

# Client Checklist

**What we would require to be provided by the client**



## 1. Clinic Information

1A	Confirmation that a consent/ authorisation to release form is signed and in place with the releasing clinic.	
1B	Full address, contact telephone and e-mail details of the releasing and receiving clinics.	
1C	Clinical paperwork (probably will be provided by the releasing clinic when we collect the samples) – freeze dates/ codes, thaw protocol, blood tests.	
1D	The screening status of the samples – are they screened for HIV, Hep B and C? Not a problem if they are, we just need to know.	
1E	Settle all outstanding fees with the releasing clinic. They will not release your samples otherwise.	

## 2. Client Information

2A	Client's full name – if the releasing clinic know you by another name we'll need that as well.	
2B	Client's contact details – full address, contact numbers and e-mails.	
2C	Date of Birth (DOB).	
2D	The patient's treatment date – as a guide.	
2E	Please complete and return our Consent Form – scan/e-mail it back.	
2F	Finally, have you read our Terms and Conditions of Trading?	



Please complete and print off for records and send a copy to  
courier@aeromedevac.ie