



NORTH POINT
Health & Wellness Center

Direct Observation

I, _____, have successfully performed the
Hemosure iFOB testing according to the NPH Laboratory Procedure on
_____.

Signature of Observer: _____
Any trained individual may observe and sign

- AIDET
- Proper ID has been performed
- Safety protocols followed
- Specimens properly labeled – including initialing and adding time to Cerner/EPIC labels