

## Request for FGFR2 analysis by FISH

### All Wales Medical Genomics Laboratory

<b>Fill in patient details below – or affix addressograph</b>				
Patient Forename:				Clinician (address report to):
Patient Surname:				Requested by:
DoB:		Sex:		NHS number:
Hospital Name ( <i>essential for report</i> )				
Address:		Hospital Number:		<b>Email Addresses (<i>for reports</i>):</b> oncologists/pathologists/MDT coordinators) ( <i>NHS Wales or NHS.net</i> )
Postcode:		Alternative Hospital no:		
		Date requested:		
<b>Please note: Gene analysis relies on sampling tumour tissue only.</b>				
<b>Tissues blocks for genomic analysis can no longer be accepted.</b>				
<b>Next 5 boxes- For pathology Laboratory to fill in/ for correspondence regarding tissue.</b>				
Pathologist:		Pathology Hospital:		Block Number:
Sampling method, biopsy type and fixation method.			Date sample sent to AWMGS	<b>Please Inform laboratory if insufficient/limited material.</b>
Relevant Clinical Summary (e.g. tumour histology) <i>Please also attach appropriate pathology report</i>				
<b>Please indicate analysis required:</b>	<b>Please provide:</b>			
<input type="checkbox"/> FGFR2 FISH	<p><b>1 x H&amp;E stained slide</b> with area of highest neoplastic cell content CLEARLY circled (use of fine black marker recommended).</p> <p><u>AND</u></p> <p><b>FGFR2 FISH: 3 x 3-4µM sections</b> (singly mounted) on <b>charged/adhesion slides</b></p> <p><b>Please state the approximate % neoplastic cell content present in the H&amp;E highlighted tumour area _____%</b></p> <p>A copy of the report will be returned to you once the analysis is complete.</p>			
<b>Funding (information mandatory for testing):</b>				
<input type="checkbox"/> Welsh NHS patient – WHSSC-funded <input type="checkbox"/> Other (please specify): _____				
<p>Please complete this request form and send with the sample to:</p> <p>All Wales Medical Genomics Laboratory, Institute of Medical Genetics, University Hospital of Wales, Heath Park, Cardiff CF14 4XW</p> <p>Laboratory contact details for enquiries: Phone – 0292 1842641 Email: <a href="mailto:lab.genetics.cav@wales.nhs.uk">lab.genetics.cav@wales.nhs.uk</a></p> <p>For further information on testing please refer to the AWGL website <a href="https://www.medicalgenomicswales.co.uk/">https://www.medicalgenomicswales.co.uk/</a></p>				