



SUSTAINING QUALITY OF LIFE
THROUGH RESEARCH™

Main Address

2869 Cold Springs Rd
Placerville CA 95667
T 877-900-STEM (7836)
F 530-380-3800
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Urgent Reply ASAP Please Comment Please Review For Your Information

Comments:

Next Days Schedule: Potential Patients: US/MAB _____ PT _____ ROB _____ AB _____
Time of First Appt: _____

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Clarissa
12/06/12

15

Holly O'Donnell
Contract
Docs

Fax

Urgent

Reply ASAP

Please Comment

Please Review

For Your Information

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Gestation Tracking Log

Name	Date	Location					
		<11.6wks	12-13.6wks	14-15.6wks	16-17.6wks	18-19.6wks	Total
Holy/Clarissa	12/6/12	18	2	0	0	0	20
		Total					
Number of Appointments Scheduled		18	2	0	0	0	20
Number of Appointments Kept		11	2	0	0	0	11
Number of Consents Signed		1			1		
Number of Consent with Non Procurable Tissues – No Identifiable Organs*		0					
Number of Consents with Procurable Tissues but no Researcher*		1					

* High request organs such at Liver, Thymus, Pancreas, Heart



Researcher Procurement Form

DATE 12/6/12

Delivery Instructions: Billed/Recipient Billed/StemExpress

Ship To:

Name CINDY CISNEROS/DESIREE HOLLEMON Email: ccisneros@ariosadx.com
C/O ARIOSIA DIAGNOSTICS Email 2: dhollemon@ariosadx.com
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Address 2 Phone # 503-686-8972
City SAN JOSE State CA Zip 95138 Cell Phone
Country USA Alt. Phone #

FedEx Account 3334-0773-6 Tracking # 8010 3927 3797
Ref# PO#449 Local Delivery: AM PM Deliver By

Procurement Tech 26 Additional Techs 23 Location Concord

ID#	TIME	PATIENT#	SPEC#	GEST	SPECIMEN	SEX	COMMENTS
01B	0830	1206122601B	NP002121	10.2wks	Maternal Blood	F	40cc Age: 24 Ethnicity: White



TDx-003 Case Report Form

CHECK EACH ITEM AFTER COMPLETING	
1. Collect blood tubes and invert each tube 10 times	<input checked="" type="checkbox"/>
2. Complete all items on this form	<input checked="" type="checkbox"/>
3. Prepare blood samples to send to sponsor	<input checked="" type="checkbox"/>

- Date of Blood Draw (MM/DD/YYYY, example 10/31/2010): 12/06/2012
- Time of Blood Draw (HH:MM, example 13:30): 08:30
- Number of blood tubes collected: 4
- Clinical site name: STEW
- Name of person completing this form: 26
- Mother's age (years): 24 7. Current Gestational age: 10 weeks 2 days
- Ethnicity of subject (check all that apply):
 White Hispanic Black Asian Other, specify: _____
- Date of previous study blood draw, if applicable (MM/DD/YY): N/A

Comments:

Questions? Call (408) 299-7500 or email clinical@ariosadx.com