

SPECIMEN TRANSFER DATA

To Be Completed by the Transferring Clinic



Transferring Clinic: _____

Patient(s) Name: _____

PLEASE ATTACH COPIES OF PATIENT RECORDS

Were these specimens frozen via vitrification? Yes No

Have any gamete providers contained in this shipment tested positive for Hepatitis, HIV, Syphilis, West Nile Virus, COVID-19 or other relevant communicable disease agent/disease?

Yes* No * If yes, contact ReproTech for potentially infectious shipping arrangements.

Semen Surgically Retrieved Sperm and/or Testicular Tissue Donor Semen Ovarian Tissue Plasma Serum

Container Type: vials straws vit device: _____ (i.e. Cryotip, etc)

Labeling specific to Date

Cryopreservation Date: _____	# of vials/straws _____	_____
Cryopreservation Date: _____	# of vials/straws _____	_____
Cryopreservation Date: _____	# of vials/straws _____	_____
Cryopreservation Date: _____	# of vials/straws _____	_____
Cryopreservation Date: _____	# of vials/straws _____	_____
Cryopreservation Date: _____	# of vials/straws _____	_____

Total # of Containers (i.e. Vials\Straws\Vit Devices): _____

Total # of Canes: _____ Labeling on canes: _____

Embryos Oocytes

Container Type: vials straws vit device: _____ (i.e. Cryoloop, etc)

Labeling specific to Container

First Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Second Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Third Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Fourth Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Fifth Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Sixth Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Seventh Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Eighth Container:	Cryo Date: _____	# of embryos\oocytes _____	_____
Ninth Container:	Cryo Date: _____	# of embryos\oocytes _____	_____

Total # of Containers (i.e. Vials\Straws\Vit Devices): _____

Total # of Canes: _____ Labeling on canes: _____

Please Print: _____
Authorized Staff Member Name Email Phone

The Cryostorage Experts

Connecticut 203-816-5598 • Florida 954-570-7687 • Minnesota 651-489-0827 • Nevada 775-284-2795 • Texas 469-547-2399