#### Lab Processing Chart for IMPAACT Protocol Number P1097 Version 2.0

Title: 'Raltegravir Pharmacokinetics And Safety In Neonates'

	Protocol Version: 2.	0	LPC Version Date:	21MAR2014	LPC Edited/Updated:_N/A
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Protocol-Required Non-Standard Reagents and Supplies						
Evaluation	Reagent or supply	Order information				
Pharmacogenetic	Protein Saver Cards #903, (Whatman <sup>®</sup> #10534612)	VWR# 28170-017, Fisher Scientific #NC9307519				
Dried Blood Spots						
	Gas-impermeable storage bag (Whatman #10548232)	VWR# 89027-022, Fisher Scientific #50853570				
	Dessicant Packs (Whatman #10548234)					
	Humidity indicator Cards (Multisorb Des Manufacture #MS200032	VWR# 89027-024				
	Whatman card drying rack (Whatman #10537173 or Whatman # 10539521)	Fisher Scientific #NC9511648				
	Glassine Envelopes, 3 1/4 inches x 4 7/8 inches, 100-pack (Whatman #10548236) optional	VWR catalogue #89015-592				

#### Maternal SoE and Specimen Processing

Section 1: Maternal Schedule of Laboratory Evaluations (Copied from Protocol Document v.2.0, Appendix I-B)

#### COHORT 2 MATERNAL SCHEDULE OF EVALUATIONS

	Screening/entry	Labor/delivery <sup>6</sup>	Post-Delivery (1-5 days after delivery)
Informed Consent	х		
CLINICAL EVALUATIONS			
History	X <sup>1</sup>	X <sup>2</sup>	X <sup>2</sup>
PHARMACOKINETICS <sup>7</sup>			
Maternal RAL concentration <sup>3</sup>	1mL⁴	1mL <sup>4</sup>	
Waternal RAL concentration	If enrolled after delivery	If enrolled before delivery	
OTHER <sup>7</sup>			
Cord Blood <sup>3,5</sup>		х	
TOTAL BLOOD	1mL	1mL	0mL

- 1. History data at Screening/entry includes documentation of HIV-1 infection, demographic data and antiretroviral dosing history 3 months prior to entry.
- History data after Screening/entry includes antiretroviral dosing while on study, labor and delivery record, and obstetrical gestational age. It is strongly recommended that the site report, prospectively if possible, the mother to the Antiretroviral Pregnancy Registry

   (<u>http://www.apregistry.com/reg.htm</u>)
   US/Canada telephone: 800-258-4263, fax 800-800-1052
   Brazil: fax 888-259-5618
   International: phone: 910-679-1598, fax: 910-256-0637

Email: pregnancyregistries@incresearch.com

- 3. Mother/infant pairs may be enrolled up to 48 hours after delivery. In these situations it may not be possible to collect the maternal and cord blood samples at labor and delivery.
- 4. For women enrolled prior to delivery, collect 1mL of maternal blood within one hour after delivery. For women enrolled after delivery, collect 1mL of maternal blood at the time of enrollment.
- 5. Draw cord blood immediately after cord is clamped.
- 6. Not applicable to women enrolled after delivery.
- 7. See the Laboratory Processing Chart (LPC) on the P1097 Protocol Specific Webpage on the IMPAACT website (<u>http://www.impaactnetwork.org/index.htm</u>) for collection, processing and shipping instructions.

Section 2: Maternal Safety/Clinical Laboratory Evaluations (Defer to local clinical specimen collection guidelines for tube types and collection volumes whenever discrepancies occur)							
Evaluation	DMC Test Code	Tests	CRF #				
N/A	N/A	N/A	N/A				

Evaluation	Tube Type	Special Collection Notes	CRF # DMC Test Code	Processing	Shipping
Plasma Pharmacokinetics Maternal <b>RAL</b> concentration	K2EDTA	Collect within 1 hour after delivery. Invert 8-10 times gently. Send immediately to local IMPAACT processing lab on ice for processing within 1 hour.	PKW0299 PKRAN	Centrifuge blood within one hour of collection at 1000 x g for 10 minutes at <b>room temperature</b> . Transfer all plasma <b>(minimum 0.3mL)</b> to pre-labeled 2mL cryovial. Store at -70°C or <b>colder within 1 hour of collection</b> .	U.S. labs ship to UAB Lab # 191 batched after last sample is drawn. <u>Non-U.S. labs</u> : ship as pass through BRI repository to final destination of UAB Lab # 191 batched after last sample is drawn.
Plasma Pharmacokinetics Cord Blood	K2EDTA	Collect a minimum of 1 mL blood within 1 hour after cord is clamped. Invert 8-10 times gently. Send immediately to local IMPAACT processing lab on ice for processing within 1 hour.	PKW0299 PKRAN	Centrifuge blood within one hour of collection at 1000 x g for 10 minutes at <b>room temperature</b> . Transfer all plasma <b>(minimum 0.3mL)</b> to pre-labeled 2mL cryovial. Store at -70°C or <b>colder within 1 hour of collection</b> .	U.S. labs ship to UAB Lab # 191 batched after last sample is drawn. <u>Non-U.S. labs</u> : ship as pass through BRI repository to final destination of UAB Lab # 191 batched after last sample is drawn.

		Screening/Entry (L	DMS Vst/Vst Unit= 0 / ENT)		
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
Plasma Pharmacokinetics Maternal RAL concentration To be collected ONLY rom women enrolled after delivery.)	<b>K2EDTA</b> blood (1.0mL)	PKW0299	1 x 0.3mL (all plasma)	BLD/DPE/PL1 Time/Time Unit: 0 / RANDOM	Process within 1 hou of collection. Immediately after processing store at -70°C or colder.

	Labor/delivery (LDMS Vst/Vst Unit= 0 / L&D)							
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes			
Plasma Pharmacokinetics Maternal RAL concentration (To be collected ONLY from women enrolled before delivery.)	K2EDTA blood (1.0mL)	PKW0299	<b>1 x 0.3mL</b> (all plasma)	BLD/ <b>DPE</b> /PL1 <b>Time</b> /Time Unit: <b>0</b> / RANDOM	Process within 1 hour of collection. Immediately after processing store at - 70 <sup>0</sup> C or colder.			
Plasma Pharmacokinetics Cord Blood	<b>K2EDTA</b> Cord blood (1.0mL)	PKW0299	<b>1 x 0.3mL</b> (all plasma)	CRD/ <b>DPE</b> /PL1 <b>Time</b> /Time Unit: <b>0</b> / RANDOM	Process within 1 hour of collection. Immediately after processing store at -70 <sup>0</sup> C or colder.			

#### Infant SoE and Specimen Processing

#### Section 1: Infant Schedule of Laboratory Evaluations (Copied from Protocol Document v.2.0, Appendix II-B)

	Birth/Entry	1-6 hours after birth <sup>11</sup>	12-24 hours after birth <sup>11</sup>	36-48 hours after birth	72-84 hours after birth	108-132 hours after birth	Week 1-2 (7-14 days after birth)	Week 6 (35-49 days after birth)
CLINICAL EVALUATIONS	-	-	-	-	-	-	-	-
History				X <sup>2</sup>			X <sup>2</sup>	X <sup>2</sup>
Physical exam	X <sup>1</sup>						X <sup>3</sup>	X <sup>3</sup>
LABORATORY EVALUATIONS (if not obtained for	or standard of o	are)						
Hematology <sup>4,6</sup>				0.5mL <sup>4</sup>			0.5mL	
Chemistries <sup>5,6</sup>					1mL⁵		1mL	
Bilirubin <sup>6,7</sup>				1mL <sup>7</sup>				
PHARMACOGENETICS <sup>10</sup>	•		•	•		•		
Genotyping <sup>8</sup>					0.125mL			
PHARMACOKINETICS <sup>*10</sup>	<u> </u>	<u>•</u>	<u>4</u>	4	<u>+</u>	4	-	-
Washout <sup>9</sup>		0.25 mL	0.25 mL	0.25 mL	0.25mL	0.25mL	0.25mL	
TOTAL BLOOD	0mL	0.25mL	0.25mL	1.75mL	1.375mL	0.25mL	1.75mL	0mL
*See section 3.0	and 4.6 for cri	teria for infar	nts eligible fo	or pharmacok	inetic (PK) bl	ood sampling	•	

#### **COHORT 2 INFANT SCHEDULE OF EVALUATIONS**

1. Physical examination includes infant Apgar score, birth weight and length, head circumference, gestational age, gender, sex, and ethnicity.

2. History includes all non-protocol laboratory tests, HIV test results, antiretroviral agents for PMTCT, concomitant medications, signs and symptoms, diagnoses, and any intercurrent illnesses since the last visit, including any treatment to reduce bilirubin.

3. Complete physical exam includes temperature, heart rate, respiratory rate, weight, length, and head circumference.

4. Hematology to include CBC with differential and platelet count: If hematology testing was done as part of clinical care within 48 hours, report values obtained for clinical care and do not obtain additional study sample.

5. Chemistries include AST, ALT, creatinine and total and direct bilirubin: If chemistry testing was done as part of clinical care within 24 hours, report values obtained for clinical care and do not obtain additional study sample.

6. Both PK eligible and ineligible infants will have laboratory evaluations collected unless obtained as part of clinical care (see Footnotes 4, 5, and 7). If infant enrolls after birth, hematology, chemistries, and bilirubin should be obtained with first PK blood draw for those infants eligible for PK.

7. Bilirubin includes total and direct: If bilirubin testing was done as part of clinical care within 24 hours, report values obtained for clinical care and do not obtain additional study sample.

8. Genotyping (optional) for UGT1A1 polymorphisms will be done using dried blood spot on filter paper. Only infants who have PK sampling will have genotyping.

9. Only infants eligible for PK blood sampling (See Section 3.0 and 4.3). Collect 0.25mL of blood for each sample. Infants enrolled after delivery up to 48 hours may not have the initial PK samples obtained but will start as soon as possible. (Note: Infants enrolled close to the 48-hour time point should have the first PK blood sample collected within 4 hours of enrollment (i.e., within 52 hours after birth).

10. See the Laboratory Processing Chart (LPC) on the P1097 Protocol Specific Webpage on the IMPAACT Website (http://www.impaactnetwork.org/index.htm) for collection, processing and shipping instructions.

11. Skip visit if enrolled after scheduled time of visit.

Priority of blood draws should be: chemistries, hematology, pharmacokinetics, genotyping.

Section 2: Infant Safety/Clinical Laboratory Evaluations (Defer to local clinical specimen collection guidelines for tube types and collection volumes whenever discrepancies occur)							
Evaluation	DMC Test Code	Tests	CRF #				
Hematology	N/A	Complete Blood Count, with platelets and differential	LBW0093				
Chemistry	N/A	ALT (SGPT), AST (SGOT), Bilirubin (Total), Bilirubin (Direct), Creatinine	LBW0093				
Bilirubin	N/A	Bilirubin (Total), Bilirubin (Direct)	LBW0093				

Evaluation	Tube Type	Special Collection Notes			Shipping
Pharmacogenetics DBS for Genotyping for UGT1A1 (Optional and ONLY for infants having PK sampling)	K2 or K3EDTA OR Heel stick	The DBS should be collected on Whatman Protein Saver Card #903 (Whatman #10534612). DBS cards should be prepared from blood drawn in EDTA (purple top) tubes or blood obtained by using heelstick method. Send to local IMPAACT processing lab.	SPW0437 PKGENO	See ACTG/IMPAACT Lab Manual on HANC portal: <u>https://www.hanc.info/labs/labresources/</u> <u>procedures/ACTGIMPAACT%20Lab%20Man</u> <u>ual/55-DriedBloodSpots-LTC-SOP-v2.0-</u> <u>19Mar2012.pdf</u> for Dried Blood Spot specimen processing and storage procedures. Note: 25 uL of whole blood is applied to each spot on Whatman Protein Saver Card #903 card (Whatman #10534612). Each individual spot should be entered into LDMS as a separate aliquot and should be assigned its own Global Spec ID. Store filter paper in a non-permeable zip lock bag containing 2-3 desiccants per bag at -20°C or colder.	U.S. labs ship to Dr. Stephen Spector's Lab (LDMS Lab #173) on dry ice when requested by team. <u>Non-U.S. labs</u> : ship as pass through BRI repository to final destination of Dr. Stephen Spector's Lab (LDMS Lab #173) on dry ice when requested by team.
<b>Pharmacokinetics</b> Plasma for Raltegravir Washout	K2EDTA	Invert 8-10 times gently. Send immediately to local IMPAACT processing lab on ice for processing within 1 hour.	<b>PKW0352</b> PKINT	Centrifuge blood within one hour of collection at 1000 x g for 10 minutes at <b>room</b> <b>temperature</b> . Transfer all plasma <b>(minimum</b> <b>0.1mL)</b> to pre-labeled 2mL cryovial. Store at -70°C or <b>colder within 1 hour of collection</b> .	U.S. labs ship to UAB Lab # 191 batched after last sample is drawn. <u>Non-U.S. labs</u> : ship as pass through BRI repository to final destination of UAB Lab # 191 batched after last sample is drawn.

Section 4: Infant Evaluations by Visit

	1-6 hours after birth (LDMS Vst/Vst Unit= 1 / WK)							
Evaluation	Special Notes							
Pharmacokinetics ( Washout)	<b>K2EDTA</b> blood (0.25mL)	PKW0352	<b>1 x 0.1mL</b> (all plasma)	BLD/ <b>DPE</b> /PL1 Time: X Time Unit: Hours	Process within 1 hour of collection. Immediately after processing store at -70°C or colder.			

	12-24 hours after birth (LDMS Vst/Vst Unit= 1 / WK)				
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
Pharmacokinetics ( Washout)	K2EDTA blood (0.25mL)	PKW0352	1 x 0.1mL (all plasma)	BLD/DPE/PL1 Time: X Time Unit: Hours	Process within 1 hour of collection. Immediately after processing store at - 70°C or colder.

	36-48 hours after birth (LDMS Vst/Vst Unit= 1 / WK)				
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
Hematology	EDTA blood (0.5mL)	LBW0093	N/A	N/A	Send to local lab ambient
Bilirubin	SST or Red Top blood (1.0mL)	LBW0093	N/A	N/A	Send to local lab ambient
Pharmacokinetics ( Washout)	K2EDTA blood (0.25mL)	PKW0352	1 x 0.1mL (all plasma)	BLD/DPE/PL1 Time: X Time Unit: Hours	Process within 1 hour of collection. Immediately after processing store at - 70 <sup>0</sup> C or colder.

	72	-84 hours after bi	rth (LDMS Vst/Vst Unit= 1 / V	VK)	
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
Chemistry	SST or Red Top blood (1.0mL)	LBW0093	N/A	N/A	Send to local lab ambient
Genotyping	K2 or K3 EDTA DBS OR DPE DBS	SPW0437	5 x 0.025mL spots on DBS card	BLD/EDT/DBS Or BLD/DPE/DBS	Store the sealed bags at -20 C or colder until ready to ship.
	Heel stick DBS	SPW0437	5 x 0.025mL spots on DBS card	HST/NON/DBS	Store the sealed bags at -20 C or colder until ready to ship.
Pharmacokinetics (Washout)	K2EDTA blood (0.25mL)	PKW0352	1 x 0.1mL (all plasma)	BLD/DPE/PL1 Time: X Time Unit: Hours	Process within 1 hour of collection. Immediately after processing store at -70°C or colder.

	108-132 hours after birth (LDMS Vst/Vst Unit= 1 / WK)				
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
Pharmacokinetics (Washout)	K2EDTA blood (0.25mL)	РКW0352	1 x 0.1mL (all plasma)	BLD/DPE/PL1 Time: X Time Unit: Hours	Process within 1 hour of collection. Immediately after processing store at -70 <sup>0</sup> C or colder.

	Week 1-2 after birth (LDMS Vst/Vst Unit= 1 OR 2 / WK)				
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
Hematology	EDTA blood (0.5mL)	LBW0093	N/A	N/A	Send to local lab ambient
Chemistry	SST or Red Top blood (1.0mL)	LBW0093	N/A	N/A	Send to local lab ambient
Pharmacokinetics (Washout)	K2EDTA blood (0.25mL)	PKW0352	1 x 0.1mL (all plasma)	BLD/DPE/PL1 Time: 0 Time Unit: Random	Process within 1 hour of collection. Immediately after processing store at -70°C or colder.

Week 6 after birth-No specimen Collection at this visit					
Evaluation	Specimen	CRF	Aliquots	LDMS Code	Special Notes
N/A	N/A	N/A	N/A	N/A	N/A

#### Section 5: Helpful Links and Shipping Addresses

Prepare and ship specimens in accordance with IATA regulations and ACTN Guidelines for Category B substances. The ACTN Shipping Guidelines are posted on the HANC public website under Information for ACTG and IMPAACT Labs.

http://www.hanc.info/labs/labresources/Pages/informationActgImpaactLabs.aspx

U.S. Shipping of	U.S. Shipping of	Non-U.S. Shipping of	Non-U.S. Shipping of
DBS for genotyping:	Plasma for pharmacokinetics :	DBS for genotyping:	Plasma for pharmacokinetics :
Stephen A Spector, M.D. University of California, San Diego Department of Pediatrics Division of Infectious Diseases Stein Clinical Research Bldg. Room 430 Attn: Rodney Trout	Edward Acosta, Pharm. D. University of Alabama at Birmingham Attn: Kedria Walker Division of Pharmacology 1670 University Blvd. Volker Hall Room 270	Pass-through shipment to BRI with final destination as LDMS Lab 173: BRI Repository Attn: John C. Ward	Pass-through shipment to BRI with final destination as LDMS Lab 191: BRI Repository Attn: John C. Ward
9500 Gilman Drive, Mail Code 0672 La Jolla, CA 92093-0672 Office Phone : 858-534-7055 Fax : 858-534-7411	Birmingham, AL 35294-0019 Phone: (205) 975-2461 Fax: (205) 934-6201 Email: <u>kedria@uab.edu</u>	Biomedical Research Institute (BRI) 12264 Wilkins Ave., Bay F Rockville, MD 20852	Biomedical Research Institute (BRI) 12264 Wilkins Ave., Bay F Rockville, MD 20852
Email : saspector@ucsd.edu LDMS Lab # 173		Phone (301)881-7636 Fax (301)770-9811 Email: brirepository@aol.com	Phone (301)881-7636 Fax (301)770-9811 Email: brirepository@aol.com
	LDMS Lab #191	LDMS Code: 999	LDMS Code: 999

Section 6	Section 6: Revision History				
Protocol	LPC Change	Page(s)	Description		
Version	Date				
2.0	21MAR2014		Cohort 1 SoEs and references removed throughout.		
2.0	21MAR2014	1-2	Table of Contents added.		
2.0	21MAR2014	3	Protocol Non-Standard Reagents list added.		
2.0	21MAR2014	3,7	Maternal and Infant Cohort 2 SoEs inserted.		
2.0	21MAR2014	3,7	Headings added to correspond to requested information in Table of Contents.		
2.0	21MAR2014	6	Included LDMS Code Time in Time/Time unit.		
2.0	21MAR2014	5-6, 10-	Removed (P1097) after each CRF #.		
		13			
2.0	21MAR2014	5, 10	Specimen processing instructions updated throughout.		
2.0	21MAR2014	5-6, 10	Special Collection Notes edited to include processing time throughout.		
2.0	21MAR2014	10-13	Infant CRF PKW0352 added.		
2.0	21MAR2014	7	Section 5 removed after Maternal Section 4 and only listed after Infant Section 4.		
2.0	21MAR2014	14	Section 5, Shipping instructions edited for U.S. and Non-U.S. Processing Labs.		
2.0	21MAR2014	1-11	Renamed sections to distinguish between Maternal and Infant sections.		
2.0	21MAR2014	15	Section 6 added.		
2.0	21MAR2014	16-18	Section 7 added.		
2.0	21MAR2014	5-6, 10-	DPE Substituted for EDTA for Pharmacokinectic specimens		
		13			
2.0	21MAR2014	10,12	DPE added as option for collection of Genotyping specimen		

#### **Section 7: Appendices**

#### Appendix I: BRI Pass-through Instructions

This process is to be used ONLY if a Material Transfer Agreement (MTA) is required for the shipment of P1097 specimens and one is not in place with the protocol testing labs LDMS lab #173 or #191.

- 1. When creating the LDMS shipping batch, select the appropriate testing laboratory as the shipment destination based on the P1097 LPC.
- 2. When creating the LDMS shipment, DO NOT select lab 999 as the destination.
- 3. Pack the specimens according to network/protocol requirements and address the Saf-T-Pak\World Courier secondary packaging to the final shipment destination of LDMS Lab 173, Dr. Stephen Spector's lab or Lab 191, Dr. Edward Acosta's Lab.
- 4. Place the secondary packaging within a box and address the outer box to the BRI repository:

Biomedical Research Institute c/o John C. Ward, Jr. 12264 Wilkins Avenue, Bay F Rockville, MD 20852 Phone: (301)881-7636 Fax: (301)770-9811 Email: brirepository@aol.com

- 5. Be sure to include the correct "Pass Through" shipping notice inside the box addressed to BRI.
- 6. Be sure to send the LDMS shipping file and any necessary CRFs to the testing lab.
- 7. Indicate in the Explanation box on the shipment notice form that this is a "Pass-Through Shipment" going to LDMS Lab 173, Dr. Stephen Spector's lab or Lab 191, Dr. Edward Acosta's Lab.

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Appendix 2: Shipping Notice for Using BRI as Intermediate Destination to Lab 191

## P1097 <u>PK</u> Pass-Through Samples

### LDMS Inventory/BRI Storage Not Required

# Refresh dry ice as appropriate and ship to <u>LDMS Lab #191</u>:

(Shipments should be scheduled for arrival on Tuesday through Thursday only)

University of Alabama at Birmingham ATTN: Kedria Walker Division of Pharmacology 1670 University Blvd Volker Hall Room 270 Birmingham, AL 35294-0019

> FAX: (205) 934-6201 PHONE: (205) 975-2641 EMAIL: <u>Kedria@uab.edu</u>

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Appendix 3: Shipping Notice for Using BRI as Intermediate Destination to Lab 173

## P1097 <u>DBS</u> Pass-Through Samples LDMS Inventory/BRI Storage Not Required Refresh dry ice as appropriate and ship to LDMS Lab #173:

(Shipments should be scheduled for arrival on Tuesday through Thursday only)

University of California, San Diego ATTN: Rodney Trout Department of Pediatrics Division of Infectious Diseases 9500 Gilman Drive, Mail Code 0672 Stein Clinical Research Bldg. Room 430 La Jolla, CA 92093-0672

> FAX: (858) 534-7411 PHONE: (858) 534-7055 EMAIL: <u>saspector@ucsd.edu</u>