

7

Biologics

**Patient details**

Date of birth (dd-mm-yyyy) \_\_\_\_\_

**Please send form with sample to:**

Surname and initials \_\_\_\_\_

Sanquin Diagnostic Services

Gender \_\_\_\_\_

Department UDC

Address \_\_\_\_\_

Plesmanlaan 125

1066 CX AMSTERDAM

The Netherlands

ZIP / postal code and city \_\_\_\_\_

Country \_\_\_\_\_

Date and time of sample \_\_\_\_\_

Your reference / lab number \_\_\_\_\_

Your patient-number \_\_\_\_\_

**Client**

Clinician \_\_\_\_\_

**Send invoice to** (if different from Client)

Institute \_\_\_\_\_

Institute \_\_\_\_\_

Department \_\_\_\_\_

Department \_\_\_\_\_

Address or PO-box \_\_\_\_\_

Address or PO-box \_\_\_\_\_

ZIP / postal code \_\_\_\_\_

ZIP / postal code \_\_\_\_\_

City \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Country \_\_\_\_\_

 Report results to e-mail

E-mail adress: \_\_\_\_\_

**Please draw blood, for serum preparation, shortly before administration of the biologic.**

- 1 ml serum

Biologic *	Concentration of drug in serum	ADA Anti-drug-antibodies **	First concentration of drug, only if concentration is low, followed by ADA measurement
Abatacept	<input type="checkbox"/> <b>J301</b> concentration ***	_____	_____
Adalimumab	<input type="checkbox"/> <b>J291</b> concentration	<input type="checkbox"/> <b>J290</b> IgG (total) against	<input type="checkbox"/> <b>J283</b> cascade
Certolizumab	<input type="checkbox"/> <b>J304</b> concentration	_____	_____
Dupilumab	<input type="checkbox"/> <b>J112</b> concentration	_____	_____
Etanercept	<input type="checkbox"/> <b>J295</b> concentration	_____	_____
Golimumab	<input type="checkbox"/> <b>J306</b> concentration	<input type="checkbox"/> <b>J305</b> IgG (total) against	<input type="checkbox"/> <b>J313</b> cascade
Infliximab	<input type="checkbox"/> <b>J289</b> concentration	<input type="checkbox"/> <b>J288</b> IgG (total) against	<input type="checkbox"/> <b>J285</b> cascade
Natalizumab	<input type="checkbox"/> <b>J299</b> concentration	<input type="checkbox"/> <b>J307</b> IgG (total) against	_____
Rituximab	<input type="checkbox"/> <b>J293</b> concentration	<input type="checkbox"/> <b>J292</b> IgG (total) against	_____
Tocilizumab	<input type="checkbox"/> <b>J311</b> concentration	<input type="checkbox"/> <b>J310</b> IgG (total) against ***	_____
Ustekinumab	<input type="checkbox"/> <b>J134</b> concentration	<input type="checkbox"/> <b>J133</b> IgG (total) against	<input type="checkbox"/> <b>J234</b> cascade
Vedolizumab	<input type="checkbox"/> <b>J135</b> concentration	<input type="checkbox"/> <b>J316</b> IgG (total) against	<input type="checkbox"/> <b>J235</b> cascade
Your biologic not listed above?	Contact biologics@sanquin.nl to discuss the potential for rapid development of a new assay.		

\* Biosimilars are analyzed with similar accuracy as the originator.

\*\* ADA testing is most relevant when a low biologics concentration is present.

\*\*\* Research Use Only.

**Deviating primary material****For more information on Biologics: see [sanquin.org/biologics](https://www.sanquin.org/biologics).****Applicable terms and conditions and privacy**

- Sanquin's terms and conditions ("DVO") applies to the services provided by Sanquin Diagnostiek B.V. This DVO can be found on the website of Sanquin (<https://www.sanquin.org/binaries/content/assets/nl/producten-en-diensten/diagnostische-diensten/diagnostiek/sanquin-diagnostiek-dvo.pdf>). The terms and conditions of the applicant (healthcare provider) are hereby expressly excluded.
- Sanquin Diagnostiek B.V. considers the information filled in on the request form as confidential.
- The applicant (healthcare provider) shall ensure an informed consent from the patient.
- For the use of personal data and residual material, please refer to the privacy statement.
- More information can be found at [www.sanquin.org](https://www.sanquin.org)

 Serum submission

For shipping conditions see <https://www.sanquin.org/biologics-stability>

Send form with 1 ml sample to:  
Sanquin Diagnostic Services  
Department UDC  
Plesmanlaan 125  
1066 CX Amsterdam  
The Netherlands

**Sanquin**

Diagnosics B.V.  
Plesmanlaan 125  
1066 CX Amsterdam  
The Netherlands

Laboratory  
Email:  
[biologics@sanquin.nl](mailto:biologics@sanquin.nl)

34053  
@6438

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