

Genetic Testing Request Form Rare Disease

Lab Use Only

Lab No:

Date received:

		oratory rran								Date	ccc. v ca.		
Patient In	availabl	e					Requesting Consultant / Genetic Counsellor						
NHS No:				D.O.B:					Full Name				
Surname:					Sex:					Contact E-mail:			
Forename:					Ethnicity:					Hospital:			
Patient's				Hospital No:					Ward /Clinic:				
Address: Postcode:					Clinical Genetics I	No:				Address/Email for report:			
R208 Test: Inherited brea						ancer	and	ovaria	ın caı	ncer			
R444 Test: NICE approved PAR						P inhil	bitor	treatm	ent				
Please tick if u rgent							PLEASE TICK BELOW TO INDICATE HOW THIS PATIENT MEETS CRITERIA						
PLEASE SPECIFY REAS URGENCY	rwent breast conservation, only slanned avant chemotherapy, consider				R208	family histor	Living affected individual (proband) with breast* or high grade ovarian cancer where the individual +/- family history meets one of the criteria. The proband has: Breast cancer (age <40 years)						
Other relevant details:								Bilateral breast cancer (<50 years) Triple negative breast cancer (<60 years)					
Cities relevant details.								Male breast cancer (any age) Breast cancer (age <45 years) and a 1st degree relative with breast cancer (<45 years)					
							Combined pathology-adjusted Manchester score ≥15 BOADICEA/CanRisk score ≥10% Ashkenazi Jewish ancestry and breast cancer at any a					adjusted score of ≥10 or	
Extracted DNA will be stored in the laboratory, please							R444	For people v	or people with triple negative breast cancer who have received neo-adjuvant chemotherapy with residual				
tick box if consent for storage has \underline{NOT} been given \square								invasive cancer in the breast, the resected lymph nodes / both at the time of surgery For people with triple-negative breast cancer having adjuvant chemotherapy (node-positive OR node-					
								negative car	ncer with a	a primary tumour ≥ 2 cm)			
								For people with hormone receptor-positive, HER2-negative breast cancer who have received neoadjuvant chemotherapy, WITH residual invasive cancer in the breast OR the resected lymph nodes (non-pathologic complete response) OR BOTH at the time of surgery, AND a CPS + EG score of 23 based on pre treatment clinical and post-treatment pathological stage, receptor status and histological grade					
								For people with hormone receptor-positive, HER2-negative breast cancer having adjuvant chemotherapy who have 4 or more pathologically confirmed positive lymph nodes					
Specimen details Samp			Date:						Blood (2 - 5ml)	Taken by:			
						•		<u>, </u>			•	•	
North East Gen	Once taken, samples should be sent to your local Genetics Laboratory Please ensure a minimum of 3 matching identifiers on tubes and form Samples packed according to UN3373 / P1650 and sent 1st class post will normally be suitable for DNA extraction. Please store samples at 4°C if they cannot be transported the same day.												
Nev		astle Gen	atory		<u>N</u>	NUTH.	.DNA@nhs.net						
Ge	Central Parkway Newcastle upon Tyne					0	191 2	241 8787/8775/8	8754				
Lab	Tyne and Wear NE1 3BZ					www.newcastlelaboratories.com/lab_service/laboratory-rare-diseases-services/							