* **This form is ONLY for patients who have been referred to the National aHUS Service.**
* **Please do not send samples, until the patient has been discussed with the aHUS on call Consultant via the Newcastle upon Tyne Hospital switchboard on 0191 233 6161.**
* **For support with samples between 9am and 5pm please call Newcastle Genetics Laboratory on 0191 241 8781/8775/8754 or email nuth.dna@nhs.net**

# Sample Collection:

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Time |  |

# Patient information:

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Forename |  |
| Sex |  | Date of birth (dd/mm/yy) |  |
| Hospital |  |
| NHS number |  | Ethnic group |  |

**Referring clinician:**

|  |  |
| --- | --- |
| Name |  |
| Hospital |  |  Postcode |  |
| E-mail address |  |
| Telephone number |  |

**Samples requested by NRCTC:**

|  |  |
| --- | --- |
| **Genetics and FHAA** | * 2-5ml EDTA
* 1x5ml SST
 |

**Instructions for sending samples**

# 2–5ml EDTA + 1x5ml SST

# Blood collected into sodium citrate is not suitable for the serum complement screen

* Label with forename, surname, D.O.B and NHS number – **patient identifiers on blood bottles must match form**
* Store and ship at ambient temperature – **DO NOT FREEZE**
* Send via first class post in an appropriate container (at ambient temperature) along with this form to:

**Newcastle Genetics Laboratory**

(Yorkshire and North East Genomics Laboratory Hub)

Institute of Genetic Medicine, Biomedicine East Wing

Central Parkway

Newcastle upon Tyne

NE1 3BZ