

IBIS Grouping Form

Laboratory Case Number: _____

Items grouped together: _____

Grouped by: _____

Item(s) chosen for IBIS entry: _____

Reason: _____

Items grouped together: _____

Grouped by: _____

Item(s) chosen for IBIS entry: _____

Reason: _____

Items grouped together: _____

Grouped by: _____

Item(s) chosen for IBIS entry: _____

Reason: _____

Items grouped together: _____

Grouped by: _____

Item(s) chosen for IBIS entry: _____

Reason: _____

Caseworker:		Date:	
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