

## SOUTH EAST HMDS REQUEST FORM



Genomic Laboratory	пиы		Poguet forms	from: waves cour	theastgenomics.nhs.uk				
	All field	ds are mandatory.			plete forms may resul	t in delays	or rejection.		
Last name:		Sex: Male/ Female/ Intersex/ Not specified			ed *White:	British ☐ Irish ☐ Any Other White Background ☐			
First name:		Transgender:	MTF / FTM		Mixed:		White And Black Caribbean ☐ White And Black African ☐ White And Asian ☐		
DOB: (dd/mm/yyyy)					Asianau	Any Other Mixed Background ☐ an or Indian ☐ Pakistani ☐ Bangladeshi ☐			
NHS number*:					Asian or Asian British:		er Asian Backgrou	•	
Hospital no: Or		riginating Lab No:			Black or Black British:	Caribbean □ African □ Any Other Black Background □			
		urchase Order No:			Other Ethnic	Chinese ☐ Any Other Ethnic Group ☐			
Non-NHSE Funded i.e. Research / Private (attac					Groups:  Not stated □	Not Kno	(please specify:)  Not Known		
						1 TOC KITC			
Indication for testing	<b>ig:</b> □ New Di	agnosis 🗆 Sta	aging /Progn	nosis 🗆 Di	sease Monitoring/MF	RD^ □	Transplant	URGENT (provide details)	
Suspected Diagnosis	Clinical	Details (inc	luding red	cent target	ed immunothera	ny treat	ment)·	FBC: date (dd/mm/yy)	
				•			•	Hb/PCV	
☐ MPN (non-CML)  ^MRD Testing - Indicate course number (#				) & aa	ys post-chemotherap	yy transpit	ant (#)	MCV	
☐ Mastocytosis								WBC	
·	□ CEL/HES							Neutrophils	
☐ MDS/MPN							Lymphocytes		
☐ MDS									
	All our testing is based on clinical/diagnostic info			mation, so please provide as much detail as possible				Monocytes	
☐ AML ☐ Myeloma							Eosinophils		
☐ CLL/LPD		nome Sequenc		id AML]			Platelets		
☐ Somatic Sample (PB / BM in EDTA)			•					Blast count	
☐ Histiocytic/Dendritic		-		<i>I Container in saline)</i> / Other – please specify				Paraprotein:	
☐ Aplastic Anaemia/PNH	☐ NHSE R	ecord of Discussi	ion Form at	ttached * *These are mandatory for WGS to p			to proceed.	Isotype G /A /M K / L	
☐ Unknown/Other	☐ Confirm	'Fit for Treatme	ent'					Quantification	
Specimens:   slice	des x3 🗆 PE	B	te 🗆 BM	1 Trephine	☐ Lymph Node ☐	□ Skin	☐ Other (please	specify)	
Immunophenotyping/N		_ · · ·		•	:/Relapse (B	_		nics: Monitoring	
		Genom For ALL rec	nics: Dia	agnostic	:/Relapse (B	MA)	Genom MRD samp	nics: Monitoring	
Immunophenotyping/N		Genom For ALL rec	nics: Dia	agnostic	/Relapse (B relapse/full reassessi to arrive within 48 ho	MA)	Genom  MRD samp	nics: Monitoring ples to arrive Mon-Thurs rrive within 24 hours	
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Immunophenotyping/N    Immunophenotyping   (EDTA + 3 unstained slides)   PNH (PB EDTA only)   Disease monitoring (ALL,   Special Samples:   Ascites/Pleural/Pericard   (Universal sterile container   Full Aspirate Morphology   (3 unstained slides)   Histology/Cytopathology   Genomic testing   Second opinion   Histiocytosis investigation   CLINICIAN DETAILS   Requesting Clinician / Consultation of the sterile contact: Phone / Bleep	AML, CLL, MM, terile containers) dial fluid (r)	Genom  For ALL rec please ser  Genomic to Appropriate test details and bloo samples sent.  S  Myeloid: (EDT)  MPN Panel (JA CML exclusion Rapid FISH Bosinophilia B Myeloid Gene	quests on ne nd the follow ests as pe ts will be refl d counts are pecified.  (A)  (BCR::ABL1 required else panel else panel	agnostice w diagnosis/wing samples • Lithium • EDTA er clinical de lexed in SE-HI e as accurate a d Genor Lym   Lym   CL   + (p)   G   Ly   IG   IG   IG   IG   IG   IG   IG   I	c/Relapse (B) relapse/full reassessite arrive within 48 ho Hep x2 retails/morpholog WDS, so please ensure is possible, and sufficient is possi	ment purs:  sy/flow e clinical ient  3)  + SNP-A  CLL) anel // YES/NO not be proce dsreceptio	Genom  MRD samy Must a  BCR::ABL1 1  BCR::ABL1 1  *Please indica  FIP1L1::PDC  AML molecu  FISH (LH/ED)  Transplant/ add CD1  Details:  Essed)  n@nhs.net (default	ples to arrive Mon-Thurs  prive within 24 hours  monitoring (20ml PB EDTA)*  TKD mutation (20ml PB EDTA)*  te transcript type in clinical details.  GFRA (monitoring only)  cular MRD (Paired PB and BM)  ther:  [Iar MRD  TA)  Chimerism (PB and BM)  9 (for B-LPD/B-ALL)  Time (hh:mm)  t for most enquiries)	
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Immunophenotyping/N  Immunophenotyping (EDTA + 3 unstained slides) PNH (PB EDTA only) Disease monitoring (ALL, Special Samples: Ascites/Pleural/Pericard (Universal sterile container) Full Aspirate Morphology (3 unstained slides) Histology/Cytopatholo Biopsy site: Morphology/IHC Genomic testing Second opinion Histiocytosis investigation  CLINICIAN DETAILS Requesting Clinician / Consultated Supplements Clinician Group E-mail: Contact: Phone / Bleep Please send ALL samples	AML, CLL, MM, terile containers) dial fluid () () () () Report () () () () () () () () () () () () ()	Genomic to Appropriate test details and bloo samples sent.  S  Myeloid: (EDT)  MPN Panel (JA)  CML exclusion Rapid FISH Myeloid Gene Germline varian	ests as pe ts will be refid d counts are  pecifie  (A)  (BCR::ABL1 required FISH panel e Panel t confirmation	agnostice w diagnosis/wing samples • Lithium • EDTA er clinical de lexed in SE-HP e as accurate a de lexed in SE-HP   CL + (p)   Global	c/Relapse (B) relapse/full reassessite arrive within 48 hotelep x2 retails/morpholog MDS, so please ensures possible, and sufficient spossible, and	ment purs:  sy/flow e clinical ient  3)  + SNP-A  CLL) anel // // // // // // // // // // // // //	Genom  MRD samy Must a  BCR::ABL1   BCR::ABL1   *Please indica FIP1L1::PDC AML molecu FISH (LH/EDT Transplant/ add CD1  Details:   Sessed     M@nhs.net (default     Insultants@nhs.net (sefault     Synnovis.imn     h-tr.cytogeneticsia	poles to arrive Mon-Thurs  poles to arrive Mon-Thurs  prive within 24 hours  monitoring (20ml PB EDTA)*  TKD mutation (20ml PB EDTA)*  te transcript type in clinical details.  GFRA (monitoring only)  cular MRD (Paired PB and BM)  pher:  lar MRD  TA)  (Chimerism (PB and BM)  9 (for B-LPD/B-ALL)  Time (hh:mm)  te for most enquiries)  et nunophenotypingkch@nhs.net aboratory@nhs.net	