Policy Directive

Ministry of Health, NSW
73 Miller Street North Sydney NSW 2060
Locked Mail Bag 961 North Sydney NSW 2059
Telephone (02) 9391 9000 Fax (02) 9391 9101
http://www.health.nsw.gov.au/policies/

Genetics Tests - Charging Policy Clinically Required Specialised-Non-Medicare Benefits Schedule Item

Document Number	PD2005_335
Publication date	27-Jan-2005
Functional Sub group	Corporate Administration - Fees Clinical/ Patient Services - Medical Treatment
Summary	Charging policy for clinically required specialised genetics tests which are non-Medicare Benefits Schedule Items.
Author Branch	Finance
Branch contact	Finance Branch
Applies to	Area Health Services/Chief Executive Governed Statutory Health Corporation, Board Governed Statutory Health Corporations, Affiliated Health Organisations, Affiliated Health Organisations - Declared, Divisions of General Practice, NSW Ambulance Service, Ministry of Health, Private Hospitals and Day Procedure Centres, Public Health Units, Public Hospitals
Distributed to	Public Health System, Divisions of General Practice, Health Associations Unions, Health Professional Associations and Related Organisations, NSW Ambulance Service, Ministry of Health, Public Health Units, Public Hospitals, Private Hospitals and Day Procedure Centres
Review date	30-Dec-2017
Policy Manual	Not applicable
File No.	01/5184
Previous reference	2003/86
Issue date	05-Dec-2003
Status	Active

Director-General

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is **mandatory** for NSW Health and is a condition of subsidy for public health organisations.

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Distributed to	Public Health System, Divisions of General Practice, Health Associations Unions, Health Professional Associations and Related Organisations, NSW Ambulance Service, Ministry of Health, Public Health Units, Public Hospitals, Private Hospitals and Day Procedure Centres
Review date	27-Sep-2010
Policy Manual	Not applicable
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NSW HEALTH DEPARTMENT

CIRCULAR

	File No	01/5184
	Circular No	2003/86
	Issued	5 December 2003
	Contact	Jennifer Blackwell 02 9391 9520 Statewide Services Development Branch

Charging Policy for Clinically Required Specialised Genetics Tests which are non Medicare Benefits Schedule Items

1. Introduction

In accordance with the recommendations of *Specialised Testing for Genetic Disorders*, NSW Health, May 2000, www.health.nsw.gov.au/health-public-affairs/publications/gentest/ charging may be introduced for all specialised genetics tests which are non-Medicare Benefits Schedule items, with the exception of newborn screening and some biochemical genetic tests which are funded separately.

Area Health Services are to meet the cost of testing from within their global budget allocation, for clinically/medically required specialised genetic testing for non-Medicare Benefits Schedule items for:

- admitted public patients
- non-admitted public patients, and,
- privately referred non-inpatients referred to a public sector specialist clinic

Except where indicated, arrangements are to be consistent with "Principles for Funding of NSW Public Health Sector Pathology Services" Circular 2001/113
http://www.health.nsw.gov.au/fcsd/rmc/cib/circulars/2001/cir2001-113.pdf

1.1 Specialised tests for genetic disorders refers to tests which are non Medicare Benefits Schedule items performed by public hospital laboratories and funded by the NSW Health System. The costs of tests are generally in the range of $100 to $2000 per test, and more in rare instances.

These tests are used to:

- diagnose a genetic disorder, including a prenatal diagnosis
- determine if a person is a mutation carrier for a disorder, or
- detect an inherited predisposition to a genetic disorder.

Distributed in accordance with circular list(s):

A	86	**B**	11	**C**	71	**D**	11	**E**	
F		**G**	10	**H**	71	**I**		**J**	35
K		**L**	12	**M**		**N**	28	**P**	

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using the following techniques or processes:

- molecular genetic testing, including PCR based methods
- molecular cytogenetics testing procedures such as FISH testing
- biochemical genetic testing, including functional studies, but excluding first-line urine metabolic screening tests
- microsatellite instability and immunohistochemistry of tumours in cancer genetics testing

1.2 It is to be noted that the scope of this definition does not include tests for non-inherited disorders which may use the same testing techniques, for example the diagnosis of bacterial, viral or malignant conditions for therapeutic purposes, or testing for multifactorial disorders, which are the result of an interaction of multiple genes with environmental factors.

1.3 As specialised genetic testing is generally complex with low throughput, it is appropriate that most testing for the State's population is provided by a limited number of laboratories. It should be noted that the complexity of some testing might create a lengthy period to achieve a result. Some tests may need to be sent overseas and may incur transport costs. The exact cost of a test may not be known at the time of the request.

2 Charging policy within the public sector

2.1 Funding of testing

The following funding policy takes precedence over Circular 2001/113 "Principles for Funding of NSW Public Health Sector Pathology Services"
http://www.health.nsw.gov.au/fcsd/rmc/cib/circulars/2001/cir2001-113.pdf

Area Health Services are to meet the cost of testing from within their global budget allocation, for clinically/medically required specialised genetic testing for non-Medicare Benefits Schedule items for:

- admitted public patients
- non-admitted public patients, and,
- privately referred non-inpatients referred to a public sector specialist clinic

The rationale for this variation to include privately referred non-inpatients of a public sector specialist clinic is that the lack of Medicare Benefits rebates and the lack of public patient clinics would unfairly discriminate against patients with, or at risk of, genetic conditions by imposing test costs on them. A public sector specialist clinic is a clinic managed and controlled by a Public Health Organisation as defined under the Health Services Act 1997 (NSW)

2.2 Cost recovery processes

Other arrangements are to be consistent with "Principles for Funding of NSW Public Health Sector Pathology Services" Circular 2001/113
http://www.health.nsw.gov.au/fcsd/rmc/cib/circulars/2001/cir2001-113.pdf.

The laboratory performing the test shall invoice the facility/Area Health Service requesting the test so that the laboratory can recover the full cost of the test. Facility is defined as an Area Health Service, or its delegated authority, eg hospital, pathology ser vice or clinical unit. The facility/Area Health Service requesting the test needs to identify a source of local funds to cover the cost of the tests. The majority of tests are requested by a limited number of tertiary facilities for patients residing both within and outside the facility's geographic area. Where a facility/Area Health Service requests tests for patients residing outside its geographic area, the facility/Area Health Service requesting the test may make agreements with patients' Area Health Services of residence to recoup test costs in accordance with Section 3.4 of Circular 2001/113.

2.3 Responsibility for authorising tests

Testing is available to patients, in accordance with the *Guidelines for Testing for Genetic Disorders, Circular 97/48* www.health.nsw.gov.au/fcsd/rmc/cib/circulars/1997/cir97-48.pdf.

Local arrangements are to be negotiated concerning clinical responsibility for authorising testing as well as budget responsibilities for approving test requests. This would most appropriately rest with the head of a clinical genetics unit or delegated staff member. Referral to public sector genetics services will provide the patient with clinical geneticist expertise not generally available in the private sector. It will not guarantee testing, as it will need to be assessed and prioritised according to clinical necessity.

In some instances, the specialty of genetics overlaps with other specialties for example, oncology, gastroenterology or neurology. Where this occurs it may be appropriate for responsibilities to rest also with such units.

2.4 Public patients where public sector services are not available

In circumstances where patients elect to be public patients but public hospital clinical or pathology collection services are not available, the Area Health Service may agree to meet the cost of testing by arrangement with requesting physicians or private pathology collection services. Written authority must accompany test requests so that the testing laboratory can bill the authorising Area Health Service, otherwise the patient is assumed to be private and would be billed accordingly (see Section 3 below). Services may not be available or accessible due to geographical or other circumstances, eg

- where public clinics, eg neurology or paediatrics are not provided in some rural areas
- where public pathology collection services are not available eg Port Macquarie and private pathology collection services are used
- Where private pathology collection services are used due to difficulties with access to public pathology collection eg referrals from disability services

2.5 DNA predictive testing for serious adult onset disorders which may reduce normal life expectancy

DNA predictive testing for serious adult onset disorders undertaken by NSW Health public hospital laboratories may be subject to special requirements, ie shall only be undertaken when requested by clinical geneticists or other specialists with expertise in the genetics of the specific disorder.

Generally these would be Class B tests (Appendix 1) as classified by the National Pathology Advisory Accreditation Council's document *Laboratory Accreditation Standards and Guidelines for Nucleic Acid Detection* http://www.health.gov.au/npaac/pdf/naagenetictest.pdf , ie

- diagnostic tests for which complex genetic analysis is required to identify mutations and for which negative test results also require detailed genetic counselling (e.g. hereditary cancer syndromes)
- predictive tests for untreatable adult onset conditions (e.g. Huntington's disease).

The rationale is that this type of testing raises complex genetic and psychosocial issues for the patient and is best provided through a multidisciplinary clinical and laboratory service to ensure appropriate clinical care and interpretation of the results and their implications.

2.6 Cost recovery processes and patient privacy and confidentiality

The above-mentioned Class B tests, carry with them special privacy considerations. Optimal patient care requires formal written consent and confidentiality procedures. On completion of testing the molecular genetics laboratory is to send the result report to the referring practitioner. The referring laboratory is to be advised for their records that testing has been completed and that the report has been issued to the referring practitioner. The advice to the referring laboratory will not include test results for reasons of privacy and confidentiality. The patient's name and address details may also be withheld, provided there is a sufficient audit trail including: laboratory episode number, broad test category, date of service, name of requesting clinician and test cost. The patient's postcode must be included.

3 Charging for Patients in the Private Sector

3.1 **Private patients** are defined as patients who consult with and have tests requested by general practitioners or specialists in private rooms outside public hospitals.

3.2 **Charging private patients -** Where public hospital laboratories provide specialised genetic/DNA tests which are non Medicare Benefits Schedule items to private patients, the patients will be responsible for their own test costs. The special requirements in 2.5 above are to be noted concerning requests for predictive testing through clinical geneticists and other specialists with expertise in the genetics of the specific disorder.

3.3 **Consent to testing -** Patients should consent to testing on an informed basis, in regard to their financial obligations as well as to the test and its implications. Before commencing testing, public hospital laboratories require all the information indicated on the template **Request Form** (Appendix 2) including an acknowledgement that the patient has been advised of the test cost and agreed to meet the cost. The laboratory may also require a copy of the clinical consent form to indicate appropriate test and specimen management.

3.4 **Provision of information about costs to the patient -** Concerning financial consent, the patient should be informed about the following:

- the test cost
- there is no Medicare rebate, and
- there is an alternative for testing without cost to the patient through the public sector genetics services (Appendix 3). It should be noted that the intent of this point is *not* to dissuade private practitioners or private laboratories from collecting and forwarding specimens to public hospital laboratories, but simply as part of the process of ensuring informed financial and clinical consent.
- referral to a public sector genetics service will not guarantee testing as it will need to be assessed and prioritised according to clinical necessity.

3.5 Tests forwarded by public pathology collection centres on behalf of private patients will be billed directly to the patient. The referring laboratory must clearly indicate that the patient is private or the Area Health Service will be billed.

3.6 Tests forwarded by private pathology collection centres are to be treated as private patient referrals, (unless special arrangements have been made - see 2.4 above). The account is to be sent to the patient. If patient details are not provided the account is to be forwarded to referring pathology laboratory.

3.7 Privacy and confidentiality of test results – see 2.6.

Robyn Kruk
Director-General

CHARGING POLICY FOR CLINICALLY REQUIRED SPECIALISED GENETICS TESTS WHICH ARE NON MEDICARE BENEFITS SCHEDULE ITEMS

The NSW public health system will meet the cost of specialised genetic testing for non-Medical Benefits Schedule items for admitted public patients, non-admitted public patients and privately referred non-inpatients referred to a public sector specialist clinic, ie a specialist clinic managed and controlled by a Public Health Organisation as defined under the Health Services ACT 1997 (NSW).

Private patients are responsible for their own test costs.

Testing is available to patients for whom it is relevant for strictly clinical/medical reasons in accordance with the *Guidelines for Testing for Genetic Disorders, Circular 97/48* www.health.nsw.gov.au/fcsd/rmc/cib/circulars/1997/cir97-48.pdf.

<table>
<tr><th>Patient Classification</th><th>Pathology Collection</th><th>Costs to be met by:</th></tr>
<tr><td rowspan="2">Eligible patients

♦ admitted public patients
♦ non-admitted public patients, and,
♦ privately referred non-inpatients referred to a public sector specialist clinic</td><td>Public hospital pathology collection service</td><td>Area Health Service /public facility requesting the test</td></tr>
<tr><td>Private pathology collection service (only where initial referral is from a public sector specialist clinic)</td><td>Area Health Service /public facility requesting the test provided there is written authorisation indicating its agreement to meet the test cost. Otherwise patient to be considered private and billed accordingly.</td></tr>
<tr><td rowspan="2">Non-Eligible Patients

Patients who consult with and have tests requested by general practitioners or specialists in private rooms outside public hospitals.

Note: some tests provided by public sector laboratories shall only be undertaken when requested by clinical geneticists or other specialists with expertise in the genetics of the specific disorder.</td><td>Public hospital pathology collection service</td><td>Private patient - bill the patient direct.
♦ Obtain informed financial consent prior to testing.
♦ Clearly indicate private patient’s contact details for billing, otherwise the bill will be sent to the referring laboratory</td></tr>
<tr><td>Private pathology collection service</td><td>Private patient
As above</td></tr>
</table>

NPAAC ADVISORY DOCUMENT
INFORMATION FOR CLASSES OF GENETIC TESTING

The NPAAC document *Laboratory Accreditation Standards and Guidelines for Nucleic Acid Detection Techniques* recognises that many human genetic tests simply require the patient's verbal consent after the provision of appropriate information by a qualified practitioner. There are however other human genetic tests where pre-and post-test genetic counselling as well as formal consent and confidentiality procedures are appropriate parts of the testing process and are required for optimal patient care. The current definitions of testing classes are as follows.

Class A: Diagnostic Genetic Tests

Tests in this class are conducted largely on symptomatic patients with the aim of making a diagnosis for the purpose of treatment, patient management or else are supported as routine public health measures by a State or Territory Department of Health (e.g. newborn screening tests). The tests in this class require verbal consent of the individual being tested (or legal guardian) and do not require specific pre-test counselling for genetic disease. Tests in this class are appropriate for access by the health professionals providing patient care. This class of tests is expected to represent the substantial majority of nucleic acid based tests conducted by multidisciplinary laboratories.

Class B: Predictive, Carrier and Prenatal Genetic Tests

This class of tests would typically be the province of a specialist laboratory working in close association with clinical genetics units or a number of specialist referrers. The tests in this category are largely conducted on samples from non-symptomatic patients, for the purpose of determining carrier status or predictive testing, or for prenatal diagnosis. They require formal consent, pre- and post-test counselling, confidentiality procedures, and close dialogue between laboratory and clinical services.
In order to encourage uniformity of practice in human molecular genetics laboratories NPAAC requested that stakeholders* provide guidelines as to which molecular genetic tests should be categorised as 'Class A' or 'Class B' tests.
There was consensus that the following four indications could be undertaken as Class A tests

- Diagnostic tests for which a simple definitive test exists (e.g. Fragile XA)
- Predictive tests for conditions where a simple treatment exists (e.g. Haemochromatosis)
- Screening tests supported as a public health measure by a State or Territory Dept of Health (e.g. Newborn Screening Tests)
- Some carrier tests for autosomal recessive or X-linked conditions (e.g. Tay Sachs disease).

There was consensus that the following indications should be undertaken as Class B tests

- Diagnostic tests for which complex genetic analysis is required to identify mutations and for which negative test results also require detailed genetic counselling (e.g. hereditary cancer syndromes)
- Predictive tests for untreatable adult onset conditions (e.g. Huntington's disease)
- Prenatal diagnostic tests
- Some carrier tests for autosomal recessive or X-linked conditions (e.g. Duchenne Muscular Dystrophy).

The major discriminator between whether a test falls into Class A or Class B is the reason for the performance of the test rather than the test itself. For example a Fragile XA test could be a Class A or Class B test depending on whether it is offered for diagnosis in a developmentally delayed child or undertaken on a sample from a known carrier for prenatal diagnosis.

Further information relating to the ethics of laboratory genetic testing is available in the NHMRC publication: Ethical Aspects of Human Genetic Testing: an Information Paper (2000).

This document is scheduled for review in 2002

* Responses were received from: the Human Genetics Society of Australasia, Royal College of Pathologists of Australasia, Australasian Association of Clinical Geneticists, Australian Society of Genetic Counsellors, Genetic Services Advisory Committee of the New South Wales Department of Health, Victorian Clinical Genetics Service, Queensland Clinical Genetics Service.

Appendix 2

Request Form for Specialised Molecular Genetic/DNA Testing for Genetic Disorders

- Must be used for **non-Medical Benefits Schedule items**
- Before testing is commenced, the laboratory may require the following details (see ***Guidelines for Specialised DNA Testing for Genetic Disorders*** www.health.nsw.gov.au/health-public-affairs/publications/gentest/)

Send by courier/express post to:

Send samples at room temperature
Same day OR overnight

Patient ID *MRN*

Last name ……

First name ……

Address ……

…… Postcode ……

Date of birth ……../…… /…… Sex M F
(dd/mm/yyyy)

Sample Date Drawn ……/……/……..
(dd/mm/yyyy)

Blood

☐ EDTA …….. mL (room temp)

☐ Lithium heparin…….. mL (room temp)

Prenatal

☐ amniotic fluid …….. mL (room temp)

☐ cultured amniocytes xT25 Flask(s) (room temp)

☐ CVS sample ……. mg ☐ on ice

☐ cleaned
☐ uncleaned

Other

☐ DNA …….. g

Other, specify:

Test requested

PLEASE ATTACH FAMILY/PEDIGREE INFORMATION

Purpose of test

☐ Confirm clinical diagnosis
☐ Predictive/presymptomatic testing
☐ Carrier Status
☐ Prenatal Diagnosis - complete box below
☐ Determine feasibility of prenatal Dx
☐ **Family study (no report for this individual)**
☐ **For research (no report for this individual)**
☐ Bank DNA until further notice
☐ **Other……..**

Pregnancy Information (if applicable)

Is this individual or the partner of this individual currently pregnant

L.M.P. (dd/mm/yyyy) ……

Amnio (dd/mm/yyyy) ……

CVS (dd/mm/yyyy)
……
…..

Family Information

Have samples from this family been sent to a DNA lab before? ☐ Yes ☐ No

If Yes, specify ……

Date of birth or age ……

Ethnic background ……

Genetic Counselling

Has the individual been offered counselling consistent with ***Specialised/DNA Testing for Genetic Disorders***?
www.health.nsw.gov.au/health-public-affairs/publications/gentest/

☐ Yes ☐ No ☐ Refused

Consent to Testing

Has a ***Consent Form for Specialised/DNA Testing*** been completed?

☐ Yes ☐ No

Consent to payment

☐ **Public patient, or**
☐ **Privately referred non-inpatient**
☐ Payment to be made by Area Health Service by arrangement

Authorised by……

☐ **Private patient** - Payment to be made by patient

Consent to payment ……

Send Account to:

Name ……

Address ……

…… Postcode ……..

Test requested by:

Name …… Initials ……..

Address ……

…… Postcode ……..

Telephone No ……

Signature…… Date ……

Specialty /Appointment……

Copy of report to:

Name Initials ……

Address ……

…… Postcode ……..

Telephone No ……

Clinical and Genetic Counselling Service Locations

Camperdown
Department of Molecular and Clinical Genetics
Royal Prince Alfred Hospital
Missenden Road
CAMPERDOWN NSW 2050
Tel. 9515 5080
Fax. 9515 7595

Liverpool
Department of Clinical Genetics
Health Services Building
Cnr Campbell and Goulburn Streets
LIVERPOOL NSW 2170
Tel. 9828 4665
Fax. 9828 4650

Penrith
Nepean Hospital
Summerset Street
PENRITH NSW 2750
Tel. 4734 3362
Fax. 4734 2567

Randwick
Department of Medical Genetics
Sydney Children's Hospital
High Street
RANDWICK NSW 2031
Tel. 9382 1708
Fax. 9382 1711

Westmead
Department of Clinical Genetics
The New Children's Hospital
Hawkesbury Road
WESTMEAD NSW 2145
Tel. 9845 3273
Fax. 9845 3204

Newcastle
Hunter Genetics
Cnr Turton & Tinonee Streets
WARATAH NSW 2298
Tel. 4985 3100
Fax. 4985 3105

Genetic Counselling Services in conjunction with visiting clinical genetics services.

Kogarah
Women's and Children's Health
2nd Floor Prichard Wing
St George Hospital
Gray Street
KOGARAH NSW 2217
Tel. 9350 2315
Fax. 9350 3901

St Leonards
Fetal Medicine Unit
Royal North Shore Hospital
Pacific Highway
ST LEONARDS NSW 2065
Tel. 9926 6478
Fax. 9906 1872

Bathurst
Community Health Centre
158 William Street
BATHURST NSW 2795
Tel. 6331 5533
Fax. 6332 2039

Broken Hill
Community Health Centre
BROKEN HILL NSW 2880
Tel. (08) 8080 1556
Fax. (08) 8080 1611

Canberra
The Antenatal Clinic
The Canberra Hospital
Gilmore Crescent
CANBERRA ACT 2605
Tel. 6244 4042
Fax. 6244 3422

Coffs Harbour
Coffs Harbour Health Campus
Pacific Highway
COFFS HARBOUR 2450
Tel. 6656 7806
Fax. 6656 7817

Gosford
Child Health Centre
297 Henry Parry Drive
WYOMING NSW 2250
Tel. 4337 0207
Fax. 4337 0217

Goulburn
Child Development Unit
Cnr Albert and Clifford Streets
GOULBURN NSW 2580
Tel. 4827 3951
Fax. 4827 3958

Lismore
Child and Family Health Centre
37 Oliver Avenue
GOONELLABAH NSW 2480
Tel. 6625 0111
Fax. 6625 0102

Mudgee/Dubbo
Mudgee Community
Health Centre
MUDGEE NSW 2850
Tel. 6372 6455
Fax. 6372 7341

Muswellbrook
Community Health Centre
Brentwood Street
MUSWELLBROOK NSW 2332
Tel. 6542 2083
Fax. 6542 2005

Port Macquarie
Hastings Macleay
Community Health
Morton Street
PORT MACQUARIE 2444
Tel. 6588 2882
Fax. 6588 2800

Tamworth
Community Health Centre
Cnr Dean and Johnson Streets
TAMWORTH NSW 2340
Tel. 6766 2555
Fax. 6766 3967

Taree/Forster
Community Health Centre
64 Putney Street
TAREE NSW 2430
Tel. 6592 9315
Fax. 6592 9607

Wagga Wagga
Wagga Base Hospital
Edward Street
WAGGA WAGGA NSW 2650
Tel. 6938 6393

Fax. 6921 5632

Wollongong
Maternal and Paediatric Services
Wollongong Hospital
Crown Street
WOLLONGONG NSW 2500
Tel. 4222 5216
Fax. 4222 5477

MotherSafe
Statewide Medications in Pregnancy and Lactation Advisory Service

Royal Hospital for Women
Barker Street
RANDWICK NSW 2031
Tel. 9382 6539 (Sydney calls)
Tel. 1800 647 848 (Other calls)

Prenatal Diagnosis & Counselling Services

Camperdown
Fetal Medicine Unit
King George V Hospital
Missenden Road
CAMPERDOWN NSW 2050
Tel. 9515 8258
Fax. 9515 6579

Liverpool
Fetal Medicine Unit
Liverpool Hospital
Elizabeth Drive
LIVERPOOL NSW 2170
Tel. 9828 4145
Fax. 9828 4146

Randwick
Prenatal Diagnosis
Royal Hospital for Women
Barker Street
RANDWICK NSW 2031
Tel. 9382 6098
Fax. 9382 6706

Penrith
Fetal Medicine Unit
Nepean Hospital
Summerset Street
PENRITH NSW 2750
Tel. 4734 3163
Fax. 4734 3206

St Leonards
Fetal Medicine Unit
Royal North Shore Hospital
Pacific Highway
ST LEONARDS NSW 2065

Tel. 9926 7280
Fax. 9906 1872

Westmead
Fetal Medicine Unit
Westmead Centre
Hawkesbury Road
WESTMEAD NSW 2145
Tel. 9845 6802
Fax. 9845 7793

Newcastle
Prenatal Diagnosis Unit
John Hunter Hospital
NEWCASTLE NSW 2310
Tel. 4921 4694
Fax. 4921 3133

Cancer Genetics Specialised Services

Darlinghurst
Family Cancer Clinic
Department of Medical Oncology
St Vincent's Hospital
Victoria Street
DARLINGHURST NSW 2010
Tel. 8382 3395
Fax. 8382 3386

Kogarah
Cancer Care Centre
St George Hospital
Belgrave Street
KOGARAH NSW 2217
Tel. 9350 3815
Fax. 9350 3958

Liverpool
Liverpool Hospital
Elizabeth Drive
LIVERPOOL NSW 2170
Tel. 9828 4665
Fax. 9828 4650

Randwick
Hereditary Cancer Clinic
Prince of Wales Hospital
High Street
RANDWICK NSW 2031
Tel. 9382 2587
Fax. 9382 2588

Westmead
Familial Cancer Services
Westmead Hospital
Hawkesbury Road
WESTMEAD NSW 2145
Tel. 9845 5079
Fax. 9687 2331

Newcastle
Hunter Genetics
Cnr Turton & Tinonee Streets
WARATAH NSW 2298
Tel. 4985 3100
Fax. 4985 3105
AGSA

Association of Genetic Support of Australasia Inc.
66 Albion Street
SURRY HILLS NSW 2010
Tel. 9211 1462
Fax. 9211 8077
Email. agsa@ozemail.com.au
Web. www.agsa-geneticsupport.org.au

Further Information
On services in other areas and newly developed services:

NSW Genetic Education Program
PO Box 317
ST LEONARDS NSW 2065
Tel. 9926 7324
Fax. 9906 7529
Web. www.genetics.com.au