Reg No 52839081C

KK Women's and Children's Hospital
SingHealth

DNA DIAGNOSTIC AND RESEARCH LABORATORY
GENETICS SERVICE

INFORMATION REQUIRED FOR ALL EXTERNAL REQUESTS FOR DNA TESTS

Requesting Doctor*

Name: ____________________

Speciality: ☐ Paediatrics ☐ Neurology ☐ Obstetrics & Gynae
☐ Haematologist ☐ GP ☐ Genetic counsellor
☐ Others: ____________________

Name of Clinic: (If applicable) ____________________

Address:

Tel:

Fax:

Patient's data / label

Name:

I/C or PP:

Date of birth:

Sex: M/F

Billing information

Name of Company: ____________________

Address:

Tel:

Fax:

Sample information

Specimen type: ____________________

Date obtained: ____________________

Date despatched: ____________________

Despatch to:

DNA Diagnostic and Research Laboratory
Basement 1, Laboratory
Children's Tower
KK Women's and Children's Hospital
100, Bukit Timah Road
SINGAPORE 229899

Operating hours (except public holidays)

Monday to Friday: 8.30am to 5.30pm
Saturdays: Please call to enquire

Enquiries

Tel: (65) 6394 1395/6
Fax: (65) 6394 1397

***DNA test report will be sent to the requesting doctor based on this information. A memo will be sent to the handling lab notifying despatch of report.**