

**Request Form(s) must accompany this Chain of Custody Form. Write unique ID(s) of request form(s) below.**

Submitting Reference Numbers (if any)					
DHHS NIDS No.	Outbreak Name:	DHHS Outbreak No.	Submitter's Reference No.	Other Reference:	Request Form ID(s)

MDU Laboratory Use Only			
MDU Lab Numbers:	MDU Delivery No.	MDU COC No.	MDU Case No:

Authority under which sample collected			
Public Health & Wellbeing Regs 2009[r75] <input type="checkbox"/>	Food Act (s23) - Complete reverse side <input type="checkbox"/>	Other (Provide details) <input type="checkbox"/>	.....

Reason for Sampling			
Food Poisoning Incident <input type="checkbox"/>	Outbreak Investigation <input type="checkbox"/>	Consumer Complaint <input type="checkbox"/>	Compliance <input type="checkbox"/>
Health Risk <input type="checkbox"/>	Follow-up <input type="checkbox"/>	Other (specify) <input type="checkbox"/>	.....

Details of Person collecting (ie initially securing prior to sealing) Specimen/Sample and starting the Chain of Custody#						
Organisation	Phone	Fax	Name (printed)	Number	Signature	Date & Time

# Unless sample always remains in an individual's physical possession or sight the outer container must be sealed, and, The seal must be tamper proof or tamper evident and bear initials or other mark of the person sealing it.

**Details of how item sealed and by whom ie after collecting.** [sealing makes it tamper proof or tamper evident. If more than 1 seal, provide details on the back, item by item]

Sealed Y/N	Nature of Seal	Initialed Y/N	Seal identifiers	Name & Signature of person who sealed	Date & Time Sealed
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Chain of Custody [to be completed by each person taking or relinquishing custody, including to and from storage]							
Organisation	Ph	Collection/Delivery/ Storage (C/D/S) Events			Collection / Delivery / Storage Address	Name (printed)	Relinquishing/ Accepting Signature
		C/D/S	Date	Time			
		D					
		C/D/S					
		C/D/S					
		C/D/S					
		C/D/S					
		C/D/S					
		Delivered			MDU PHL		

Submitting Authority [organization/authority authorising submission of test]	
	Who from submitting authority authorised this test?

Delivery Description (by MDU) [by MDU. If insufficient space use FM1718. Also check if any details listed on back of form ]					
Number of Containers	Sealed Y/N	Seal Tamper Y/N	Seal initialled Y/N	Photo Y/N	Photo Reference

Description, include comment on condition on arrival with respect to temperature ie. on ice, or Room Temperature

FM118 used? Y / N If Y, is condition on arrival as is stated on FM118? Y / N

Accepted by (MDU PHL Staff Member)			
Name	Signature	Date	Time

**Complete This Section for Food obtained under Food Act s23 (tick boxes which apply)**

1. Is the sampler an authorized officer under the Act?(s4, Definitions) (must be Yes)	<input type="checkbox"/>
2. Has the person in charge been advised of the intention to submit for analysis? (s23(1)) (must be Yes)	<input type="checkbox"/>
3. Under the Act, is this sample - Food (S4A), (must be Yes) <input type="checkbox"/> - may it be unsafe (S4D), <input type="checkbox"/> - may it be unsuitable (S4E). <input type="checkbox"/>	
4. Is the sample collected separate or severable objects? (s23(4)) If yes, go to 9.	<input type="checkbox"/>
5. Does a prescribed food standard e.g. Food Standard Code Standard 1.6.1 Clause 5 prescribe in relation to this food, as, for microbiological analysis, an authorized officer "shall not divide that sample into several parts" [Food Standard Code Standard 1.6.1 Clause 3(2)(a)], nor unseal it. If yes go to 8 and specify	<input type="checkbox"/>
6. Has the sample been divided into 3 parts? (s23(2)) If yes, go to 10.	<input type="checkbox"/>
7. Was the sample not divided because (s23(3)) - in opinion of authorized officer, division would render the sample unsuitable or insufficient. <input type="checkbox"/> - division would affect or impair composition or quality and make unsuitable (s23(3)(a)) <input type="checkbox"/> - division would furnish parts insufficient for analysis (s23(3)(b)) <input type="checkbox"/> - division would render the sample in any other ways unsuitable, and if yes, specify why: (s23(3)(c)) <input type="checkbox"/> ..... Go to 10.	
8. Butter Butter made from unpasteurised milk and/or unpasteurised milk products <input type="checkbox"/> Cheese Soft and semi-soft cheese (moisture content >39% with pH>5.0) <input type="checkbox"/> All raw milk cheese (cheese made from milk not pasteurized or thermised) <input type="checkbox"/> Raw milk unripened cheeses (moisture content >50% with pH>5.0) <input type="checkbox"/> Other (specify): <input type="checkbox"/> Milk Dried milk <input type="checkbox"/> Unpasteurised milk <input type="checkbox"/> Meat/Meat Products Packaged cooked cured/salted meat <input type="checkbox"/> Packaged heat and treated meat paste and packaged heat treated pâté <input type="checkbox"/> Fermented, comminuted meat which has not been cooked <input type="checkbox"/> Seafood Cooked crustacean <input type="checkbox"/> Raw crustacea <input type="checkbox"/> Ready-to-eat processed finfish, other than fully retorted finfish <input type="checkbox"/> Molluscs, other than scallops <input type="checkbox"/> Molluscs that have undergone processing other than depuration <input type="checkbox"/> Infant Food Powdered infant formula <input type="checkbox"/> Powdered infant formula with added lactic acid producing cultures <input type="checkbox"/> Spices Pepper, paprika and cinnamon <input type="checkbox"/> Coconut Dried, chipped, dessicated coconut <input type="checkbox"/> Cocoa Cocoa powder <input type="checkbox"/> Cultured seeds Cultured seeds and grains (bean sprouts, alfalfa, etc) <input type="checkbox"/> Egg Pasteurised egg products <input type="checkbox"/> Water/Ice Mineral water <input type="checkbox"/> Packaged water <input type="checkbox"/> Packaged ice <input type="checkbox"/> Go to 10.	
9. For separate or severable objects, has the sample been divided into 3 lots? (s23(4)) Go to 10. If no, why not? .....	<input type="checkbox"/>
10. Has each part or lot been labeled and sealed? If no, why not (s23(4)) ..... <input type="checkbox"/> Has one part or lot been left with the person in charge and one retained (s23(2)(a, b & d) ? <input type="checkbox"/> If no, why not .....	