

For Office use:

| Date form received. | Date kit requested or despatched. | Blood test arranged if needed | Date results received. | Date results and report sent to client. | Date Payment Received or direct payment |
|---------------------|-----------------------------------|-------------------------------|------------------------|---|---|
| | | | | | |

Client section: Please fill in to receive test kit.

Surname.....First Name.....Title.....

Address.....

Postcode..... Phone No..... Email.....

Age..... Date of Birth..... Sex.....

If under 16 name of parent to contact with results.....

Medical Conditions.....

.....

Medication.....

.....

GP, referring Practitioner's details or where you heard of us:

Name.....

Address.....

.....Postcode..... Telephone Number.....

Results to go to Practitioner or direct to client.....

Test requested.

| | Price |
|---|--------------|
| <input type="checkbox"/> Hair Mineral Analysis. First test. | £55 |
| <input type="checkbox"/> Hair Mineral Analysis. Follow up test | £45 |
| <input type="checkbox"/> Comprehensive Digestive Stool Analysis with Parasitology. | £240 |
| <input type="checkbox"/> Comprehensive Parasitology | £120 |
| <input type="checkbox"/> Adrenal Stress Index | £70 |
| <input type="checkbox"/> Candida Antibodies | £70 |
| <input type="checkbox"/> Female Hormone Profile | £150 |
| <input type="checkbox"/> Osteoporosis Risk | £60 |
| <input type="checkbox"/> General Well Person Profile (incl T4, TSH, ferritin and cholesterol.) | £120 |
| <input type="checkbox"/> Thyroid analysis – basic (T4 and TSH) | £54 |
| <input type="checkbox"/> Thyroid analysis – Full profile (T4, TSH, Free T4, Free T3. antibodies). | £107 |
| <input type="checkbox"/> Reverse T3 | £60 |
| <input type="checkbox"/> Food Scan – 76 food screen test - home blood sample kit request | £169 |
| <input type="checkbox"/> Food Scan – 113 In-depth test - home blood sample kit request | £248 |
| <input type="checkbox"/> Food Detective – in clinic food intolerance test 59 foods tested | £85 |
| <input type="checkbox"/> Other..... | |

If blood test needed – (Well Person Profile, Thyroid Analysis,)

- Client to arrange own blood draw?
- Client needs to be contacted to make appt for blood draw? (fee payable).

To receive test kit please send or fax this completed form to

Health Analysis Centre.

3 Cedar House, Diss Road, Scole. Norfolk. IP21 4DH

Phone: 01379 740862 or FAX: 01379 740747

www.healthanalysiscentre.co.uk

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