

9. Collection of Mouth Swabs

Confirm that test participants have not eaten, drank or smoked for at least 1 hour before collecting the mouth swab.

Complete the requested information on the swab envelope.

Put on the gloves supplied with the kit. It is not necessary for the test participants to wear gloves.

CRYSTAL Health Group Sample Collection Envelope

IMPORTANT - COMPLETE ALL SECTIONS IN BLOCK CAPITAL LETTERS. FAILURE TO DO SO MAY LEAD TO YOUR TEST BEING SUBJECT TO DELAY.

Case Reference _____ Name _____ Date of Birth _____

Relationship: Adopted Father Mother Child Other (please specify) _____



11. Collection of Mouth Swabs

Place the first swab into the test participants open mouth. Rub up and down at least 30 times against the inside of the first cheek. Rotate the swab and move the swab around the whole surface of the cheek.

It is important to apply firm pressure, as you are collecting cheek cells and not saliva. This especially applies to babies and young children, as they do not shed as many cheek cells as adults. Do not be afraid to press firmly on young children. The swab will not hurt them.



12. Collection of Mouth Swabs

Remove the swab from the mouth and air dry by waving through the air for at least 30 seconds, if excess saliva is still observed, repeat for a further 30 seconds. **DO NOT ALLOW THE COTTON TIP TO TOUCH ANYTHING!**

Place mouth swab into the sample envelope that corresponds to the test participant being sampled. Repeat with second swab rubbing against the opposite cheek and place in the same sample envelope.

Repeat the process for all test participants involved.

13. Complete SECTION 5 of the Collection and Consent form.

Section 5 - Sample Collection Checklist

Case Reference: **Test all DNA tests**

All test participant details recorded on this form in full. Including mobile numbers and email addresses.

Consent signatures obtained for all test participants.

2 mouth swab samples obtained for each person.

Sample collector envelopes completed in full and sealed.

ADDITIONAL REQUIREMENTS FOR LEGAL DNA TESTS ONLY

Correct identification obtained and checked for each test participant. Include photocopies of ID with name and photo.

2 person valid photographs obtained and checked for each test participant. SEE BELOW ILLUSTRATION FOR GUIDANCE.

All sample envelopes and identification copies placed and sealed in the C5 legal envelope.

Sample Collector declaration signed in section 6.

If any of the above is not available, call Crystal Health immediately.

COMPLETE FOR LEGAL DNA TESTS ONLY

I have read and understood the instructions, package and notes for my test and have understood the significance of the results. I have signed to signify that I am happy with the service provided and the results obtained.

Name of sample collector _____ Date of sample collection _____

Out of Hours Contacts - do not use in business hours Monday to Friday 09:00 - 17:00 CALL 0161 707 4939 DURING BUSINESS HOURS

Address: _____ Postcode: _____ Tel: _____ Email: _____ Date: _____

Page 1 of 4

CRYSTAL Health Group

OFFICIAL CRYSTAL HEALTH GROUP DOCUMENT

Ensure that the checklist in Section 5 is completed for the test ordered. Legal & POM tests will require different tasks to be completed

Any missing information or incomplete tasks must be resolved at this stage - Call CHG if unable to complete.

Check all yellow boxes have been completed.

14. For LEGAL tests complete SECTION 6 of the Collection and Consent form.

Section 6 - Sample Collection Checklist

Case Reference: **Test all DNA tests**

All test participant details recorded on this form in full. Including mobile numbers and email addresses.

Consent signatures obtained for all test participants.

2 mouth swab samples obtained for each person.

Sample collector envelopes completed in full and sealed.

ADDITIONAL REQUIREMENTS FOR LEGAL DNA TESTS ONLY

Correct identification obtained and checked for each test participant. Include photocopies of ID with name and photo.

2 person valid photographs obtained and checked for each test participant. SEE BELOW ILLUSTRATION FOR GUIDANCE.

All sample envelopes and identification copies placed and sealed in the C5 legal envelope.

Sample Collector declaration signed in section 6.

COMPLETE FOR LEGAL DNA TESTS ONLY

I have read and understood the instructions, package and notes for my test and have understood the significance of the results. I have signed to signify that I am happy with the service provided and the results obtained.

Name of sample collector _____ Date of sample collection _____

Address of sample collector _____

CALL 0161 707 4939 DURING BUSINESS HOURS

Contact 1: Address: _____ Postcode: _____ Tel: _____ Email: _____ Date: _____

Contact 2: Address: _____ Postcode: _____ Tel: _____ Email: _____ Date: _____

Page 2 of 4

CRYSTAL Health Group

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FOR LEGAL DNA TESTS ONLY

Complete section 6 in full. The sample collector declaration is required for all LEGAL tests.

15. Place all documentation & swab envelopes in Legal envelope

FOR LEGAL DNA TESTS ONLY

Complete all details on the C5 size Legal Envelope and review the checklist, ensuring all required documents are present.

CRYSTAL Health Group Legal Documents and Samples

DO NOT TAMPER HIGHLY CONFIDENTIAL

Case Reference Number _____

Out of hours (09:00-17:00) Legal identification documents for all test participants

2 x Person valid photographs for all test participants, verified, dated & signed

Completed sample envelopes for all test participants containing 2 x mouth swabs

Name of person sealing this package _____

Signature _____

Date _____

Crystal Health Group - DNA Legal Test Service - Product of UK



Place the required documents inside the C5 size Legal Envelope and apply the tamper evident label across the sealed flap of the envelope.

16. Administration checks & postage

Collate the following:

- Completed Collection & Consent form.
- Sample envelopes containing mouth swabs.
- Sample Collection invoice - review this document and ensure the payment details are correct.

FOR LEGAL DNA TESTS.

C5 sized Legal Envelope containing :

- Sample envelopes containing mouth swabs for each participant
- Photocopies of legal ID seen
- 2 x passport sized photographs (one which is verified).

Place all of the above in the brown C4 Manilla envelope and return the package using the **Royal Mail Special Delivery Bag provided on the same day as collecting the samples.**

If you require any assistance, please contact Crystal Health on 0800 988 7107, 0161 359 4187 or your out of hours contacts.

Standard Operating Procedure
SOPDNA001S Sample Collection Process for DNA Testing

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Version

Operations Approval

QA Approval

v05.01.26



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Health Group