



CONTROL CLINICAL PROFORMA

Department of Biochemistry

Faculty of Science



The Maharaja Sayajirao University of Baroda, Vadodara, Gujarat- 390 002

Date: _____

Name: _____

Age: _____

Sex: _____

Address _____

Marital status: Married/Single

Religion:

Blood Group:

Occupation: _____

Income: _____

Education: _____

Native place: _____

1. Any Disease (including Vitiligo):

2. Personal history

Diet: Veg/ nonveg/ ovoveg/ mixed

Routine food: _____

3. Habits: Smoking/ tobacco chewing/ alcoholism

I, _____ have understood the aim of

this study and willing to donate 5 ml blood sample for this purpose.

Signature