Peace Officer to complete	
The undersigned, a duly authorized peace officer of (name	
	od sample be obtained from (name of person
being tested)	
I certify that I have probable cause to believe that the sample	그는 그들은 그렇게 되었다면 그렇게 하고 있는데 가는 가는 가는 것이 되었다면 하고 있다면 하고 있다면 하고 있다면 하고 있다면 하는데
being tested was driving a motor vehicle in violation of Vehicle Code Section 23140, 23152, or 23153.	
Date: AM/PM Location:	
Signature of Peace Officer:	Badge/ID #
Person responsible for blood draw to check all that apply	
The patient has verbally consented to a blood draw for blood clotting disorder (hemophilia) and is not currently	
The patient has not expressly consented and I have infor blood alcohol test as required by law. The patient has no h or taking an anticoagulant that we know of at this time.	
☐ The patient is incapable of verbalizing/understanding at to clotting disorder (hemophilia) or taking an anticoagulant to	
☐ The patient is expressly refusing consent to a blood draw	
my belief, the attempt to obtain a blood specimen would require undue coercion and possible injury to	
the patient or to myself.	
Record of Actions Taken	ACCUSATION OF A CONTRACT WATER AND A CONTRACT OF THE CONTRACT
 Alcohol or other volatile organic disinfectant was not use collected. 	ed to clean the skin where the specimen was
A suitable aqueous disinfectant such as hydrogen peroxide or aqueous benzalkonium chloride (zephiran was used.	
 Blood samples were collected using sterile, dry hypoderivacuum type containers with sterile needles. 	mic needles and syringes, or using clean, dry
Blood tubes were provided by law enforcement.	
 Blood sample was deposited into a clean, dry container which is closed with an inert stopper. 	
 Alcohol or other volatile organic solvents were not used to clean the container. 	
 Blood was gently agitated to mix with an anticoagulant are 	nd a preservative.
Blood draw was witnessed and received directly by Officer: .	badge/ID #
Upon request of the Peace Officer noted above, I have with person, on (date): at (time): /PM test for peace officers.	[1] The first of the control of the first of the control of the co
Signature of person withdrawing blood:	Title:
Witness signature (Peace Officer):	
	IMPRINT I.D. CARD (NAME MRUN CLINIC/WARD)



*WHITE - LAW ENFORCEMENT CANARY - CHART REQUEST FOR SPECIMEN BY PEACE OFFICER

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