

## Oral Specimen Pick-Up Request

To request an oral specimen pick-up, please complete this form and email to:

[strlclientservices@uthscsa.edu](mailto:strlclientservices@uthscsa.edu)

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Service Requested:       FedEx label                       Courier pick-up

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### Client Information (required)

Date:	Clinician's Name (Full Name):	
Clinician's Address (Street, City, State, Zip):		
Requested by (Full Name):	Phone #:	Email:
Hours of Operation:	Special Instructions (i.e., closed for lunch 12:00-1:00 pm):	

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### Note:

- Local pick-up request made before 12:30 pm will be picked up before the end of the current business day.
- Local pick-up request made after 12:30 pm will be scheduled for the following business day.
- FedEx label request cut off time is 3:00 pm (labels will be issued at approximately 10:30 am, 1:30 pm and 3:30 pm.).