

**Other Species - Biological Sample Collection Form**

SureScreen Scientifics

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**GREAT CRESTED NEWT (GCN) FORM**

**INSTRUCTIONS FOR SAMPLE COLLECTION**

Open kit and read through all of the sampling instructions before commencing work. Wear sterile gloves.

**Fecal, Carcass** or **Plant** Samples: Please use the tube provided, using the spatula as an aid if necessary.Close the lid and shake vigorously for 3 seconds to mix the sample with the DNA preservative. *Note: The sample amount is not critical as the technique is extremely sensitive. Collect as much sample as possible whilst making sure the tube clicks closed.*

**Liquid** Samples: Use the swab provided and place back into the tube. The sample will naturally dry on the swab, preserving the DNA. For dried samples, it may be necessary to wet the sample by dipping the sterile swab in the preservative solution and rubbing the sample area to soften and then collect some of the sample onto the collector swab. Add more liquid to target area as required. *Note: Do not put the swab down onto a surface even if this area looks clean.*

**Hair** Samples: Use the clear plastic bag provided. **Unknown** Sample: A judgement is to be made depending on if the sample is solid (use Eppendorf tube) or liquid (use swab).

Samples should be kept refrigerated if stored for extended periods prior to transportation where

possible to reduce the risk of DNA degradation. Seal the kit closed with the evidence seal.

Post in royal mail post box, postage is already paid.

**\*SERVICE *(Please Tick)***

**Standard**:

Results to be sent within

10 working days of sample receipt

 **Fast** **Track**:

Results to be sent within

5 working days of sample receipt

**RELEVANT NOTES**

**This form is available to download and edit as a word document at: www.surescreenscientifics.com/edna/batid**

**\*NAME:** …………………………………………………………..……………………. **\*COMPANY:** ……………………….……………………………

**\*EMAIL:** …..……………………………………………………..…………………………………………………………………………………………………..

**\*INVOICE ADDRESS:** ……………………………………………………………………………………………………………………………………………

**\*TEL:** …………………………………………………………….. **\*PURCHASE ORDER** ……………………………………………………………………

*Note: Please include a PO for this work, analysis will NOT be started until a valid PO has been received. When samples are sent in batches, each individual PO will be its own report and invoice. The report can be sent to multiple emails if required.*

**LAB SAMPLE ID:**

**\*SAMPLE TYPE *(Please tick if known)***

**Animal** Fecal Blood Unknown/other

Urine Semen

Hair Carcass (skin, flesh, bone, nail)

 **Plant**

 Leaf Root Other (please state)

**OTHER** …………………………. **OS REF:** …..………………………………...

**\*SITE NAME** ………………………………………………………………………...

**\*Required Fields**

**SUSPECTED SPECIES**

1. ……………………………………………………………………

2. ……………………………………………………………………

3. ……………………………………………………………………

*Note: If you have an idea of any species the sample may belong to, please write them here.*

**TARGET SPECIES**

………..…………...…………………………………………………………

*Note: If you are looking for a specific species, but are unsure if the sample belongs to it, please write it here.*