

Contact details (recipient of results) E-mail:		Patient information: First and last name: Date of birth yy/mm/dd: <input type="checkbox"/> Female ♀ <input type="checkbox"/> Male ♂	
		Sampling date: Samples should be sent to: Department of Clinical Chemistry Bruna stråket 16 Sahlgrenska University Hospital SE 413 45 Gothenburg Sweden	
Invoice address (If not the same as contact details)		Relevant clinical findings , including drug history: Physician:	
Requested tests:			
<input type="checkbox"/> Plasma Succinylacetone <i>P- Succinylacetone</i>		Heparin plasma. (NB. EDTA plasma cannot be used since EDTA interferes the analysis)	
<input type="checkbox"/> Erythrocyte porphobilinogen synthase <i>Erc-Porfobilinogen syntas</i>		Heparin blood	
<p><i>These two assays can be done in the same sample of 2 mL heparin blood (whole blood), should not be centrifuged! Should be send in ambient temperature the day of sampling by courier mail.</i></p>			
<input type="checkbox"/> Serum or plasma nitisinone <i>S, P- Nitisonon (NTBC)</i>		Heparin plasma	
<input type="checkbox"/> Serum or plasma Alpha-1-fetoprotein <i>S, P- Alfa₁-Fetoprotein</i>		Heparin plasma	
<input type="checkbox"/> Plasma Aminoacids <i>P- Aminosyror</i>		Heparin plasma	
<p><i>These three assay can be done in the same sample of 2 mL heparin plasma.</i></p>			
<input type="checkbox"/> Urinary succinylacetone <i>U- Succinylacetone</i>		Urine (minimum volume 2 mL)	
<input type="checkbox"/> Urinary 5-aminolevulinate <i>U-5-Aminolevulinat (U-ALA)</i>		Urine (minimum volume 2 mL)	
<input type="checkbox"/> Urinary Alpha-1-microglobulin <i>U-Alfa₁ - Mikroglobulin</i>		Urine (minimum volume 0,5 mL)	
<p><i>These three assay can be done in the same sample of 10 mL urine.</i></p>			