**Dried Blood Spot (DBS) Viral Load Log Book**

**Clinic Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Date of Specimen Collection**  **(DD/MM/YY)** | **Time of Specimen Collection**  **(HH:MM)** | **ART ID** | **Patient First Name** | **Patient Surname** |
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