MOLECULAR HAEMATOLOGY – FFPE SAMPLE GENETIC TEST REQUEST FORM

Contact details: North East Scotland Genetics Service, NHS Grampian, Polwarth Building, Foresterhill, Aberdeen AB25 2ZD.
Tel: 01224 553893 / 553820. Email: gram.molgen@nhs.scot web: www.nhsgrampian.org/medicalgenetics

Essential Patient Demographics (Patient label can be used)		
Forename:	Surname:	
CHI No.:	Date of Birth:	Male / Female (Circle as appropriate)
Address (**must** include postcode):		**Postcode:**

Essential Sample Information

Reason for Referral: (*Please include histological diagnosis and clinical information*)

Referring Clinician(s):	Ward / Clinic:	Referring Pathologist(s):

External Pathology No. (If appropriate):	Aberdeen Pathology No. (Please include PB/PD):	Block / Part No.:	Estimation of Tumour %*:	Scrape all / Marked area* (Circle as appropriate)

Tumour Sample Type (circle as appropriate): Biopsy / Resection / Cytology / Other (please state):

Tumour Sample Site: Primary or Metastasis (circle as appropriate)

*** Tumour tissue: estimation of tumour content is essential; macrodissection to maximise tumour content is desirable, where possible**

Test(s) requested (Please tick)
Please check the SSNGM Cancer Test Directory for available testing and referral criteria https://www.genomics.nhs.scot/test-directories/

Targeted Tests		
Clonality	*Ig* rearrangement	
	TCR rearrangement	
CLL / SLL	*TP53* only	
LPL	*MYD88*	
Systemic mastocytosis	*KIT*	
Hairy cell leukaemia	*BRAF*	

Additional information:

Other tests - please state tumour type, analysis required and reason:

Lymphoid NGS sub-panel [DNA sequence variants only, see page 2 for genes]	
Chronic Lymphoid Neoplasms	
B-cell Lymphoma	
T-cell Lymphoma	
Plasma Cell Myeloma	
Histiocytic Neoplasms	

NGS to assist with:	
Diagnosis	
Prognosis / risk	
Treatment	
Discussed at MDT?	

Clinical justification for lymphoid NGS testing [essential for test activation]:

*** PLEASE PROVIDE 3 x 5µM PER TEST, WHERE POSSIBLE ***

Pathology Audit trail (2 staff members must check that the correct block is cut and slides labelled correctly) **** please use Genetics microtome ****

Date request received:	Block collected/Apex checked by:	Block cut by:	Block / slide label check: QA1:- QA2:-

Date given to Pathologist for marking: Date to Genetics:

Reports will be made available on SCI Store

Incomplete or illegible referral forms may lead to sample rejection and a delay in testing

Table 1. Lymphoid NGS subpanel content

Lymphoid DNA subpanel	Genes
Chronic Lymphoid Neoplasms [CLN]	*ATM, BCL2, BIRC3, BRAF, BTK, CARD11, CCND1, CD79B, CDKN2A, CXCR4, EZH2, FBXW7, KLF2, KLHL6, KRAS, MAP2K1, MYD88, NOTCH1, NOTCH2, NRAS, PIK3CA, PLCG2, POT1, SF3B1, TNFAIP3, TP53, XPO1*
B-cell Lymphoma [BCL]	*ARID1A, ATM, B2M, BCL2, BIRC3, BRAF, BTK, CARD11, CCND1, CCND3, CCR6, CD58, CD79A, CD79B, CDKN2A, CREBBP, CRLF2, CXCR4, EP300, ETV6, EZH2, FBXW7, FOXO1, GNA13, GPR34, ID3, JAK2, KIT, KLF2, KLHL6, KMT2D, KRAS, MAP2K1, MYC, MYD88, NOTCH1, NOTCH2, NRAS, PIK3CA, PIM1, PLCG2, POT1, PTEN, RHOA, SF3B1, SOCS1, STAT6, SYK, TCF3, TNFAIP3, TNFRSF14, TP53, XPO1*
T-cell Lymphoma [TCL]	*ARID1A, CARD11, CD28, CDKN2A, CXCR4, DNMT3A, EP300, ETV6, EZH2, FOXO1, IDH1, IDH2, JAK1, JAK3, KIT, KMT2D, KRAS, NOTCH1, NRAS, PLCG1, RHOA, STAT3, STAT5B, TET2, TP53*
Plasma cell myeloma [PCM]	*BIRC3, BRAF, CCND1, CDKN2A, CXCR4, IDH1, IDH2, IKZF1, KRAS, MYC, MYD88, NRAS, PIK3CA, PIM1, STAT3, TP53*
Histiocytic Neoplasms [HIS]	*BRAF, CDKN2A, KRAS, MAP2K1, NRAS, PIK3CA, PIK3CD, PTEN, PTPN1*