

APPENDIX I

Care Team Members

Please identify three to five care team members (including yourself, if applicable) with the most significant impact to the clinical care initiative. These care team members will constitute your award-winning team. For the purposes of this award, laboratory medicine must be one of the care team members. The total number of care team members provided should not exceed five, including yourself.

NOTE: Care team member names and contact information are for administration purposes only in association with this award. Names and emails will NOT be distributed or used in any context outside of the UNIVANTS of Healthcare Excellence Awards.

EXAMPLE 1

First and Last Name John Doe, MD

Professional Title Senior Medical Officer

Email johndoe@gmail.com

EXAMPLE 2

First and Last Name Jane Doe, MD

Professional Title Medical Director of Clinical Chemistry

Email janedoe@gmail.com

**1 LABORATORY MEDICINE/
PATHOLOGY CARE TEAM MEMBER**

First and Last Name _____

Professional Title _____

Email _____

2 CARE TEAM MEMBER

First and Last Name _____

Professional Title _____

Email _____

3 CARE TEAM MEMBER

First and Last Name _____

Professional Title _____

Email _____

4 CARE TEAM MEMBER

First and Last Name _____

Professional Title _____

Email _____

5 CARE TEAM MEMBER

First and Last Name _____

Professional Title _____

Email _____