WGLS use only

W

Ref Reason:

Initials:
DNA loc:

Date of receipt:

Investigation(s):

Early Release:
In before?

Wessex Genomics Laboratory Service (Salisbury)
Salisbury District Hospital, Salisbury, Wilts. SP2 8BJ
Tel.: +44(0)12381 207100
E-mail: shc-tr.WRGLdutyscientist@nhs.net
Web: www.wrgl.org.uk

UKAS MEDICAL
9005

HAEMATOLOGY GENETICS

PATIENT DETAILS

SURNAME	DATE OF BIRTH	SEX: M/F	Referring Consultant
FORENAME	NHS NUMBER		Hospital / Department
Postcode	Hospital number		Clinician's contact number
NHS England / Other NHS / Private (Address for invoicing if not NHS England):	Additional copies of the report to		Clinician's NHS.net email @nhs.net

Test Selection: please refer to the National Genomics Test Directory clinical indication details (https://www.england.nhs.uk/publication/national-genomic-test-directories/)

Clinical Details / Suspected Diagnosis

New case: Y / N

Specimen type (circle as appropriate):
BM Blood Other (*please specify*):

Date of collection: Collected by:

Bone marrow transplant: Y / N
If yes, BMT date: donor: M / F
Auto / Sib / VUD / Cord / Haplo

History of (circle as appropriate):
chemotherapy radiotherapy exposure to mutagens

Previous genetic investigation/s : Y / N If yes, relevant details:

Culture only Y / N

Genetics test request(s) √

Myeloid disorders (MDS, MPN, MDS/MPN, AML, CML*) *CML chronic phase is not a clinical indication for myeloid NGS panel

G-banding ☐ FISH ☐ …….…….... Myeloid NGS panel ☐

Molecular tests specific to AML

FLT3-ITD ☐ *FLT3*-TKD ☐ *NPM1* ☐ *IDH1/IDH2* ☐ *TP53* sequencing ☐

Molecular tests specific to MPN, Myeloid/Lymphoid Neoplasms with Eosinophilia, Mastocytosis

MPN panel (*JAK2* V617F/*CALR/ MPL/JAK2* exon 12)# ☐

KIT D816V ☐ Extended *KIT* panel (if D816V neg) ☐ *FIP1L1-PDGFRA* (diagnosis &monitoring) ☐

For rare translocations or other abnormalities in MPN and MDS/MPN, email or phone to discuss
#Samples referred for MPN panel by GPs will be sent to the relevant consultant haematologist only

ALL (T- & B-)

G-banding/SNP array ☐ FISH ☐

Lymphoid (Mature: CLL, NHL, HCL, etc.)

FISH ☐ ……..... Sequencing: *TP53* ☐ *BRAF* V600 ☐

Myeloma

Paraprotein type ……. Paraprotein level ……. % Plasma cells in BM .....

Diagnosis confirmed? If Yes please circle as appropriate: MGUS SMM MM PCL Plasmacytoma

CD138-positive selection only (storage) ☐ Myeloma FISH panel ☐

In submitting this sample the clinician confirms that consent has been obtained for testing and storage.
Anonymised stored samples may be used for quality control procedures including validation of new genetic tests.

NHS Central & South Genomic Laboratory Hub

SPECIMEN REQUIREMENTS: Haematological genetics
(Includes Karyotyping, FISH, RT PCR and mutation testing)

Sample type

BM:

• Conventional cytogenetics for acute leukaemias, MDS, MPD, MDS/MPN and AA: 0.5- 1ml in transport medium [but lithium heparin (LH) accepted].

• For new paediatric acute leukaemias also send KCH (3 drops of BM in KCH to be fixed at referring laboratory); if transport medium is not available, send sample in LH.

• *KIT,* Myeloid NGS panel, MPN panel, *FIP1L1/PDGFRA*: 2-3ml in EDTA; however, material sent in transport medium or LH is accepted.

PB:

• Conventional cytogenetics for new diagnosis CML, myelofibrosis or new acute leukaemias if no BM available: 5ml in LH.

• FISH for CLL/MCL and *TP53* mutation testing: 5ml in LH (but EDTA accepted).

• Molecular studies of *JAK2*, *CALR*, *MPL*, myeloid NGS panel, etc.: 5ml in EDTA (but LH accepted).

• *FIP1L1/PDGFRA*: 10ml in EDTA/LH.

Smears: for CLL or NHL with suitable FISH markers, FISH can be attempted on freshly made, unfixed, unstained smears (at least 4 smears) if no fresh material is available. FISH could be attempted on smears that have been stored for some time if no other material available.

Biopsies: FFPE sections / tumour dabs: slides containing unstained FFPE sections (3-4µm mounted onto positively charged slides) or tumour dabs should contain at least 2 patient identifiers. Please package in a slide box. For large FFPE sections, please also send H&E slide with the tumour area appropriately marked.

Other Tissues: lymph node, spleen, skin etc. should be sent in transport medium upon previous discussion with the laboratory.

Please phone as soon as possible if anything is sent by courier which might arrive outside normal working hours. There is an on-call rota for acute presentations and Burkitt lymphoma after hours on a Friday or at the weekend (please phone the switch board on 01722 336262).

SAMPLE DESPATCH AND TRANSPORT

Sample and referral form should be sent **together** in a secure leak-proof package (hard cardboard box not a padded envelope) according to UN3373 shipment classification and packaging instructions P650, to arrive as soon as possible after collection. Outside packaging should be clearly labelled **'PATHOLOGICAL SAMPLE FOR DELIVERY TO GENETICS'.** Opening hours are 9 am - 5.30 pm, Mon-Fri.

Samples must be received by the lab as soon as possible. They should therefore be despatched by hospital transport, courier or 1st class post clearly labelled 'urgent'. Please phone us as soon as possible if anything is sent by courier which might arrive outside normal working hours. There is an on-call rota for acute presentations after hours on a Friday or at the weekend (please phone the switch board on 01722 336262).

For current information and to download copies of our referral forms and service guides, please refer to our website: www.wrgl.org.uk