

**Request for RAS analysis of circulating tumour DNA (ctDNA) for CRC patients**  
**All Wales Genomics Laboratory**

Patient forename		Surname	Lead Consultant
Date of Birth	Sex	Hospital	Requested by
Address    Postcode		Hospital number	<b>DATA ESSENTIAL FOR PROCESSING</b> <b>Report to:</b> Oncologist <input type="checkbox"/> Email address (Wales only) or fax number <hr/> Pathologist <input type="checkbox"/> Email address (Wales only) or fax number <hr/> MDT Co-ordinator <input type="checkbox"/> Email address (Wales only) or fax number
		NHS Number (or affix addressogram)	
		Alternative Hospital number	
		Date requested	
Date sample taken:		Time sample taken:	Sample taken by:
<b>Relevant clinical details:</b>			
<b>Please provide:</b> <input checked="" type="checkbox"/> 8-10ml blood (whole) in Streck Cell-Free DNA BCT® tube or Janssen CellSave Preservative Tubes <input checked="" type="checkbox"/> Samples should be dispatched as soon as possible to reach Laboratory Genetics within 96hrs <input checked="" type="checkbox"/> Please notify lab of sample arrival via email at: <a href="mailto:lab.genetics@wales.nhs.uk">lab.genetics@wales.nhs.uk</a> <input checked="" type="checkbox"/> The sample should not be frozen <input checked="" type="checkbox"/> DO NOT SEND SAMPLES TO THE LAB ON FRIDAYS Samples should be dispatched as soon as possible as the patient's treatment is dependent upon the molecular analysis. A copy of the molecular report will be returned to you once the analysis is complete.			
<b>Funding for requested analysis</b> (tests will not be undertaken if this is not stated)			
1. Welsh NHS patient		<input type="checkbox"/>	Funding is covered for these patients
2. Private patients		<input type="checkbox"/>	Please provide insurance company and policy/claim number– referring clinician will be invoiced otherwise
3. Other		<input type="checkbox"/>	Please specify invoicing details – referring clinician will be invoiced unless otherwise stated
<b>Please complete this form and send with the sample to:</b> All Wales Genomics Laboratory, Institute of Medical Genetics, University Hospital of Wales, Heath Park, Cardiff CF14 4XW Laboratory contact details for enquiries: Phone - 02921 842641 Email - <a href="mailto:lab.genetics@wales.nhs.uk">lab.genetics@wales.nhs.uk</a>			
<b>Laboratory Genetics</b>			
Date request activated (Lab Gen)		Laboratory number(s)	