



DNA & SEROLOGY UNIT (DNA)

SOP/WS/L4/043	Sample Submission Form for Dead Body Identification Through DNA Profiling	Issue on	27-06-2019	Revision	1.0
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Read the contents of this form carefully before submission

THIS FORM MUST BE FILLED IN PROPERLY BY MLO AND SHALL BE SUBMITTED ALONG WITH SPECIMEN(S), OTHERWISE SAMPLE(S) WILL NOT BE ACCEPTED.

- **ONLY SINGLE MOST SUITABLE SAMPLE MAY BE SELECTED AND SUBMITTED FOR DNA PROFILING.**
- **Sample submitted in a Jar/Bottle and sealed with Plaster of Paris shall NOT be accepted.**
- **Sample(s) preserved in formalin shall NOT be accepted.**

PMR No.	
Medicolegal Examiner	
Phone Number	
Email Address	
Hospital Name and Address	

Serial No.	SAMPLE	CHECKLIST
1	Buccal swabs (if the corpse is fresh and head intact) Or Blood sample	<input type="checkbox"/> Swab air dried <input type="checkbox"/> Or blood collected in vacutainer (purple colored lid EDTA tube) <input type="checkbox"/> Packaged in paper envelope <input type="checkbox"/> Labeled with PMR No., item name, initials of doctor and date <input type="checkbox"/> Envelope sealed with tape and initialed with permanent ink (half initials on the tape and half on the envelope)
2	Long bone (for decomposed or disintegrated bodies)	<input type="checkbox"/> No flesh or soft tissue attached <input type="checkbox"/> Piece of bone no longer than 6 inches long <input type="checkbox"/> Each item packaged separately in cardboard box or a breathable container <input type="checkbox"/> Labeled with PMR No., item name, initials of doctor and date <input type="checkbox"/> Do not preserve in formalin or any other preservative <input type="checkbox"/> Packaging sealed with tape and initialed with permanent ink (half initials on the tape and half on the container)
3	Nail/teeth	<input type="checkbox"/> No flesh or soft tissue attached <input type="checkbox"/> Intact tooth (with root). Disintegrated or broken tooth is not acceptable <input type="checkbox"/> Air dried <input type="checkbox"/> Each item packaged separately in cardboard box or a breathable container <input type="checkbox"/> Labeled with PMR No., item name, initials of doctor and date <input type="checkbox"/> Do not preserve in formalin or any other preservative <input type="checkbox"/> Packaging sealed with tape and initialed with permanent ink (half initials on the tape and half on the container)
4	Skin/Flesh (Only if the aforementioned samples are not available) or in cases of explosion/mass disaster or if the aforementioned serial no. 1-3 samples are not available)	<input type="checkbox"/> Small sample size (~5x5 cm ²) <input type="checkbox"/> Each item packaged separately in cardboard box or a breathable container <input type="checkbox"/> Labeled with PMR No., item name, initials of doctor and date <input type="checkbox"/> Do not preserve in formalin or any other preservative <input type="checkbox"/> Stored immediately and transported at 4°C temperature <input type="checkbox"/> Packaging sealed with tape and initialed with permanent ink (half initials on the tape and half on the container)
5	Fetus	<input type="checkbox"/> Stored immediately and transported at 4°C temperature <input type="checkbox"/> Labeled with PMR No., item name, initials of doctor and date <input type="checkbox"/> Do not preserve in formalin or any other preservative <input type="checkbox"/> Packaging sealed with tape and initialed with permanent ink (half initials on the tape and half on the envelope or container)