

## **Chlamydia and Gonorrhoea Test Kit Order Form**

Date:	
NCSP SITE CODE (not ODS code):	
Name of site:	
Address:	
Telephone number:	
Contact name:	

I would like to order (please indicate number of kits below)



Urine Kits



Swab Kits

Please email this form to the following address:

clcht.chlamydiascreeningservice@nhs.net

or call **0208 102 4894** for further information including NCSP codes.