



**PROTEOMIS**  
 CEIA LAB, sprl  
 Bd Saint-Michel 119  
 1040 BRUSSELS - Belgium  
 Tel: +32 2 736 04 58  
 Fax: +32 2 736 58 02

# Request form

Reserved  
 Profile nr. : \_\_\_\_\_ Entry date : \_\_\_\_\_

## Patient information\*

Last name : \_\_\_\_\_  
 First name : \_\_\_\_\_  
 Birthdate : (dd/mm/yyyy) : \_\_\_\_\_ Gender :  M  F  
 Address : \_\_\_\_\_  
 Zip code : \_\_\_\_\_ City : \_\_\_\_\_  
 Country : \_\_\_\_\_  
 Tel : \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail : \_\_\_\_\_

## Referring physician (name or stamp)\*

\_\_\_\_\_

## Sample information \*

Date of collection : \_\_\_\_\_  
 Hour : \_\_\_\_\_

## Clinical information

Weight : \_\_\_\_\_ Height : \_\_\_\_\_  
 Antecedents (give date) : \_\_\_\_\_  
 Subjective complaints : \_\_\_\_\_  
 Known diagnosis : \_\_\_\_\_  
 Suspected diagnosis : \_\_\_\_\_  
 Objective signs : \_\_\_\_\_  
 Important treatment followed by the patient : \_\_\_\_\_  
*If possible, use ICD-10 codes from the WHO International Classification of Diseases*

## Requested analyses €

PROTEOMIS Profile  142,00  
 ⇒ 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)  
 Trace elements assessment  120,00  
 ⇒ 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)  
 ⇒ 1 EDTA ● tube, 5 ml, or 1 LH ● tube, 5 ml  
 Oxydative-stress assessment  120,00  
 ⇒ 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)  
 ⇒ 1 EDTA ● tube, 5 ml, or 1 LH ● tube, 5 ml  
 Fatty acid assessment  100,00  
 ⇒ 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)  
 ⇒ 1 EDTA ● tube, 5 ml  
 Fedex prepaid shipment European Union (optional)  45,00  
 Fedex prepaid shipment Rest of the world (optional)  90,00  
 Total amount \_\_\_\_\_

## Payment method

Bank transfer :  
 IBAN : BE05 3101 1277 1175  
 BIC : BBRUBEBB  
 Credit card  
 EUROCARD/MASTERCARD  VISA  
 Name : \_\_\_\_\_  
 Card number : \_\_\_\_\_  
 Control Code : \_\_\_\_\_ Expires : \_\_\_\_\_  
 Date : \_\_\_\_\_ Signature : \_\_\_\_\_

## Patient consent

I understand that the analyses mentioned above are not reimbursed by Social Security and that I shall be charge for the cost of these.  
 Date : \_\_\_\_\_ Signature : \_\_\_\_\_

\* Please, complete in capital letters

FO-TECH-041 - Request form - EN - 7 - 01/01/2023

# INSTRUCTION FOR BLOOD COLLECTOR

\*\*\* PROTEOMIS profile \*\*\* Trace-elements \*\*\* Oxydative-stress \*\*\* Fatty acids \*\*\*

|                  |   |  |
|------------------|---|--|
| Tubes to collect | PROTEOMIS Profile (CEIA Method)   | 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)   |
|                  | Trace elements<br>Serum : Al, Co, Cu (serum), Cr, Fe, Mn, Mo, Ni, Se, Si, V<br>Blood : Zn, Pb, Ru, Cd | 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)<br>1 EDTA ● tube 5 ml, or 1 LH ● tube 5 ml    |
|                  | Oxydative-stress  | 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)<br>1 EDTA ● tube 5 ml, or 1 LH ● tube 5 ml    |
|                  | PROTEOMIS Profile + Trace elements + Oxydative-stress   | 2 dry tubes (no anticoagulant), 7.5 ml, gold-top ● (or red ●)<br>2 EDTA ● tubes 5 ml, or 2 LH ● tubes 5 ml |
|                  | Fatty acid assessment   | 1 dry tube (no anticoagulant), 7.5 ml, gold-top ● (or red ●)<br>1 EDTA ● tube 5 ml                         |

## Provided equipment

- Tubes :
  - 1(2) 7,5 ml Vacutainer SST II Advance tube(s) with gold ● or red ● closure, gel and clotting activator.
  - 1 Vacutainer blood collection needle to be connected to the Vacutainer tube using the Vacutainer holder.
  - 1(2) 5 ml EDTA Vacutainer tube(s) purple closure ● or LH tube green closure ● if trace elements and/or oxydative stress is asked
- A waterproof bag
- A protective container
- This analysis request form
- A user's guide for blood collection (if Sartedt tubes)
- A user's guide for shipment
- A padded envelope, UN3373 marked for postal shipment
- A Fedex « Clinical Pack » bag (if shipped via Fedex)

## Method for collecting and sending

### Sample :

- When possible, the blood sample is taken on an empty stomach.
- **Write on the tube : patient's first and last name, birthdate, collection date**
- If possible, centrifuge the dry tubes only at 1800-2200 g (=ca 3000 rpm) during 10 minutes and collect the serum.
- Place the tube in the protective container
- Then, place the container into the waterproof bag, pull away the blue release liner and press to close the bag
- Place the prescription, the analysis request form in the side pocket of the bag
- Place in the padded envelope
- Ship to :  
**PROTEOMIS**  
**CEIA LAB sprl**  
**Bd Saint-Michel 119**  
**B-1040 Brussels - Belgium**

### Important :

- ⇒ do not freeze the samples
- ⇒ if shipment is delayed, keep the samples in the refrigerator at + 4°C.
- ⇒ do not forget to fill in the analysis request form and to give full details of the patient

### • If shipment via Fedex :

- ⇒ Place in the Fedex Clinical Pack bag
- ⇒ **Contact us for Fedex prices and to schedule a pickup with Fedex**
- ⇒ We shall then send you a pdf file with 4 A4 pages to print and place on the pack
- ⇒ Give the pack to the driver
- ⇒ **You do not have to pay anything at pickup time**  
**CEIA LAB has an account at Fedex**  
**Use this number for billing information**
- ⇒ You will be charged by CEIA at the price given on the first page (applicable for EU countries)