Thank you for your request. In order for us to ensure that you receive a result as soon as it is ready, please complete the information in this form and return to:

akiko.brixey@nhs.net

**CORRECTLY IDENTIFYING YOUR REQUESTS**

Please provide the following information so that we can easily identify your requests and book them into the correct requestor when they are received in our laboratory. Please provide an example request form so that we can easily identify your requests.

|  |  |
| --- | --- |
| **Organisation name**  as appears on request form |  |
| **Department name**  as appears on request form |  |
| **Have you provided an example request form?** |  |

**Who should reports be sent back to?**

A paper copy of the report will be sent in the post.

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Email** |  |
| **Telephone number** |  |

**Address for invoices to be sent**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Email** |  |
| **Telephone number** |  |
| **Purchase Order Number** | **If your organisation requires PO number, please provide a PO number.** |

**Paying organisation:**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Email** |  |
| **Telephone number** |  |

**We would like samples to be sent from Laboratories for the following reason:**

* **You get to use your local form and normal laboratory transport arrangements**
* **The samples are shipped according to the rules that govern biological specimens in the post**
* **The report ends up on the patients pathology file**
* **Invoicing is simplified.**

**If you are NOT working in a laboratory and filling this form, please speak to your local laboratory and arrange samples to be sent from your laboratory.**

**If you have any questions regarding UCPCR requests please email:** [**Timothy.Mcdonald@nhs.net**](mailto:Timothy.Mcdonald@nhs.net)

**If you have any** questions **regarding anti-TNF alpha drug and antibody requests please email:**

[**Mandy.Perry@nhs.net**](mailto:Mandy.Perry@nhs.net)

**for exeter blood sciences laboratory use only:**

|  |  |
| --- | --- |
| **Attached example request form** |  |
| **Principal Location Code** |  |
| **Alias Location Code** |  |
| **Principal Requestor Code** |  |
| **Alias Requestor Code** |  |
| **Set-up on IPS** |  |
| **Set-up on Modulab** |  |
| **Added-to MVN** |  |
| **Booked-in all reports to new location and re-printed** |  |
| **Sent email to relevant staff** |  |
| **Updated database of New Requestors** |  |