

Please write clearly using CAPITAL LETTERS.
The form will be machine-read. Return the original together with the blood sample in the return box. All fields are mandatory.

For internal purposes
LCD/LCB

PrenaTest®



WM-3012-EN-001

Field for barcode

R2 Laboratory sending the samples/Distributor

Customer no.

R1	Responsible doctor		*Country code
	Practice/hospital		
	Title/first name/last name		
	Street/number		
	CC*	Postcode/city	
Telephone/fax		ID (if known)	

R3	Patient Information	
	First name/last name	Date of birth (DD/MM/YYYY)

R4	Order to perform the PrenaTest®		* only for singleton pregnancy
	<p>The test result is generally available in 2 weeks; if express service is selected, the result will be available in one week (in accordance with the General Terms and Conditions). In consultation and in agreement with my responsible doctor, I am selecting the following test option:</p>		
	<input type="checkbox"/> Test option 1 Determination of fetal trisomy 21 <input type="checkbox"/> Express service	<input type="checkbox"/> Test option 2 Determination of fetal trisomy 21, 18 and 13 <input type="checkbox"/> Express service	<input type="checkbox"/> Test option 3* Determination of fetal trisomy 21, 18 and 13 as well as gonosomal aneuploidy <input type="checkbox"/> Express service

R5	Information on the pregnancy		Date of blood draw (DD/MM/YYYY)
	<input type="checkbox"/> Singleton pregnancy		
	<input type="checkbox"/> Multiple pregnancy	Number of fetuses:	Monochorionic: <input type="checkbox"/> yes <input type="checkbox"/> no
	Week of pregnancy: _____ + _____ p.m. (week+day; at least week 9+0, max. week 32+1 p.m.)		
	Weight prior to pregnancy: _____ kg		Body height: _____ cm

R6	Reason for the genetic examination	
	<input type="checkbox"/> Age 35 years and over at the time of the birth of the child	<input type="checkbox"/> Hereditary risk of fetal aneuploidy
	<input type="checkbox"/> Prior pregnancy with fetal aneuploidy	<input type="checkbox"/> Increased risk of aneuploidy based on screening methods for prenatal risk determination
	<input type="checkbox"/> Ultrasound anomalies of the fetus	
	<input type="checkbox"/> Other medical reasons	

R7	Results report (Multiple languages may be selected for results report)					
	<input type="checkbox"/> German	<input type="checkbox"/> English	<input type="checkbox"/> French	<input type="checkbox"/> Italian	<input type="checkbox"/> Dutch	<input type="checkbox"/> Turkish
Gender determination desired: <input type="checkbox"/> yes <input type="checkbox"/> no						

R8	Patient consent		
	The responsible doctor or the laboratory sending the samples confirm by signing that the patient a) has received explanations and human genetic counseling in accordance with national legislation and has consented to the genetic examination; b) has agreed to have her test result sent to the laboratory sending the samples for forwarding to the responsible doctor, as well as c) has agreed to the storage and processing of her personal data by the laboratory sending the samples and LifeCodexx.		
	The blood sample must be destroyed following completion of the PrenaTest® analysis, in accordance with national legislation		<input type="checkbox"/> yes <input type="checkbox"/> no
	The patient consents to the storage and use of surplus examination material that is not identified by name for purposes of quality assurance, scientific research as well as the development of new diagnostic options.		<input type="checkbox"/> yes <input type="checkbox"/> no
<p>The blood sample comes from the patient named on this form, provided that the barcode number on the blood sample test tubes and on the form agree. Note: If less than 3 ml of plasma can be obtained from each of the two blood samples, the plasma from both blood samples will be combined in order to be able to conduct the PrenaTest® analysis. If this total amount is insufficient, new blood samples will be requested.</p>			
Place	Date (DD/MM/YYYY)	Signature/Stamp of the responsible doctor	Signature/Stamp of the distributor/ laboratory sending the samples