生寶生物科技 HealthBanks

HealthBanks Stem Cell Research Center
Cord Blood Formal Search Form

Date: ___________Y______ M______ D

Patient Information

Name:	ABO/Rh:	Height:	Weight:
Social Security No. / ID:		Gender: ☐Male ☐Female	
DOB: ___________Y______ M______ D		Nationality:	
Address:			
Tel:		Fax:	
Disease Diagnosis:			
Describe Patient's Condition:			

HLA Matching Information

Patient's HLA Typing						
Class I	HLA-A		HLA-B		HLA-C	
Class II	HLA-DRB1		HLA-DPB1		HLA-DQB	
Test Method:						
Whether the test foundation has been accredited by ASHI? ☐ Yes ☐ No						
Whether the specimen need for HLA Recheck? ☐ Yes ☐ No Collection Date? ___________Y______ M______ D						
Consider for the minor mismatch if no perfect matched donor? ☐ Yes ☐ No						

Family Members' HLA Typing								
Family Member	HLA-A		HLA-B		HLA-DRB1			

Coordinator Information

Coordinator:	E-mail:
Tel:	Fax:

Physician Information:

Hospital/Country:	Physician:

Healthbanks BioTech Co., Ltd
N.T.U. Innovation Incubation Center
No.18, Syuan St., Jungjeng Chiu, Taipei 10091, Taiwan R.O.C.
E-Mail:rd_search@healthbanks.com.tw
Coordinator:李天助 Tien-chu Lee/謝宜珊 Jacqueline Hsieh Tel: +886-2-2369-1277 Fax: +886-2-2368-6159