

TOXICOLOGY SUBMISSION FORM

Instructions & Information:

- 1. Form Submission: Email toxicology@cfsre.org attention to Alex Krotulski and Sara Walton
 - a. Correspondence is required for approval of specimen submission(s)
 - b. If submitting multiple specimens, submit separate forms for each specimen
- 2. Matrix: Blood is preferred

Expanded Drug Screening: Esoteric Testing (*specify*):

- a. Urine, serum, plasma, vitreous, and other matrix types are accepted with prior approval
- 3. Volume Requirements: Qualitative Testing Only: 2-3 mL; Quantitative Testing (if applicable): 4-5 mL
- 4. Retention: Specimens will be discarded 6-weeks after final report is issued, unless prior arrangements are made
- 5. Turnaround Time: Approximately 1 month; however, timing will vary dependent on case complexity
- 6. Packaging and Shipping: Ship specimens to the below address
 - a. Specimens must be stored in leak-proof containers; secondary storage in a leak-proof bag is required
 - b. Specimens should be shipped in sturdy packaging with ice packs or on dry ice
 - c. Overnight shipping is preferred (Monday through Wednesday is recommended; no weekend deliveries)

Attn: Alex Krotulski / Sara Walton CFSRE 206 Welsh Road Horsham, PA 19044

	SUBMITT	TING AGE	NCY INFORMATION	
Submitting Agency:				
Agency Mailing Address:				
Contact Name:				
Contact Email for Reporting:				
	SPECIME	N & TEST	ING INFORMATION	
Agency Case #:			Date:	
Case History (if available):				
Specimen Return Requested?	Yes	No	Matrix:	
Testing Requested (Check all th	at apply):			
NPS Testing (specify):				
Synthetic Cannabinoid Testing:				