

# BLOOD/MILK COLLECTION FIELD DATA SHEET

Regional Capacity Building Program for Health Risk Management of POPs in South East Asia			
Site Name:		Start Time:	Date: /08/2008
		Finish Time:	
Sample collected by (initials):		Field Notes Recorded by (initials):	Crew Signatures:
Waypoint (UTM)	Easting:	Northing:	Photos:
SAMPLE INFO			
Blood donor's name:	Sex		Date of birth (dd/mm/yy)
	Male	Female	
Weight (kg)	Estimated blood/milk volume:		Total # of tubes/jar:
<div style="background-color: #cccccc; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> <p style="margin: 0;"><b>Sample Label</b></p> </div>		Other remarks:	
DESCRIPTION OF SAMPLING LOCATION (AND AREA SURROUNDING, IF APPLICABLE):		REMARK ON BLOOD DONOR CONDITIONS BEFORE AND AFTER BLOOD COLLECTION:	

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