

Male Partners Sample Referral from South East London Sickle Cell and Thalassaemia Centre
Collect two EDTA blood samples

KCH CSR : Kindly book in FBC only, and place label on sample and request form

Use clinician code NKAN, use source code SCT

Process FBC as normal. Send copy of request form and one EDTA to Red Cell Lab

Male Partner Details



Surname			
Forename			
Date of Birth			
Hospital Number		NHS Number	
Family History			
Requesting Midwife/Counsellor			
Date of Request			

Male Partner Family Origin

FOQ(Lab use only)	Tick as many boxes as appropriate	FOQ (lab use only)	Tick as many boxes as appropriate
A	Caribbean Islands	D	Other Non European - give details
A	Africa (excluding North Africa)	E	Sardinia
A	Other African or Caribbean - give details	E	Cyprus, Greece, Turkey
B	India or African Indian	E	Italy, Portugal, Spain
B	Pakistan, Bangaldesh	E	Other Mediterranean - give details
B	Sri Lanka	E	Other European - give details
C	South East Asian - China	F	United Kingdom (White)
C	South East Asian - Other - give details	G	Northern European (White)
		H	Don't Know - give details
		I	Declined to Answer

Other details

Female Partner Details



Surname			
Forename			
Date of Birth			
Hospital Number		NHS Number	
Family History			