

28 Day Collection

Your collection schedule is based on the first day of your menstrual cycle (day menstrual blood flow begins). Use this calendar to log the following dates to assist your healthcare provider with interpretation of your results: Enter onset date of **PREVIOUS** menstrual period _____; enter onset date of **CURRENT** menstrual period & all collection dates in the chart below; and onset date of **NEXT** menstrual period _____ (onset date of menstrual period following the completion of this saliva test).

**Note: this calendar is meant to serve as a guide to aid in your collection. See full kit instructions for details on acceptable specimen*

Insert the days of week starting with the first day in which your menstrual cycle began. ie. **Tues, Weds, Thurs**, etc.



DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
Do not collect First day of your menstrual cycle		1st Collection 7-9 AM Label #1		2nd Collection 7-9 AM Label #2		
DATE:	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:
DAY 8	DAY 9	DAY 10	DAY 11	DAY 12	DAY 13	DAY 14
3rd Collection 7-9 AM Label #3			4th Collection 7-9 AM Label #4	5th Collection 7-9 AM Label #5		6th Collection 7-9 AM Label #6
DATE:	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:
DAY 15	DAY 16	DAY 17	DAY 18	DAY 19	DAY 20	DAY 21
	7th Collection 7-9 AM Label #7		8th Collection 7-9 AM Label #8		9th Collection 7-9 AM Label #9	
DATE:	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:
DAY 22	DAY 23	DAY 24	DAY 25	DAY 26	DAY 27	DAY 28
	10th Collection 7-9 AM Label #10					11th Collection 7-9 AM Label #11
DATE:	DATE:	DATE:	DATE:	DATE:	DATE:	DATE:

USE THE COLLECTION SCHEDULE WITHIN THE SPECIMEN COLLECTION INSTRUCTIONS FOR DAY 29