



Actionable Insights for
Better Health™

Q² Solutions How Do I...? Guides for Site Coordinators

How Do I Ship Samples? (APAC)

Version 1.0 30 Jun 2020

Global Holiday Schedule

- Q² Solutions will provide your site with details of courier “no-delivery” days and Q² Solutions opening hours in advance of each national holiday.
- Site personnel are recommended to review holiday letters and subject visit dates to come up with contingency plans with regards to subject visits requiring sample shipments.

What action should be taken if there are critical patient visit collections on a holiday?

- Review the holiday letter provided by Q² Solutions to determine if all departments (sample receiving and testing facility) will be closed or if the departments will be operating on skeleton staff.
- Discuss with the CRA/Sponsor if the visit cannot be moved to a non-holiday date.
- Query with the assigned courier local office in time to determine if they will be able to collect and make deliveries on that day. It may also need to be established if customs will be open during that time.
- Discuss with CRA or Q² Solutions assigned project manager on alternative pick up arrangements.

Please note that pickup arrangements are subject to holiday/premium surcharges by the courier that will be charged to the study.

Please contact your local courier office for confirmation that deliveries can be made prior to local or global holidays.

In addition, there may be site and/or country-specific “no-pick-up” days. Please check these days with your local courier office prior to collecting samples.

Import and Export Requirements

Import Requirements

- Selective countries in Asia should hold import permits to allow the supply of laboratory kits to be imported into the country. The responsibility for obtaining an import permit is with the sponsor or the third party working on the behalf of the sponsor. The general timeline to obtain this permit is 4 weeks. Q² Solutions can provide assistance in the form of a template proforma invoice and packing list detailing all the lab kit contents for the full duration of the study.

Export Requirements

- Some countries require export permit for the export of diagnostic samples to Q² Solutions. Q² Solutions can provide assistance by providing information on the sample type and estimated sample export volume.

Courier Information for TNT

Ambient Air Waybill

Kindly ensure the Sender Ref. No. is stated as the same Protocol Name written exactly as indicated on the cover page of this lab manual. If not, kindly amend to the correct Protocol Name

WHITE SECTIONS ARE MANDATORY. PLEASE COMPLETE IN CAPITALS AND PRESS HARD.

1. Sender's Account Number [Grid]

2. Invoice to Receiver **SENDER LIABLE FOR UNPAID CHARGES**

Cross Box and provide receiver's account number → or call Customer Service for correct account details

3. Customer Reference (Information you would like on the invoice (if required)) [Grid]

4. From (Collection Address)
Company Name: _____
Address: _____
City: _____ Postal / Zip Code: _____
Province/Region: _____ Country: _____
Contact Name: _____ Tel. No.: _____

5. To (Receiver)
Company Name: _____
Address: _____
City: _____ Postal / Zip Code: _____
Province/Region: _____ Country: _____
Contact Name: _____ Tel. No.: _____

6. Delivery Address (if different from receiver's address above)
Company Name: _____
Address: _____
City: _____ Postal / Zip Code: _____
Province/Region: _____ Country: _____
Contact Name: _____ Tel. No.: _____

7. Dangerous Goods (Cross correct box)
Does this consignment contain any dangerous goods? Yes No
If yes, please call our Customer Service.

CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE
Your Signature _____ Received by **TNT** (to be completed by TNT)
Date: / / (Day/Month/Year) Date: / / Time: :

CUSTOMER SERVICE 1800-214 1111 **TNT** www.tnt.com

GD 302 153 855 WW
Please quote this Number if you have an enquiry.

8a. Services (Cross one box only to select a Service)

	Documents	Non-Documents	Domestic
Special Express <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9:00 Express <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10:00 Express <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12:00 Express <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Express <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economy Express <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8b. Options (Cross boxes)

Priority
Priority handling from pickup to delivery For Express and Economy Express

Enhanced Liability
For documents and non-documents subject to condition 17 on reverse

Currency: _____ Please provide value details: _____

9. Special Delivery Instructions (Reserved for your instructions (if required))
PACK IN ACCORDANCE WITH IATA PI650

10. Goods Descriptions (If dutiable please complete section 11)

General Description Please put full details on commercial invoice	Number of Items	Weight		Dimensions (cm)		
		Kilos	Grams	Length	Width	Height
BIOLOGICAL SUBSTANCES CATEGORY B, UN3373_PACKAGES						
Total						

11. Dutiable Shipment Details (Complete for dutiable consignments)
Receiver's VAT / TVA / BTW / MWST No. [Grid]

SENDER'S COPY
Please keep for Reference.

Airwaybill Number

Sign and Date

Please call TNT to determine the pickup times for your site. The TNT information and any notes are noted on the courier insert or study starter packs.

Courier Information for TNT

Frozen Air Waybill

- Including combination shipping with dry ice

Kindly ensure the Sender Ref. No. is stated as the same Protocol Name written exactly as indicated on the cover page of this lab manual. If not, kindly amend to the correct Protocol Name

WHITE SECTIONS ARE MANDATORY. PLEASE COMPLETE IN CAPITALS AND PRESS HARD.

1. Sender's Account Number

2. Invoice to Receiver **SENDER LIABLE FOR UNPAID CHARGES**

Cross Box and provide receiver's account number → or call Customer Service for correct account details.

3. Customer Reference (Information you would like on the invoice (if required))

4. From (Collection Address)
Company Name:
Address:

City: Postal / Zip Code:
Province/Region: Country:
Contact Name: Tel. No.:

5. To (Receiver)
Company Name:
Address:

City: Postal / Zip Code:
Province/Region: Country:
Contact Name: Tel. No.:

6. Delivery Address (if different from receiver's address above)
Company Name:
Address:

City: Postal / Zip Code:
Province/Region: Country:
Contact Name: Tel. No.:

7. Dangerous Goods (Cross correct box)
Does this consignment contain any dangerous goods? If yes, please call our Customer Service. Yes No

CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE
Your Signature Received by TNT (to be completed by TNT)

Date: / / (Day/Month/Year) Date: / / Time: :

CUSTOMER SERVICE 1800-214 1111 www.tnt.com

GD 302 153 855 WW
Please quote this Number if you have an enquiry.

8a. Services (Cross one box only to select a Service)
Special Express Documents Non-Documents Domestic
9:00 Express
10:00 Express
12:00 Express
Express
Economy Express
Please contact Customer Service to arrange shipment. For contact and service details, please see brochure. If no service is selected, the Express service will be provided and invoiced.

8b. Options (Cross boxes)
Priority Priority handling from pickup to delivery. For Express and Economy Express.
Enhanced Liability For documents and non-documents subject to condition 17 on reverse. Please provide value details.

9. Special Delivery Instructions (Reserved for your instructions (if required))
PACK IN ACCORDANCE WITH IATA PI650 & PI904 (CLASS 9 DRY ICE UN1845)

10. Goods Descriptions (If dutiable please complete section 11)
Please put full details on commercial invoice

General Description	Number of Items	Weight		Dimensions (cm)		
		Kilos	Grams	Length	Width	Height
BIOLOGICAL SUBSTANCES CATEGORY B, UN3373_PACKAGES						
Stat. No.	Total	Kilos	Grams			

Consignments subject to volumetric measurement. Please refer to our brochure or call Customer Service.

11. Dutiable Shipment Details (Complete for dutiable consignments)
Receiver's VAT / TVA / BTW / MWST No.

SENDER'S COPY
Please keep for Reference

Airwaybill Number

Sign and Date

Weight of dry ice in kilograms.

Please call TNT to determine the pickup times for your site. The TNT information and any notes are noted on the courier insert or study starter packs.

Courier Information for Marken

Ambient and Frozen Air Waybill

- Please Note: Marken will provide detailed instructions for completion of this form in the Marken Starter Packs

MARKEN Marken Singapore
4 Kaki Bukit Ave 1 -, #07-06 -, Singapore, 417939, Singapore

AIRWAYBILL 616X04756457

Shipper		Consignee		Waybill Number	
		Q Squared Solutions Pte Ltd 79 Science Park Drive #04-08 Cintech IV Singapore Science Park One Singapore 118264		616X04756457	
Contact		Contact		Schd Collection	
		Kae Siang Ngo			
Reference		Reference		Client Account	
				SG019	
Telephone		Telephone			
		+65 66021106			

Content Description	Pcs	Range (°C)	Kgs	Packaging	Supplier	Dimensions (cm)			DG	UN	Probe	Rev#
						L	W	H				
BIOLOGICAL SUB CAT B (AMB/FRZ)												
TOTALS		Pieces	Actual Kgs	Volu Kgs	Value (USD)							
					10.00							

Special Instructions		Collected in good order & condition		Received in good order & condition	
		Signature		Signature	
Shippers signature		Printed name		Printed name	
Printed Name		Date		Date	
		Time		Time	
Date		Photo ID Type			

NOTE: The goods described above are accepted in apparent good order and condition (except where noted by shipper or noted above) for delivery to the stated consignee, subject to Marken's Standard Terms and Conditions, available for review at <http://www.marken.com/terms-and-conditions.aspx>, which limit Marken's liability

Air Waybill Number

To contact Marken – refer to information in your starter packs

Sign and Date

FOR FROZEN SHIPMENTS ONLY: Indicate the amount of dry ice in kilograms.

Courier Information for MNX

Ambient and Frozen Air Waybill

MNX
MIDNITE EXPRESS
24 HOURS 1-800-MIDNITE

USA & CANADA 800 MIDNITE
LOS ANGELES... NEW YORK... LONDON... SYDNEY... HONG KONG... BRUSSELS... MELBOURNE... ATLANTA... WASHINGTON D.C... MEMPHIS... CHICAGO... ORANGE COUNTY...

POL NUMBER: 10183339

FROM:
GRANTHAM HOSPITAL
DEPARTMENT OF XX, LEVEL 30X
125 WONG CHUK HANG ROAD
HONG KONG,
Hong Kong
XXXX XXXX

TO:
QUINTILES LABORATORIES
438B Alexandra Road, #07-01/ 04
Alexandra Technopark
Singapore 119968
SINGAPORE

FULL DESCRIPTION OF CONTENTS:
CONTENTS INCLUDE A POLY-CORRUGATED
BIOLOGICAL SUB CAT B
UN3373

SPECIAL INSTRUCTIONS:
PROTOCOL: XXX
SITE: 1234
STUDY: SPXXX
TEMPERATURE: AMBIENT

SECURITY STATEMENT:
I certify that this cargo does not contain any...
PLEASE NOTE:
YOUR LIABILITY IS LIMITED BY THE TERMS OF THE...
SEE REVERSE FOR CONDITIONS

Callouts:
- Site to complete the pick-up date (points to the 'DATE' field)
- Site to complete the piece, weight and declared value information (points to the 'NO. OF PIECES' and 'WEIGHT' fields)
- Site to sign the awb (points to the 'Signature' field)

Footer:
CREDIT TERMS NET 15 DAYS
ORIGINAL INVOICE
SEE REVERSE FOR CONDITIONS

Please call MNX to determine the pick up times for your site. The MNX information and any notes are located on the Courier insert or study starter packs

Courier Information for MNX

Ambient and Frozen Air Waybill

DTW 大田物流 Logistics 大田物流运单

6 0 0 4 5 9 4 2 8 0

始发站: _____ 目的站: _____ 受理日期: _____ 年 _____ 月 _____ 日 _____ 时 运输类型: _____

是否取货: 客户自送 上门取货 是否送货: 客户自提 送货到门 签单返还: 不返单 返大田运单 返随货单据 A B C D

发货人姓名: _____ 电话: _____ 手机: _____ 收货人姓名: _____ 电话: _____ 手机: _____

发货人单位: _____ 收货人单位: _____

发货人详细地址: _____ 邮编: _____ 收货人详细地址: _____ 邮编: _____

_____ 省 _____ 市 _____ 区(县) _____ 省 _____ 市 _____ 区(县)

货物名称	包装方式	货物件数 (件)	实际体积 (m ³)	实际重量 (kg)

发货人签字 (盖章): _____ 年 _____ 月 _____ 日 _____ 时

(请务必阅读背书条款, 您的签字意味着您理解并接受背书条款)

收货人签字 (盖章): _____ 年 _____ 月 _____ 日 _____ 时

客户投保声明: 投保 不投保

货物声明价值 _____ 元 保险费 _____ 元

计费项目	运费	取货费	送货费	增值服务费
金额 (元)				

物流服务费及保险费合计: _____ 元
(大写) _____ 万 _____ 仟 _____ 佰 _____ 拾 _____ 元 _____ 角 _____ 分

结算方式: 现结 月结 到付

付费帐号: _____

备注: _____

取货人签字: _____ 年 _____ 月 _____ 日 _____ 时 送货人签字: _____ 年 _____ 月 _____ 日 _____ 时 承运人联

Airwaybill Number

Sign and Date

Please contact DTW to determine the pick up times for your site. The DTW information and any notes are noted on the courier insert or study starter packs.

Kindly ensure the Sender Ref. No. is stated as the same Protocol Name written exactly as indicated on the cover page of this lab manual. If not, kindly amend to the correct Protocol Name

Courier Information TNT

Ambient/Frozen– Commercial Invoice

Please Note: This is not applicable for domestic shipments

Please use only the pre-printed Commercial Invoice supplied by Q² Solutions.

COMMERCIAL INVOICE				
DATE OF EXPORTATION		EXPORT REFERENCES [i.e. order no., invoice no., etc.]		
SHIPPER/EXPORTER (complete name and address)		CONSIGNEE (complete name and address) Q SQUARED SOLUTIONS PTE. LTD. 438B Alexandra Road #07-01/04 Alexandra Technopark SINGAPORE 119968 Attn: Pre-Analytical Team Tel no. 6602 1103		
COUNTRY OF EXPORT		IMPORTER - IF OTHER THAN CONSIGNEE (complete name and address)		
COUNTRY OF MANUFACTURER				
COUNTRY OF ULTIMATE DESTINATION SINGAPORE				
INTERNATIONAL AIRWAY BILL NO. 1		(NOTE: All shipments must be accompanied by an International Air Waybill)		
NO. OF PKGS.	FULL DESCRIPTION OF GOODS	QTY.	WEIGHT	TOTAL VALUE
2	Biological Substance Category B UN3373 Blood Serum Plasma Urine Other body fluids Biopsies Packed in accordance with IATA Packing Instruction 650 Human material containing no animal material and not of tissue culture origin Transported for diagnostic testing as part of a clinical trial.	3 ____ ml ____ mL ____ mL ____ mL ____ mL ____ mL	4 ____ kg	US\$ 10
TOTAL NO. OF PKGS.			TOTAL WEIGHT	TOTAL INVOICE VALUE
			____ kg	US\$ 10
OF NO COMMERCIAL VALUE; VALUES STATED FOR CUSTOMS PURPOSE ONLY				
I DECLARE ALL THE INFORMATION CONTAINED IN THIS INVOICE TO BE TRUE AND CORRECT.				
SIGNATURE OF SHIPPER/EXPORTER (Type name and title and sign) 5			DATE: 6	

1. Indicate the Air Waybill Number.

2. Indicate the number of packages per shipment.

3. Indicate the volume (in mL) of the samples sent. Please indicate “NA” if a particular sample is not collected, i.e. if only Urine sample is to be sent, indicate “NA” for Blood, Serum, Other body fluids and Biopsies.

4. Indicate the total weight of the package in kilograms.

5. Sign the Performa invoice.

6. Date the Performa invoice.

Courier Information Marken

Ambient/Frozen– Commercial Invoice

Please Note: This is not applicable for domestic shipments

Please use only the pre-printed Commercial Invoice supplied by Q² Solutions/Marken.

PROFORMA INVOICE

SENDER _____

CONSIGNEE _____

REFERENCE: _____ PROTOCOL: _____ STUDY: _____

Complete Description of Goods

Non-Infectious / Non-Hazardous - Biological Substance Category BUN0073

Blood / Serum / Urine / Tissue / _____ (specify) / _____ Samples

Blood: _____ ml each _____ tube/slide(s) Tissue: _____ ml each _____ tube/slide(s)

Urine: _____ ml each _____ tube/slide(s) Serum: _____ ml each _____ tube/slide(s)

Total number of tube/slide(s): _____ Others: _____ : _____ ml each _____ tube/slide(s)

This shipment contains human diagnostic specimens, and is packed in compliance with ICD5 specifications. The samples are of human material containing no animal material and not of tissue culture origin. Human material that was neither inoculated with, nor exposed to infectious agents of agriculture/zoology, including zoonotic agents. These items are to be used for medical research purposes and laboratory testing only.

Number of packages:	=	Piece
Total Gross Weight:	=	Kg
Country of Origin:	=	
Delivery Terms:	=	Incoterms 2010
Terms of Payment:	=	Free of Charge

Marken Airwaybill Number
616X

This shipment has No Commercial Value. Not for sale / resale.
For Customs Purposes only, a USD \$10 can be attributed.

Date	Signature
____/____/____ (dd/mm/yy)	_____

MARKEN Internal Performance

1. Indicate the volume (in mL) of the samples sent. Please indicate “NA” if a particular sample is not collected, i.e. if only Urine sample is to be sent, indicate “NA” for Blood and Serum.
2. Date the performa invoice.
3. Indicate the air waybill number.
4. Sign the Performa invoice.

List of Contents Card

Not Applicable for Domestic Shipments

IATA regulations require that one "List of Contents" card is located between the primary and secondary shipping containers. Check the box beside each component included in the particular shipment.

When shipping ambient specimens, loosely place the card in the shipper, NOT INSIDE THE BUBBLE WRAP BAG.

NOTE: No packaging or shipping materials or instructions or advisories provided by Q² Solutions should be considered as substitutes for "Training Requirements" set forth in IATA Dangerous Goods Regulation 1.5, or for national and/or carrier regulations or restrictions. Any person offering, handling, or transporting dangerous goods must be trained.

"List of Contents"
(This card must remain in box for specimen return)

Diagnostic Specimens (Human)
Glass and/or Plastic Tubes
Tube Separator Bag(s)
Secondary Leakproof Bag
Absorbent Pad
Requisition

(Check One, if applicable)

Dry Ice Insulating Gel Pack Refrigerant Packs

Ambient Shipments – Gel Wraps

Gel Wrap should be shipped refrigerated or at room temperature.

*As **external** temperatures and seasonal variances differ from country to country, please refer to the following guidelines on using your gel packs:*

External Temperature $\geq 25^{\circ}$ C (77° F) REFRIGERATE the gel wrap.

NOTE: Refrigerate the gel wrap for a period of 24 hours prior to use.

External Temperature $< 25^{\circ}$ C (77° F) - Store the gel wrap at ROOM TEMPERATURE – Do not refrigerate the gel wrap.

NOTE: Ambient / Frozen Combo Shipper –
Gel Wrap should be used **ambient** year round.

Refrigerated Shipments – Gel Wraps

Gel Wrap should be shipped frozen or refrigerated.

*As **external** temperatures and seasonal variances differ from country to country, please refer to the Laboratory Manual for instructions on preparing refrigerated shipments.*