



# GENERAL CHAIN OF CUSTODY

**This COC may be submitted electronically to [Notifications@GillsonTesting.com](mailto:Notifications@GillsonTesting.com)**

Sample Submission – Please ship samples with Priority Overnight or Standard Overnight Shipping. **For Saturday delivery, make prior arrangements with Gillson Testing and choose the Saturday Delivery/ First Priority overnight or Early AM options.** Ship samples according to storage requirements. If the samples require refrigeration, ship them in an insulated container with ice packs. Do not allow ice packs to come in contact with samples. Include a return shipping label if you would like your ice packs and box returned.

Ship to: Gillson Testing Receiving Department 4125 Independence Dr Suite 1 Schnecksville, PA 18078      Phone: 484.550.7709

Company Name		Date	
Submitted By (Signature)		PO#	
Contact Name, Name and email of Person Sampling and/or Shipping		Report to Name/Email	
Is STAT Testing/Setup required?*	<input type="checkbox"/> No <input type="checkbox"/> Yes - Detail Timeline:	Is STAT Reporting Required?*	<input type="checkbox"/> Not Required <input type="checkbox"/> Same Day STAT Report <input type="checkbox"/> 24-hour STAT Report <input type="checkbox"/> 5-day STAT Report
Additional Testing/Reporting Directives:			

\*Subject to additional fees.

Gillson Use Only Extension Number	Sample Name / Sample ID	Controlled Substance?	Sample Date	Lot Number	Test(s) Requested	Product type e.g. parenteral, ophthalmic, etc	Total amount submitted for testing	Requested amount to test	Acceptance Criteria	Guidance Document eg USP 61, 1231	Antibiotic and/or preservative added?	Suitability Testing Completed within the last year?	Storage Temp
		<input type="checkbox"/> Yes <input type="checkbox"/> No									<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes Study #: _____ <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No									<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes Study #: _____ <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No									<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes Study #: _____ <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No									<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes Study #: _____ <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No									<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes Study #: _____ <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No									<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes Study #: _____ <input type="checkbox"/> No	

If anything has changed during the manufacture/processing of any product, please contact Gillson Testing so that it can be determined if the suitability needs to be repeated. Turnaround time: Most samples are set up the same day (EM, Water etc). Stat testing- Gillson Testing will set up the same business day if given 72 hours' notice and received by the agreed upon time. Stat reporting- Gillson Testing will issue a final report within 24 hours or 5 days of completed testing. Next day- Samples will be set up next business day. Weekend or Holiday- Gillson Testing will set up the testing on the weekend or holiday if given 72 hours' notice and if it is received by the agreed upon time. All of these expedited services will incur an additional charge. By submitting samples to Gillson Testing you agree with our terms and conditions. For a copy of the Terms and Conditions, please email Gillson Testing. Please contact Gillson Testing if you would like more information.

To be completed by Gillson Testing			
Report ID:		Received By/Date:	
		Reviewed By / Date	