

## **Clinical Genetics**



# **NEW CLIENT ACCOUNT FORM**

# WELCOME TO EUROFINS CLINICAL GENETICS

For further assistance please contact any of the below:

Client Services: clientservices@ctie.eurofinseu.com

Accounts: accounts@ctie.eurofinseu.com

Logistics: lablinklogistics@ctie.eurofinseu.com

Orders: orders@ctie.eurofinseu.com

Sales: sales@ctie.eurofinseu.com

Return the completed form to marketing@ctie.eurofinseu.com

SMF48 Issue No.: 1.01 Active Date: 21/08/25



## **Your Business Details as a New Client**

Company Address	
Registered Organisation Name:	
Trading Name (If different from abov	re):
Department:	
Address:	
Town/City:	
County:	
Eircode/Post Code:	
Country:	
Is the invoice address different?	YES NO If yes, please enter invoice address below
Invoice Address:	
Town/City:	
County:	
Country & Eircode/Post Code:	
Primary Contact	
Name:	Phone:
Position:	Fax:
Department:	Email:
Is the invoice primary contact different?	
Name:	Phone:
Position:	Fax:
Department:	Email:
Department.	Elliali.
Please specify if the person re	eceiving results is registered with:
Eurofins Clinical Genetics cannot issue	results to any person who is not registered with one of these professional bodies
The Irish Medical Council or equ	uivalent state regulatory body or board (if yes please specify)
Institute of Biomedical Science	or equivalent (if yes please specify)
equivalent:	
The Academy of Clinical Science	ce and Laboratory Medicine in Ireland
	CORU
What are your Requirements?	<u>?</u>
Genetic Testing	Sample Transport Test Consumables
Visit our website clinicalgenetics.ie to view our range of genetic tests	For Sample Transport, please To order kits, tubes, bags, forms etc, contact our Logistics team email orders@ctie.eurofinseu.com
available	lablinklogistics@ctie.eurofinseu.com using the Orders Form we send to you having set you up as a new client.



# **Team Receiving Results**

Common Email for Results	
	ence that clinicians ask for results to be sent to their individual email in addition supply details below that we can refer to when needed.
Contact Name: Job Title/Role:	
Direct Email:	
Contact Name: Job Title/Role:	
Direct Email:	
Contact Name:	
Job Title/Role:  Direct Email:	
Contact Name:  Job Title/Role:	
Direct Email:	
Contact Name:	
Job Title/Role:  Direct Email:	
Contact Name:	
Job Title/Role:	
Direct Email:	
Contact Name:	
Job Title/Role: Direct Email:	

### Help us to Notify the Right Person

To receive BULLETINS with service updates including test amendments, reference ranges, holiday logistic notices and TAT updates, please complete the below

#### **Contact for your Administrative Team**

Who should our Client Services Team contact regarding unique patient identifier errors e.g. name of patient

	Primary Contact	Secondary Contact
Title (Dr. etc.)		
Name		
Job Title		
Department		
Email		
Phone Number		

#### **Contact for your Nursing / Clinical Team**

Who should our Client Services Team contact to e.g. clarify test request queries, advise if an incorrect sample has been received etc?

	Primary Contact	Secondary Contact
Title (Dr. etc.)		
Name		
Job Title		
Department		
Email		
Phone Number		

#### **Contact for Escalations**

Who to contact regarding escalations of issues?

Primary Contact	Secondary Contact
	Primary Contact

## **Emailing your Business**

**Invoices and Statements:** Eurofins Clinical Genetics will be processing your test samples and reporting results, constituting a legitimate business interest to sending you invoices and statements by email for the payment of these services. We do not send invoices or statements by post *(carbon footprint reduction)*.

Email to receive invoices:	Email to receive invoices:				
Email to receive statement	s (if different from t	he above):			
GDPR & ePRIVACY	DIRECTIVE				
Dear Client, It is a GDPR & ePrivacy Directive requirement that we get your written consent to receive emails that may be termed 'marketing'.					
From time to time, Eurofins Clinical Genetics will want to send you information about new genetic tests, test innovations, events and educational webinars. If you would like to receive this information, please <b>OPT IN</b> below. We will only send you information on our products and services, similar to those you already purchase.  We will save this consent but will always offer you the option to 'Unsubscribe' or 'Opt Out' in every email communication.					
OPT IN					
Email to receive new test	updates, news etc.				
Signature:					
Position:					
Date:	DAY	MONTH	/ YEAR		