

# SAMPLE ALERT NOTICE

**Date** \_\_\_\_\_

**Before Shipping  
Complete and FAX To:  
(919) 277-0825**

**Shipping Information**

Study # \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone \_\_\_\_\_

# Pages Faxed \_\_\_\_\_

Airbill #s \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reports**

Standard (as applicable)  
Toxicology  
Clinical Trial

Custom \* (See below)\*

\_\_\_\_\_ Clinical Trial with Ref Range

\_\_\_\_\_ Toxicology with Mean & SD

\_\_\_\_\_ Excel File (Non-GLP)

\_\_\_\_\_ Word file

\_\_\_\_\_

Email address \_\_\_\_\_

**Samples/Tests**

Number of Samples/	Tests (Circle)
_____ Serum	Chemistry Panel Special Chem Tests
_____ Plasma	Coag / Special Chem
_____ Whole Blood	CBC / Special Chem
_____ Urines	Urinalysis / Special Chem
_____ Other	
Special Request _____	

**Notes / Special Request: Detail Below**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\* Custom reports are available with previous arrangements only. Please contact the lab when scheduling the study**

Antech Diagnostics  
507 Airport Blvd. Suite 113  
Morrisville, NC 27560  
Lab (919) 277-0822

**Final Submission** \_\_\_\_\_  
(for this study)