



Biomnis

**Essential information required
for the FibroMAX**
Fibrotest - Actitest - Steatotest - Nashtest - Ashtest

INTERNATIONAL DIVISION

17/19, avenue Tony Garnier - BP 7322
69357 Lyon cedex 07
Tel.: **+33 (0)4 72 80 23 85**
Fax: **+33 (0)4 72 80 73 56**
E-mail: **international@biomnis.com**

PATIENT DETAILS

First name(s):

Surname:

Date of birth: |_|_|_|_|_|_|_|_|

Gender: F M

Size height:cm Weight:kg

or

Eurofins Biomnis file number provided:

.....

1 HEPATITIS C ONLY, WITHOUT COMBINED HIV/HBV

Tick the box of the test requested

Within the scope of diagnosed hepatitis C: FibroMAX <i>(Biomnis code: FIMAC)</i>	<input type="checkbox"/>
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2 FOR HEPATITIS B, METABOLIC DISORDERS, ALCOHOL-RELATED DISEASES, HEPATITIS C (EXCLUDING DIAGNOSTIC STRATEGY)

Tick the box of the test requested

FibroMAX <i>(Biomnis code: FIMAX)</i>	<input type="checkbox"/>
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Informații esențiale necesare
pentru FibroMAX
Fibrotest - Actitest - Steatotest - Nashtest - Ashtest

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INFOMAȚII DESPRE PACIENT

Prenume:

Nume:

Data nașterii: | | | | | | | | | |

Sex: F M

Înălțimecm Greutate:kg

sau

ID pacient Eurofins Biomnis

1 DOAR HEPATITA C, NEASOCIATĂ CU HBV SAU HIV

*Bifați caseta
testului solicitat*

Pentru diagnosticarea Hepatitei C:
FibroMAX
(Cod Biomnis: FIMAC)

**2 PENTRU HEPATITA B, BOLI METABOLICE, BOLI ASOCIATE CONSUMULUI DE ALCOOL, HEPATITĂ C
(EXCLUZÂND SCOPUL DE DIAGNOSTIC)**

*Bifați caseta
testului solicitat*

FibroMAX
(Cod Biomnis: FIMAX)