

MOLECULAR PATHOLOGY SERVICE - **FISH** ANALYSIS REQUEST FORM

Send samples to: North East Scotland Genetics Service, NHS Grampian, Polwarth Building, Foresterhill, Aberdeen AB25 2ZD.
Tel: 01224 553893 / 553820. Email: gram.molgen@nhs.scot web: www.nhsgrampian.org/medicalgenetics

Essential Patient Demographics (Patient label can be used)						
Forename:			Surname:			
CHI No.:		Date of Birth:		Male / Female <small>(Circle as appropriate)</small>		
Address (<u>must</u> include postcode):						
						Postcode:
Essential Sample Information						
Reason for Referral: <i>(Please include histological diagnosis and clinical information, a copy of the original referral form may be attached)</i>						
Referring Clinician(s):			Ward:	Referring Pathologist(s):		
Tumour* / Normal <small>(Circle as appropriate)</small>	PB / PD / Other: <small>(Circle as appropriate)</small>	Specimen No:	Block / Part No.:	Estimation of Tumour %:	Marked area: YES / NO	HE/ICC slide attached: YES/NO
External Laboratory Specimen Number (if relevant):						
Tissue Type: Breast <input type="checkbox"/> Lymphoid <input type="checkbox"/> Other <input type="checkbox"/> (Please state) _____						
Required Sections per Test / Sections Submitted (Please Tick)						
Please send 3 slides for one FISH test requested. For any additional FISH tests please send one extra slide per test						
Most tumour sections (including lung and breast):				4µm thick on charged slides + 1 x H&E		
Lymphoid, sarcoma or any dense sections:				2µm thick on charged slides + 1 x H&E		
Test Requested						
HER-2 <input type="checkbox"/> MYC <input type="checkbox"/> BCL2 <input type="checkbox"/> Other <input type="checkbox"/> please list below:						
1. _____						
2. _____						
3. _____						
Reports will be made available on SCI Store						
Pathology Audit trail (2 staff members must check that the correct block is cut and slides labelled correctly)						
Date request received:		Block collected/Apex checked:		Cut by:	Block / Slide label check: QA1:- QA2:-	
Date given to Pathologist for marking:				Date to Genetics:		

Incomplete or illegible referral forms may lead to sample rejection and a delay in testing