

Antigen test order for the SARS-CoV-2 infection

Patient's personal data			
Surname:		Name:	
PESEL		Sex	
Date of birth			
Phone		e-mail	
Address streetno district..... communityPostal code City.....			
Ordering Party (if it is not a patient)			
Surname:		Name	
PESEL :			
Address / seal			
Phone		e-mail	
The Ordering Party confirms that has the right to act on behalf of a minor pursuant to art. 98 of the Family and Guardianship Code			
date		signature	

Material for the test: nasopharyngeal swab

☐

nasal swab

☐

Test result in

Polish

☐

English

☐

Invoice Yes/No Payment cash/card/transfer*

140zł

☐

NIP:

Medical profession

Non applicable

☐

Physician

☐

Nurse

☐

Paramedic

☐

Other

☐

.....
Signature of the patient or legally authorized representative / seal
and signature of the physician

Results reception

☐ Personal (after 30 minutes)

☐ As PDF by email (after 40 minutes)

.....
Place Date and hour of the
Specimen Collection

.....
Name and surname of the
collection performing person

.....
Signature/seal of the collection
performing person

I give my consent / do not give my consent to the anonymous use of the material for scientific research (delete as appropriate)

The administrator of your personal data is the Institute of Human Genetics, Polish Academy of Sciences, 32 Strzeszyńska street, 60-479 Poznań. Your data will be processed for the purpose of conducting research on SARS-CoV-2 infection, possibly for the purposes of scientific research. Please familiarize yourself with your rights and the full content of the information obligation available at: <http://bip.igcz.poznan.pl/wp-content/uploads/2020/08/Obowi%C4%85zek-Informacyjny-Laboratorium-Diagnostics-COVID-19.pdf>

In case of questions or doubts as to the scope of the processing of your data by the Administrator, we recommend contacting the IOD - Mr. Rafał Andrzejewski iod@igcz.poznan.pl, +48 504976690.

.....
Date and signature of the patient
or legally authorized representative

* the result is given after the transfer is done

Cashier's signature bill no