

FPDPHE file number:

Recipient (name, first name; address)

Paris, (Date)

Madam, Sir,

Your child [name] born on [date] at the [maternity unit name] maternity unit has been screened for sickle cell disease.

The screening result shows that he/she is **not ill but is a healthy carrier**.

This result means that we now wish to screen you (the child's two parents) for sickle cell disease status.

To do this, you can either:

- **Show** this letter to a healthcare professional of your choice: a paediatrician at the maternity unit or paediatric clinic, or the physician who looks after your child (a paediatrician or general practitioner).
- **Attend** the Sickle Cell Disease Information and Screening Centre **without making an appointment (completely free)**.
- **Make an appointment for a genetic counselling consultation** by calling the phone number below:

**Genetic Counselling Consultation**  
**Necker Children's Hospital, 149 rue de Sevres**  
**F-75015 Paris, France**  
**Tel.: +33-142-754-799**

Do not hesitate to contact us for more information.

Yours faithfully,

Professor Robert Girot  
Head Physician for genetic  
counselling consultations  
at Necker Children's Hospital

Christelle Remus  
Genetic Counsellor  
Necker Children's Hospital