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Site Number

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Subject Number

## Form MS - Microbiology Susceptibility Central Processing

### 1 MS - Central Processing

1.1	Accession Number		<b>MSREFID</b>										
1.2	Collection Date (DD- <small>MMM</small> - <small>YYYY</small> )	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<b>MSDAT</b>
1.3	Specimen Type	<input type="radio"/> <small>[ENDOTRACHEAL FLUID]</small> Endotracheal Fluid <input type="radio"/> <small>[SWABBED MATERIAL]</small> Swabbed Material	<b>MSSPEC</b>										
1.4	What was the anatomical location where the specimen was collected?	<input type="radio"/> <small>[NOSE]</small> Nose <input type="radio"/> <small>[THROAT]</small> Throat	<b>MSLOC</b>										