

## PROFORMA 615: ANTIPSYCHOTIC ASSAY REQUEST FORM

## ANTIPSYCHOTIC ASSAY REQUEST FORM



- Please send this completed form, along with the accompanying fully-labelled sample(s) to:

Analytical Services International Ltd., Jenner Wing, City St. Georges University of London, Cranmer Terrace, London, SW17 0RE

- PLEASE USE PURPLE-TOPPED (EDTA) SAMPLE TUBES, AND COLLECT SAMPLES PRE-DOSE (i.e. 'TROUGH')

PART 1. Patient Details																
Last Name						First Name										
Hospital No.						NHS No.					-			-		
DRUG ASSAY REQUIRED																
Monitoring Service Number																
DOB													Sex	M / F	Weight (kg)	

PART 2. Sample Information															
Date of Sample		D	D	M	M	Y	Y	Y	Y	Time of Sample		H	H	M	M
Date of Last Dose		D	D	M	M	Y	Y	Y	Y	Time of Last Dose		H	H	M	M
Current Dose (mg/d)				Dose split				AM		Lunchtime		PM		Evening	
Smoker?	<input type="checkbox"/> Non-smoker <input type="checkbox"/> <10/day <input type="checkbox"/> 10-20/day <input type="checkbox"/> >20/day <input type="checkbox"/> Nicotine replacement <input type="checkbox"/> Vapes/e-Cigarettes														
Reason for Request?	<input type="checkbox"/> Baseline <input type="checkbox"/> Poor/non-compliance? <input type="checkbox"/> Dose correct? <input type="checkbox"/> Drug interaction? <input type="checkbox"/> Adverse reaction? <input type="checkbox"/> Other? Please specify:														
Other medication(s)? Please list															

PART 3. Report and Invoice			
Requestor		Tel. No:	
		Email:	
Consultant (if different from above)		Tel. No:	
		Email:	
Address for Report (include Ward name if applicable)			
Postcode:			
Address for Invoice (if different from above)			
<input type="checkbox"/> NHS Trust <input type="checkbox"/> Private Organisation <input type="checkbox"/> Non-UK			
PO Number			

Analytical Services International Ltd.

Antipsychotic Request Form - Version: 3.0, Index: ASI Proforma 615, Printed: 14-Dec-2025 16:42

VAT No GB-468 2066 74, Registered in England & Wales No. 02704238

Authorised on: 12-Nov-2025, Authorised by: Abraham Ali and Lewis Colclough, Document Unique Reference: 1622-134220100, Due for review on: 12-Nov-2029

Registered Office: Aspect House Grove Business Park Wantage Oxfordshire OX12 9FA

Author(s): Katie Lawlor