



Peptide Hormonlab (IGF-Lab)
Children Hospital Gießen
Prof. Dr. S. A. Wudy
Feulgenstrasse 12

D-35392 Gießen
GERMANY

filled out by lab!

labnumber: _____

arrival date: _____

Request: Growth Factors / Peptide Hormones

Surname: _____

First name: _____

Birthdate: _____

Sex: _____

Diagnosis / Problem: _____

Therapy / Medication: _____

Sponsor: Invoice to clinic, institute etc.

Privat Invoice

Private address:

Height (cm): _____

Weight (kg): _____

Tanner stage: _____

Sample date : _____ Physician: _____
readable !

Signature: _____

Senders e-mail: _____

Determination in serum

please tick!

IGF-I

IGFBP-3

Leptin (please contact us)

other peptidhormons

Sender :

physician, ward , outpatient clinic, address, phone

➤ Sample Shipment:

from Monday to Friday at ambient temperature

phone: +49-641-985-43474, fax:+49-641-985-43479