Prescription for Drawing Blood

This is a prescription/request for a purple-top (lavender / **EDTA**) vacutainer tube of blood (**2-5 ml**) to be sent to us for DNA testing. The individual does not need to be fasting.

Please place the individual's name and date of birth on the side of the tube. The sample should not be centrifuged or processed, and does not need to be refrigerated unless shipment departure will be delayed 48-72 hours after the sample is collected. Actual shipment can be at ambient temperature. Please do not send on a Friday when the sample(s) may be delayed on a hot/cold loading dock somewhere; just wait until the following Monday; put in refrigerator until shipping the next week.

Use FedEx, DHL or similar courier. The less expensive 2-day delivery is acceptable. Package the sample(s) such that they will not break on transport (Styrofoam/bubblewrap), ideally in separate zip-lock type bags in case one does break. These blood samples will be used to laser capture individual lymphocytes for single-cell molecular testing, and/or for isolating DNA.

We encourage you to contact us at any time with questions or concerns while preparing blood samples.

Please use the address of the Laboratories:

GENOMA - Molecular Genetics Laboratory
Via di Castel Giubileo, 11   00138 ROME - ITALY
Tel. : + 39068811270 (6 lines PBX) Fax : +390664492025
e-mail: info@laboratoriogenoma.eu
web: www.laboratoriogenoma.eu

Blood / Buccal Swab Submission Form

Submit with Samples

Simply complete the few fields on this form and send it along with the blood/buccal swab samples. Then, simply print two copies of the form. One copy is for your records and one copy should accompany the samples.

	Last Name	First Name	Date of Birth	Male / Female	Type of sample	Date of Collection
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Genetic Disorder of Concern: ______________________________

Your Clinic Center name: ______________________________

City, State: ______________________________

Phone: ______________________________

Send to: **GENOMA - Molecular Genetics Laboratory**
Via di Castel Giubileo, 11   00138 ROME – ITALY
Tel. : + 39068811270 (6 lines PBX) Fax : +390664492025