	DATE RECEIVED BY LAB