



# Micropathology Ltd

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Accredited Medical Laborator  
Reference No: 9622

## RAPID DIAGNOSIS OF EYE SAMPLES - Molecular testing (microbial DNA PCR identification)

### Patient details OR Sticker:

Surname:

Forename(s):

DoB: (DD/MM/YYYY)

Gender: M / F / U

Hospital No:

### Laboratory name and address for results:

**Service & clinic code:**

**Consultant:**

**Requesting doctor:**

**Doctor phone/email:**

**Fax results to:**

**Sample type:** e.g. Corneal Swab, Aqueous Tap

**Date/Time taken:**

### Clinical details:

Site involved:

Date of onset of symptoms:

Results of previous tests:

Suspected organism(s):

### Tests requested:

Bacteria

Acanthamoeba

Fungi

HSV

VZV

CMV

Please supply the contact details of your Finance department for invoicing.