



**Vitamin/Folate B12 clinical indication form. Download from**

<https://www.hse.ie/eng/services/list/3/acutehospitals/hospitals/regional-hospital-mullingar/our-services>

(See also laboratory memorandum of MEMO-M/CC/79)

Please complete this form for ALL Vitamin B12/Folate requests and enclose with each sample, to enable timely analysis. From 24/06/2019, if this form is incomplete or not enclosed with the sample, usual analysis will NOT proceed. The sample will instead be retained for 1 week from the date of sample collection and will be analysed only upon receipt of this form by the laboratory (contact details at bottom). During this time if there has been no such correspondence, samples will be discarded without analysis. This form must accompany all requests for Vitamin B12/Folate testing. Lab request form also required. Please affix patient label here or complete box below

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Patient demographics -

Name:

Gender:

Date of Birth:

Hospital Number:

\*SDR Number:

\*From 10/06/2019, if the form is not received, the test "SDR" will be reported with a number in the result field. State this number when sending this form

Requestor's details

Name: Source:

\*Date and Time stamp LAB USE ONLY:

Request Details

Has Vitamin B12/Folate been requested on this patient before? Yes / No (circle as applicable) If Yes:

\*When was the last sample analysed? \_\_\_\_/\_\_\_\_/20\_\_\_\_

What is the reason for this request (complete below as relevant, giving specific details);

- High risk for nutritional B12/Folate deficiency? \_\_\_\_\_
- High risk for drug-related B12/Folate deficiency? \_\_\_\_\_
- GI disease/surgery or related features? \_\_\_\_\_
- Unexplained hematologic abnormalities? \_\_\_\_\_
- Unexplained neurologic abnormalities? \_\_\_\_\_
- Consultant Haematologist/Neurologist management? (Circle as relevant)
- Other supportive signs (e.g. glossitis, mouth ulceration) \_\_\_\_\_
- Pregnancy? Yes/No
- Dialysis patient? Yes/No

<b>Doc. No:</b> <b>FORM-M/CC/58</b>	<b>Doc Owner:</b> <i>Helen Corrigan</i>	<b>Dept &amp; Location:</b> <i>Clinical chemistry Pathology RH, Mullingar</i>	
<b>Vers. No:</b> <b>2</b>	<b>Active Date:</b> <b>June 2019</b>	<b>Doc Title:</b> <b>Vitamin B12 demand management form</b>	<b>No. Of</b> <b>Pg:</b> <i>1 of 1</i>