Molecular Diagnostics Requisition

Test requested by: ____________________________
Signature: ____________________________
Date requested: __________/__________/__________
Tel.: __________ Fax: __________

Clinical history and provisional diagnosis:

Tissue source: ____________________________
Date requested: __________/__________/__________
Date received __________/__________/__________

Tissue Preparation:
- Paraffin (part# _____ block# ______)
- Frozen in OCT
- Fresh (RPMI)
- Brush tip in ETOH

Tissue/Specimen Preparation
- Fresh or Frozen Tissue: Please call the lab for instructions.
- Fixed Tissue: Paraffin block(s) or ten unstained sections 5 µm thick (on charged slides if FISH analysis is ordered) or more, depending on tissue volume. Submission of acid-decalcified tissue specimen is discouraged.

Please check the box(es) for test(s) requested:

PCR Tests
- BRAF mutation testing (exon 15)
  (Thyroid carcinoma, hairy cell leukemia and other solid tumors)
- DNA extraction
- EGFR mutation testing (exons 18-21)
  (NSCLC)
- FOXL2 mutation testing (exon 1)
  (Granulosa cell tumor and other ovarian neoplasms)
- Immunoglobulin heavy chain gene rearrangement/Clonality analysis
  (B cell lymphoma)
- KIT (c-Kit) mutation testing (exons 9, 11, 13, 17, 18)
  (GIST, melanoma and other solid tumors)
- KRAS mutation testing (exon 2)
  (Solid tumors and precancerous lesions)
- MGMT promoter DNA methylation
  (Gliomas)
- Microsatellite instability analysis (MSI)
  (HHPCC/Lynch syndrome)
- Mycobacterium tuberculosis
  (TB infection)
- T-cell receptor gene rearrangement/Clonality analysis
  (T cell lymphoma)
- Tissue DNA fingerprinting/Genotyping
  (Identity testing and hydatidiform moles)

FISH Tests
- ALK chromosomal rearrangement/translocation/inversion
  (Anaplastic large cell lymphoma and non–small cell lung cancer)
- BCL1 gene rearrangement/translocation t(11;14)
  (Mantle cell lymphoma)
- BCL2 gene rearrangement/translocation t(14;18)
  (Follicular cell lymphoma)
- Chromosome 1p/19q deletion
  (Oligodendroglioma)
- EGFR amplification
  (Glioblastoma and other brain tumors)
- EWS chromosomal rearrangement/translocation
  (Ewing's sarcoma/PNET, DSRCT, extraskeletal myxoid chondrosarcoma, and clear cell sarcoma of soft part)
- FGFR1 amplification
  (Lung and other solid tumors)
- HER2/ERBB2 amplification
  (Breast and other solid tumors)
- MET chromosomal amplification
  (Non–small cell lung cancer)
- MYC gene rearrangement/translocation
  (Burkitt's lymphoma and subset of diffuse large B cell lymphoma)
- RET chromosomal rearrangement/translocation
  (Non–small cell lung cancer)
- ROS1 chromosomal rearrangement/translocation
  (Non–small cell lung cancer)
- SYT gene rearrangement/translocation t(X;18)
  (Synovial sarcoma)
- TFE3 gene rearrangement
  (Renal cell carcinoma)
- UroVysion
  (Urothelial carcinoma)

Please forward this form and billing information to: Clinical Molecular Diagnostics Laboratory, CB557, 310 Cedar Street, New Haven, CT 06510
Tel 203-785-4492 or 203-737-2533, Fax 203-785-3896

For all medical issues, contact: Pei Hui, M.D., Ph.D., Clinical Director, Molecular Diagnostics Lab, Tel 203-785-6498, Pager 203-370-2609, Fax 203-737-4626 or Janina A. Longtine, M.D., Director, Molecular and Genomic Diagnostics, Tel 203-785-7193, Fax 203-785-6127

Website: medicine.yale.edu/pathology/diagnosticprograms/moleculardiagnostics/index.aspx

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