

ESNEFT Colchester Blood Sciences

Lab Number

A234567



East Suffolk and North Essex
NHS Foundation Trust

NHS No.

1 0 2 3 0 3 0 2 0

Hospital No.

1 2 3 1 2 3 4 5 6

Surname

Doe

Address Line 1

Marshgate Street, London

Forename

John

Clinical details and drug therapy:

Nintadenib

Sex

M / F

D.O.B.

0 8 0 3 2 0 0 1

Fasting

Yes / No

NHS/PP

Consultant / GP

Henry Williams

Ward / Surgery

West Ward

Requester name & signature:

Bleep No.

Sample Date

| | | | | | |

Time 24 hr clock

Urgent?

Sample Type

Blood / Urine / CSF

PLEASE COMPLETE ALL DETAILS CLEARLY IN BLOCK CAPITALS OR USE ADDRESSOGRAPH LABEL

Biochemistry

Brown top gel tube

- | | |
|--|--|
| <input checked="" type="checkbox"/> UE | <input checked="" type="checkbox"/> Gent |
| <input checked="" type="checkbox"/> Bone | <input type="checkbox"/> Digoxin |
| <input type="checkbox"/> Liver | <input type="checkbox"/> B12/Folate |
| <input type="checkbox"/> Amylase | <input checked="" type="checkbox"/> Ferritin |
| <input type="checkbox"/> CRP | <input type="checkbox"/> Cortisol 9am/random |
| <input type="checkbox"/> Lipids | <input type="checkbox"/> Immunoglobulins |
| <input type="checkbox"/> Thyroid | <input type="checkbox"/> Electrophoresis |
| <input type="checkbox"/> Glucose fasting / random (Yellow top) | |
| <input type="checkbox"/> HBA1c (Red top) | |

Other tests

None

Haematology

Red top EDTA

Green top Citrate

- | | |
|---|--|
| <input checked="" type="checkbox"/> FBC | <input type="checkbox"/> Clotting screen |
| <input type="checkbox"/> ESR | <input type="checkbox"/> INR |
| <input type="checkbox"/> IM | <input checked="" type="checkbox"/> D dimer |
| | <input checked="" type="checkbox"/> Lupus anticoag |

Anti-coagulant therapy

None

Other tests

None

Collected by

Dr William West

Immunology

Separate Brown top tube

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> ANCA | <input type="checkbox"/> TTGA/Coeliac |
| <input type="checkbox"/> ANA | <input type="checkbox"/> Total IgE |
| <input type="checkbox"/> Anti-cardiolipin Abs | |
| <input type="checkbox"/> Liver Autoantibodies | |

Other tests / Specific IgE

(please check sample tube requirements at address below)

None

Date / Time received

For details on tests and sample types please refer to <https://esneftpathology.nhs.uk/> or call 0300 303 5299