SOCA

LSOCA Photograph Transmittal Log

Purpose: Record shipment, patient, and photograph information for all fundus photographs sent to the FPRC.

When: Whenever fundus photographs are sent to the FPRC.

By whom: Person responsible for preparing photographs for shipment and FPRC personnel.

Instructions: Record Visit ID code, Eye(s) photographed, and Date photographs taken on corresponding lines. Send a copy of this form along with the fundus photographs to the FPRC.

A.	Shipment information	D. FPRC use			
1.	Clinic ID#:	12. Date received:		month	year
2.	Clinic ID code:	13. Received by:	 ,		
3.	Date fundus photographs shipped:	14. Date entered:	_		ID
			day	month	year
	day month year	15. Entered by:			ID
4.	ID of person preparing shipment:	16. Confirmation of Fax transmission received:			
5.	Signature of person preparing shipment:			(Yes)	(No)
6.	Contact regarding this shipment				
	Name:Phone:				
	E-mail:				
В.	Patient information				
	Patient ID#:				
8.	Patient name code:				
c.	Photograph information				
9.	Image media: ☐ Film ☐ Digital				
	Eye(s) Study Name Visit ID code	s) photographed and date photos taken (day-month-year) (circle at least one)			
10	. LSOCA RE	LE _			.
Coi	nments:				