

Patient Details

Surname:	<input type="text"/>	Address:	<input type="text"/>
Forename:	<input type="text"/>		
Title(Mr/Ms etc):	<input type="text"/>		
NHS Number:	<input type="text"/>	Postcode:	<input type="text"/>
Date of birth:	<input type="text"/>	Tel No.:	<input type="text"/>

GP/Referrer Details

Name:	<input type="text"/>	Tel No.:	<input type="text"/>
Surgery Address:	<input type="text"/>	Date of Request:	<input type="text"/>
Postcode:	<input type="text"/>	GP/Referrer Signature:	<input type="text"/>

Clinical Details

Past history of GU or DU but has not been previously tested
 Uncomplicated dyspepsia unresponsive to lifestyle change, antacids, H₂A or one month PPI and without alarm symptoms
 Chronic NSAID user without ulcer history
 Post eradication treatment following previous positive serology, CLO test, histology or stool antigen test
 Post eradication treatment following previous positive breath test

What eradication treatment was given (please be exact)?

<input type="text"/>	from:	<input type="text"/>	to:	<input type="text"/>
<input type="text"/>	from:	<input type="text"/>	to:	<input type="text"/>
<input type="text"/>	from:	<input type="text"/>	to:	<input type="text"/>

Current medication:

Note: Prior to the test: PPIs must be stopped for two weeks; H₂ Blockers and other antacids must be stopped for 24 hours; the patient must not have had any antibiotics for at least four weeks.

Please fax or post this form:
 Nuclear Medicine Dept
 Queen Elizabeth Hospital Birmingham
 Mindelsohn Way, Edgbaston
 Birmingham, B15 2WB
 Tel: 0121 371 2282
Fax: 0121 460 5826

This Box is for Nuclear Medicine use only

Form Version: May 2011

Appointment: