



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF HEALTH
NATIONAL REFERENCE LABORATORY
EAST AVENUE MEDICAL CENTER
ISO/IEC 17025 ACCREDITED TESTING LABORATORY
TESTING. ASSURING. LEADING.



East Avenue, Diliman, Quezon City • (+632)435 7136 • (+632)433 0673 • (+632)928 0611 loc 601
contact@nrleamcdoh.org • <http://nrleamcdoh.org>

**PROFICIENCY TESTING PROGRAM FOR WATER TESTING LABORATORY
ACKNOWLEDGEMENT FORM**

Instructions:

- (1) Please read carefully the instructions.
- (2) Type or print entries.
- (3) Submit the completed acknowledgement and result form within two (2) weeks from receipt of the samples thru mail to
Dr. Socorro C. Yañez, MD, FPSP
National Reference Laboratory
East Avenue Medical Center
Diliman, Quezon City 1101
- (4) Submit also thru online the completed result at <http://nrleamcdoh.org>
You can also download PT forms at <http://nrleamcdoh.org>

Name of Laboratory:		Laboratory ID Code:	
Accreditation Number (Please indicate):			
Head of the Laboratory:			
Family Name	First Name	Middle Name	
Complete mailing address of the Laboratory:			
Number	Street		
City	Province	Region	
Tel Number/Mobile 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 vial is labeled legibly	___ Yes	___ No
Each sample vial is intact and free of contaminant.	___ Yes	___ No

In case you answered NO to any of the questions above, please call NRL-EAMC immediately at (02) 433-06-73 and look for Ms Evangeline Castillo or Ms Shiela Salo to inform them of the condition of the samples.

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