

<u>Patient Details</u> Surname: _____ Forename: _____ DOB: _____ Sex: M / F Hospital Number: _____ Laboratory Accession no.: _____ NHS Number: _____	<u>Referring Hospital</u> Department: _____ Hospital: _____ Consultant: _____ E-mail for report: _____
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Routine
 Urgent
 If urgent, please state why and give date if applicable

% of nucleated cells that are malignant:

Diagnosis/Reason for Referral:

<u>Sample type</u> <input type="checkbox"/> BM (FFPE) <input type="checkbox"/> LN (FFPE) <input type="checkbox"/> FNA/EBUS/fluid (FFPE) <input type="checkbox"/> Needle core biopsy <input type="checkbox"/> Resection <input type="checkbox"/> ThinPrep <input type="checkbox"/> Other (please specify) Accompanying IHC/H&E slide stained for:	<u>FISH</u> <input type="checkbox"/> DLBCL panel (5xUSS) <input type="checkbox"/> IGH-BCL2 (2xUSS) <input type="checkbox"/> IGH-CCND1 (2xUSS) <input type="checkbox"/> MALT panel (4xUSS) <input type="checkbox"/> UroVysion (Thinprep) <input type="checkbox"/> HER2 (3xUSS) <input type="checkbox"/> ALK (2xUSS) <input type="checkbox"/> ROS1 (2xUSS) <input type="checkbox"/> Other (please specify)	<u>DNA Panel</u> <input type="checkbox"/> M1.1 CRC (NRAS, KRAS, BRAF) <input type="checkbox"/> M4.1 NSCLC (EGFR, KRAS, NRAS, BRAF) <input type="checkbox"/> M7.1 Melanoma (BRAF, NRAS) <input type="checkbox"/> M8.1 GIST (KIT, PDGFRA) <input type="checkbox"/> Other (please specify)
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Address for samples

Genetics Laboratories, 5th Floor Tower Wing, Guy's Hospital, Great Maze Pond, London SE1 9RT
 Telephone: 020 7188 1709

In submitting this sample the clinician confirms that consent has been obtained for testing and possible storage

Sample requirements:

Samples for FISH analysis

- FFPE tissue sections for FISH – 3-4µm sections on unstained coated/charged slides with appropriate IHC*/H&E section for correlation
*For HER2 FISH this must be Her2 IHC
- Samples for UroVysion FISH assay – unstained ThinPrep slides

Curis/scrolls for molecular testing

- If the tumour cellularity of the whole section is >20% curls/scrolls of paraffin sections are acceptable. Please send in a sealed single-use microtube, either 1.5ml or 2ml. Ideally 5 sections of 10micron thickness should be submitted.
- Please do not send curls with an overall tumour cellularity of <20%;

Slides for molecular testing

- 5 sections of 10 micron thickness on uncharged unstained glass slides are required.
- The slides must be clearly labelled with the sample histology number and patient surname.
- An H&E section at 4micron should be submitted with the unstained sections – this can be the diagnostic H&E or an additional slide cut at the same time as the unstained sections. This slide should be submitted with the USS and the request form
- The area of the tumour must be outlined on the H&E section with a permanent marker pen: this will allow microdissection if necessary.

Cellular Pathology	Date requested	Date cut	Date dispatched
Cancer Genetics	Date received	Time received	

Filename	LF-G-CGCellPathRef	Version	1.0
Author	Nicola Foot	Issue date	29/07/2021
Authorised by	Nicola Foot	Page 1 of 1	