



PT Document No. NCR-SD-PT-AF

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF HEALTH
EAST AVENUE MEDICAL CENTER
NATIONAL REFERENCE LABORATORY

EAST AVENUE, DILIMAN, QUEZON CITY 1101
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www.doh.gov.ph/nrl

**PROFICIENCY TESTING PROGRAM FOR DRUG SCREENING LABORATORY
ACKNOWLEDGEMENT FORM**



Instructions:

- (1) Please type or print entries.
- (2) Please read carefully the instructions.
- (3) Please submit the completed result form within 48 hours of receipt of the samples thru mail to:
Dr. Socorro C. Yañez
National Reference Laboratory
East Avenue Medical Center
East Avenue, Diliman, Quezon City 1101
- (4) **Submit Online** the completed result form within 48 hours to: www.nrleamcdoh.org
You can also download PT forms at the above web address.

Name of Laboratory:	Laboratory ID Code:
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Head of the Laboratory:		
Family Name	First Name	Middle Name

Complete mailing address of the Laboratory:		
Number	Street	
City	Province	Region
Tel Number:	Fax Number:	E-mail address:

Please check the information on the status of sample received:

The samples were shipped with intact sealed mail pouch	___ Yes	___ No
Each sample in the vial appears to be urine samples in color (yellow to orange)	___ Yes	___ No
Each sample vial is labelled legibly	___ Yes	___ No
Each sample vial is sealed tight	___ Yes	___ No
Each vial contains 3 mL sample	___ Yes	___ No

In case you answered NO to any of the questions above, please call NRL-EAMC immediately.

Look for Ms. Maricar B. Aggarao or Ms. Augusto B. Misolas at (02)433-06-73 or (02)4357136 to inform them of the condition of the samples as received.

Additional Comments/Remarks:		
This is to certify that the sample package was received in good condition as described above: (Signature over Printed Name of Receiving Person)	Time received by the Lab	Date received
Head of Laboratory (Signature over Printed Name)		