California Department of Public Health
Laboratory Field Services
850 Marina Bay Parkway
Bldg. P, 1st Floor
Richmond, CA 94804-6403

ASSISTED REPRODUCTIVE TECHNOLOGY (ART) QUESTIONNAIRE

The following questions need only to be answered for tissue banks performing ART procedures.

1. If the tissue bank does not perform oocyte retrieval and/or semen collection as part of the ART procedure or otherwise, at its location(s), complete the following items.

Facility name where oocyte retrieval and/or semen collection is performed		Telephone number ( )
Address (number, street)	City	ZIP code

2. List names, titles, and qualifications of persons responsible for collection, processing, storage, or distribution of tissue by the tissue bank. Attach C V or resume of personnel not duplicated on Tissue Bank Personnel Report (LAB 169).

Last Name	First Name and Middle Initial	Qualifications (Include Titles, If Any)	Days/Hours Worked