IMPERIAL SIHMDS REQUEST FORM G-Block, Level 2, Hammersmith Hospital, Du Cane Road, London, W12 0HS SPECIMEN RECEPTION HOURS: 9AM-5PM Monday-Friday CYTOGENETICS: 020 3313 1503/2169 imperial.cytogenetics@nhs.net IMMUNOPHENOTYPING: 020 3313 1504 imperial.immunophenotyping@nhs.net MOLECULAR GENETICS: 020 3313 2179 imperial.moleculardiagnostics@nhs.net					North West London Pathology Inster Hospital Imperial College Healthcare NHS Foundation Trust NHS Foundation Trust Laboratory use only
Patient Information         [Alternatively, place patient sticker here.]         Surname         Forename         Date of Birth         Hospital No.         NHS No.         FEMALE       M.		Referral Infor NHS Consultant/STR Hospital Mobile/Bleep EMAIL (nhs.net) Invoicing details (if different from referrer, please provide phone/email)	PRIVAT	_	Sample Information         SAMPLE         REFERENCE No.         Date taken         Time taken         Sample type (please tick):         Blood       Other (please specify):         BM aspirate         BM trephine
For BMT patients: Pre-BM	IT Pos	st-BMT Monitoring	Sex of Donor	MALE ? FEMALE	INFECTION RISK? YES NO If Yes, please provide details):
	tion that is re	elevant to the requested to	sts includi	ng )	BM TREPHINE BIOPSY         **in AZF please**         SITE: PSIC: RIGHT         LEFT         Other site         Bone Consistency:         NORMAL       SOFT         Operator: Dr         MORPHOLOGY         Please ensure that a recent PB film is provided         BMA         Total No of Slides

Please select the studies required from each laboratory and send separate samples for each department. (A minimum of 3-5ml of blood required except for BCR-ABL/PML-RARA which requires 20ml of blood). Molecular and cytogenetics samples must arrive <72 hours after being taken; immunophenotyping samples must be fresh (<24hours old), otherwise store at 2-4°C for upto 48hours

### **IMMUNOPHENOTYPING**

#### (Samples must arrive before

2pm on Friday) \*\* Blood/Bone marrow in EDTA please \*\* \*\* CSF in universal containers only \*\*

Please select tests: PNH (PB only)

> Immunophenotyping Ab Panels will be set up according to supected diagnosis,clinical details are essential

Please send a fresh PB/BM film

Hb (g/L)

WBC (x109/L)

Plts (x109/L)

Lymphocytes (x10<sup>9</sup>/L)

Blasts (%)

Paraprotein (g/L)

Does the patient have any of the following:

Splenomegaly

Lymphadenopathy

Hepatomegaly

# **CYTOGENETICS**

(Samples must arrive before 3pm on Friday)

\*\* in Lithium Heparin or transport medium please \*\*

Please select tests:

### G-banded karyotype

#### FISH:

Myeloma diagnosis

Myeloma relapse

CLL full panel CLL

(TP53 only)

Eosinophilia panel

**Other FISH tests** 

(Please specify below):

Please note: If diagnostic karyotype/ FISH has been done elsewhere, a full copy of the report should be emailed to: imperial.cytogenetics @nhs.net

# MOLECULAR DIAGNOSTICS

Iron stain? YES

(Samples must arrive before 3pm on Friday) \*\*Blood/Bone marrow in EDTA please \*\*

Please select test/s:

BCR-ABL1 qPCR (requires 20ml PB)

**TKD Mutation analysis** 

Transcript type(If Mx done elsewhere)

MPN (NGS) Panel

(incl. JAK2, CALR, MPL)

Myeloid (NGS) Panel (for AML, MDS)

GTC store (all new AL) (for DNA/RNA future testing)

FLT3/NPM1(at diagnosis)

AML MRD (PML/RARA qPCR, RUNX1-RUNX1T1,CBF-MYH11, NPM1<sup>mut</sup> MRD Please especify:

cKIT mutation (mastocytosis)

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Other molecular tests (please indicate below)

B-cell clonality T-cell clonality IgH mutation status(CLL)

NILIS

P53mutation (CLL)

MYD88 mut

NO

(For haemoglobinopathy investigations, please include FBC results and HPLC/PE trace, if available)

Alpha globin deletions

Beta globin sequencing

Alpha globin sequencing

Xmn1 Polymorphism

Triplicated alpha gene

Alpha MLPA

Beta MLPA

Red cell gene panel (NGS)