



Order for Analysis of Blood
[Subsection 13(5) of The Coroners Act, 1999]

FORM B_____
Surname of Deceased_____
Given Name(s) of Deceased_____
Deceased's SK Personal Health Number

I, _____, Chief Coroner, make this Order for
an analysis of the blood of the above-named deceased as authorized by subsection 13(5)
of *The Coroners Act, 1999* to _____,

Name of Laboratory

at _____

Location

and direct that individual to perform an analysis of the blood:

☐ HBsAg☐ HBsAb☐ HCV☐ HIV☐ HBc total☐ Other, specify _____

and report the results to me in writing. The testing turnaround is required within a 24-hour
period due to a blood and body fluid exposure.

Chief Coroner's Signature_____
Date Signed (MM/DD/YYYY)