

NATIONAL HCV LOOKBACK PROGRAMME**Assessment of Suitability of recipient for counselling****Recipient details:**

Surname	LAING
Other name	Alexander
D.o.B.	07.12.23.
Unit Number	0182596M

Transfusion details:

Date of transfusion	07.08.90.
Hospital	Aberdeen Royal Infirmary
Donation number	8909989
Component type	Whole Blood

notes

Please complete the details overleaf and return it to the Blood Transfusion Centre in the enclosed envelope.

If you wish to undertake counselling of the patient yourself the necessary forms and information will be returned to you.

If you do not wish to arrange counselling of the patient yourself the Transfusion Centre will undertake to contact the patient direct, you will of course be kept informed of the outcome.