

Genetic test for HLA-B*1502
Molecular Haematology Laboratory*
University Pathology Service
The Chinese University of Hong Kong

Notes for requesting doctor:

1. The request should be sent to Room 34110, Molecular Haematology Laboratory, 1/F, Clinical Sciences Building, Prince of Wales Hospital, Shatin.
2. Please send **3ml of peripheral blood in EDTA bottle** together with this request form.
3. For enquiry regarding logistics, please contact our Laboratory at **2632-2343 or 2632-2368**.

HKID or Passport no.	
Name	
Sex/ Age	

Date of Collection	
Report to/ Requested by	
Contact Telephone Number	
Fax Number (for reporting)	

Clinical Diagnosis/ History	
Indication for carbamazepine	Epilepsy/ neuropathic pain/ bipolar disorder/ other (specify):
Duration of illness	
Concomitant illness	
Previous anticonvulsant(s)	
Concomitant medications	
Own/ family history of allergy	

For patient AFTER commencing carbamazepine:

Still on carbamazepine?	Yes/ No, date carbamazepine stopped:
Skin reaction after commencing carbamazepine?	Yes/ No
If yes, date of development of rash	
Classification of rash	Simple rash/ Stevens Johnson syndrome/ Toxic epidermal necrolysis/ Hypersensitivity syndrome

***Accredited for Molecular Testing, National Authority of Testing of Australasia**