



Color's Backup Paper Intake Process

In the event that your collection site loses internet connectivity, we've outlined an backup paper intake process you can follow until you're able to get back online.

1. Complete the paper intake form for each participant, accurately **documenting the barcode** with the participant information
2. Verify with the participant that all information on the paper form is accurate
3. Bag the paper form with the sample tube into an individual collection bag

Once you are able to get back online, please collect **all** bags that contain both the paper form and the sample tube:

4. Open every bag and **input all the information from the paper form into the onsite tool**, including scanning or typing in the barcode tied to that form
5. Verify that the barcode scanned or typed in matches the barcode on the paper form
6. Once the information has been input into Color's system, shred and discard all paper forms securely

See next page for form



Color Backup Intake Form

1. Sample Information	Details
Barcode Information	
Collection Date	
Collection Site	
Collection Time (optional)	
First Name	
Last Name	
Date of Birth (MM/DD/YYYY - must be correct to access results)	
Home Zip Code	
Sex: M/F	
Ethnicity:	
If Patient is a Minor	
Parent/Guardian Name (First and Last)	
Phone Number (necessary to get results. If minor, please enter parent/guardian phone number)	
Email (optional)	
	<p>I attest that the patient has the full capacity to understand the risks and benefits of testing, which I have explained or which have been provided or made available to the patient separately. I have obtained verbal consent from the patient (directly or through a translator or authorized representative)</p> <p>If minor: I have obtained verbal consent from the minor's parent/guardian and I attest that the consenting individual has the full capacity to understand the risks and benefits of testing, which I have explained or which have been provided or made available to the individual separately.</p>

* **DO NOT SEND THIS PAPER FORM TO THE LAB***. *The lab will not process the collected test sample if it is received with this form.*

****IMPORTANT CONFIDENTIALITY NOTICE****: This document, when completed, contains confidential, protected health information. It is intended only for treatment purposes. Once the information in the form has been transmitted to the processing laboratory, you must immediately destroy the document in a manner consistent with HIPAA, meaning it must be unreadable, indecipherable, and otherwise unable to be reconstructed. You shall be solely responsible for failure to comply with these instructions.