Oxford Genetics Laboratories
Oxford University Hospitals NHS Foundation Trust
The Churchill Hospital
Oxford OX3 7LE
Admin office: 01865 226001
Email: dutyscientist.oxfordgenetics@ouh.nhs.uk

NHS
Central & South
Genomic Laboratory Hub
Oxford Genetics Laboratories

PATIENT DETAILS *(Printed label if available)*

Family name:

First name(s):

Date of birth:

Sex*: ☐ M ☐ F ☐ U
*Please state if karyotypic and/or phenotypic sex differ from given sex.

NHS number:

Hospital number:

Address:

Ethnic Origin:

Case / Family number:

Postcode: NHS ☐ Private ☐

Please supply the name and address for

REFERRER DETAILS

Consultant / Clinician: Job Title:

Hospital address:

Email: Tel No:
(PTO for more information)

Contact Name:
(if different)

Additional copies to:

CLINICAL DETAILS AND FAMILY HISTORY

For pedigrees please mark ↗ against person sampled with this request card. Where appropriate identify other family members that may be known to the lab with their full name and date of birth.

Is the patient or their partner pregnant? ☐ If YES: gestation at sampling by scan?

For infertility referrals please give partner's name and DOB:

If this case has been discussed with the Clinical Genetics department, please give name of contact in Genetics:

HIGH RISK SAMPLES: If a specimen is known to present an infection hazard it must be clearly labelled 'DANGER OF INFECTION' and the infection hazard stated.

Sample requirements – further details available from our web-site: www.ouh.nhs.uk/geneticslab

For Chromosome analysis, Fluorescence In Situ Hybridization (FISH): **Blood in LITHIUM HEPARIN (1-5ml)** ☐ **(Tick box if requested)**

For **g**ene sequencing, specific mutation tests, dosage, SNP array: **Blood in EDTA (1-5ml)** ☐ **(Tick box if requested)**
N.B. For FRAX testing please send blood in both EDTA and lithium heparin

Has this patient had a recent blood transfusion or ever had a bone marrow transplant? – if yes give details below

Other (Please state)

Date sample taken:
Name of person taking sample:

TEST(S) REQUESTED – please read consent information overleaf

NHSE Genomic Medicine Service R/M Code:

For Lab Use

Date of receipt: Initials: Sample Condition/Volume:
Comments:

In submitting this sample the clinician confirms that consent has been obtained for testing and storage. Anonymised stored samples may be used for quality control procedures including validation of new genetic tests.

Further Information:
In complying with the Human Tissue Act 2004 all surplus tissue samples are discarded once DNA/RNA has been extracted.
Please be aware that anonymised genomic and clinical data may be shared within and beyond the NHS for diagnostic and research purposes.

Electronic Reporting via Email:
The Oxford Genetics Laboratories are now offering the option to receive reports by Email. If you would like to receive future reports via this method please provide your email address in the referrer details section (securely accredited DCB1596 domain preferred). To set this up, the laboratory will contact you with further information.

Laboratory contact details:

General Enquiries Tel: +44 (0)1865 226001

Duty scientist e-mail: dutyscientist.oxfordgenetics@ouh.nhs.uk

Opening hours: 9.00am – 5.00pm Monday – Friday (excluding bank holidays)

Sample dispatch:

Please send blood samples at room temperature via your local pathology sample transport pathway or by 1st class post or courier to:
(For other samples please enquire or consult web-site)

Oxford Genetics Laboratories
Churchill Hospital
Old Road
Headington
Oxford
OX3 7LE
UK

N.B. Samples for chromosome analysis should be sent to arrive at the laboratory within 24 hours.

For further information about sample requirements and tests available see:
www.ouh.nhs.uk/geneticslab

Information for patients:

Blood samples can be arranged via your GP or the phlebotomy clinic of your local hospital. This form must accompany the sample.
Following receipt of the sample, laboratory staff are unable to provide information on samples and test results directly to patients or their relatives. Such enquiries should be directed to the referring clinical teams or the GP.