



HCHS/SOL- Family Lifestyle Outcomes Research

Saliva Biospecimen Collection (SSWB)

QXQ

8/19/2019

General Instructions

See MOP Chapter 11 Saliva Swab Collection information for details on collecting the sample.
Print out a copy of the SSWB pdf form and complete by hand at the time of swab collection.

QxQ Instructions

Administrative Information

Items 0a and 0b, enter the completion date and your staff ID on the day you complete this procedure.

Item 0c: is the Child ID, prefilled by CDART upon form creation.

Item Label barcode box: affix the Child ID and Lab ID barcodes in this section on the day the procedure is completed.

Item 0d: Use the provided hand scanner and scan the Child ID barcode into CDART

Item 0e: Use the provided hand scanner and scan the Lab ID barcode into CDART

A. Saliva Collection Information:

1. Did your child eat, drink, chew gum, or brush their teeth in the last 30 minutes?
0=No
1=Yes **[Wait 30 minutes before collecting sample]**
9=Don't know **[Wait 30 minutes before collecting sample]**
2. Will your child be able to spit into a collection tube?
0=No **[If No or Don't know, use OGR-675 tube to collect an assisted sample]**
1=Yes **[If Yes, use OGR-600 tube to collect an unassisted sample]**
9=Don't know

B. Saliva Collection:

3. Date of saliva collection
Enter date in a MM-DD-YYYY format
4. Collection tube used:
1=OGR-600 (unassisted)
2=OGR-675 (assisted)
5. Collection start time:
Enter time in 24-hour format, i.e. 14:00 for 2:00pm. Range for collection times is clinic hours, between 7am and 5 pm.
6. Collection end time:
Enter time in 24-hour format, Range for collection times is clinic hours, between 7am and 5 pm.



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7. Any saliva collection incidents or problems?

0=No [If No, go to Question 9]

1=Yes [If Yes, specify in Question 8]

8. Saliva collection incidents – document problems: (Mark all that apply)

0=No

1=Yes

Sample not collected

Partial sample collected

Blood in sample

Food particles or other

Contaminants in sample

Other, specify: _____

If a saliva sample was not collected, **END FORM**. If a partial or contaminated sample is collected, proceed with storage and shipping of the sample. Doing so will count towards a Complete study visit on the Checklist (CHKE).

C. Saliva Storage:

9. Were there any problems with storage of saliva at room temperature before shipping to the Human Genetics Center Laboratory?

0=No

1=Yes

9a. If Yes, describe incident or problem: _____