

**Request for MYD88 Analysis  
All Wales Genomics Laboratory**

<b>Fill in patient details below – or affix addressograph (top left)</b>			
Patient Forename:			Requested by:
Patient Surname:			
DOB:		NHS number:	Hospital Name (essential for report)
Sex:		Hospital number:	Email Addresses (for reports): (NHS Wales or NHS.net)
Address:	Alternative Hospital no:		
	Date requested:		
<b>Please note: Gene analysis relies on sampling tumour tissue. Tissues blocks for genomic analysis can no longer be accepted.</b>			
<b>This section is for completion by Pathology Laboratory.</b>			
Pathologist:	Pathology Hospital:		Block Number(s) (Please State sub-blocks sent):
L,XXX Number:	Sampling method, biopsy type (including size) and fixation method:		Date sample sent to AWMGS:
Relevant Clinical Summary (e.g. tumour histology) Please also attach appropriate pathology report			
<b>Please provide: 5µM sections of Formalin-Fixed Paraffin-Embedded (FFPE) tissue scrolls, bone marrow sample or peripheral blood sample in EDTA, where there is a suspicion of a lymphoproliferative disorder.</b> Bone marrow samples are to be sent in sterile transport medium supplied by the laboratory or in lithium heparin blood tubes. Please note, for 2cm biopsies (5 scroll/tube), 1cm (6-8), 0.5cm (8-10) and skin punch biopsies/ trucut biopsies/ fragments of biopsies (15). Please provide the appropriate pathology report along with the test request. A copy of the report will be returned to you once the analysis is complete.			
<b>Test:</b>	<b>Test Directory:</b>	<b>Sample Type:</b>	<b>Technology:</b>
MYD88	M104.2	BM    PB    FFPE	Digital Droplet PCR
Date Sections Cut:	Sections Cut By:	No. of Sections (Per Tube): _____	
Label Check (Form/Block(s)):	Transfer Check (Sections/Tube):	Fresh Sample Stored:    Yes                      No	

In the event of insufficient tissue/low cellularity/low neoplastic cell content samples, please discuss with AWMGS appropriate alternate routes of testing before sending samples.

**Samples should be dispatched as soon as possible as the patient's treatment is dependent upon the molecular analysis**

For further information on testing and further details on panels used please, refer to the AWMGL website:

<https://www.medicalgenomicswales.co.uk/>

Please complete this request form and send with the sample to:

All Wales Medical Genomics Laboratory, Institute of Medical Genetics,  
University Hospital of Wales, Heath Park, Cardiff CF14 4XW

Laboratory contact details for enquiries: Phone – 02921 842641 Email: [lab.genetics.cav@wales.nhs.uk](mailto:lab.genetics.cav@wales.nhs.uk)

Previous Results:      Yes                      NO

Comments:

Results (Worksheet number):

Summary:

Primary Analyst:

Secondary Analyst: