

FOR LAB USE ONLY

MOLECULAR DIAGNOSTIC REQUEST FORM

PATIENT INFORMATION	SAMPLE INFORMATION
NAME:	DATE OF COLLECTION: / / / TIME: / MM YY HH MM SAMPLE TYPE (Please select one) :
LAST NAME FIRST NAME	Blood, Specify (EDTA, clotted) First Voided Urine Bone Marrow Stool EDTA Plasma Nasopharyngeal Aspirate/Swab
ID/PASSPORT NO DATE OF BIRTH:// /YY	Serum Autocyte/ThinPrep Body Fluid, Specify Type: Swab, Specify Type: Tieves Consider Type:
CLINICAL DIAGNOSIS: GENDER FEMALE MALE	Tissue, Specify Type: Paraffin Embedded Tissue, Specify Type: Other, Please Specify:
	REPORTING INFORMATION
PATIENT CONSENT	PHYSICIAN:
	INSTITUTION:
☐ Confirmation of patient informed consent for genetic testing	PHONE: FAX:
	SIGNATURE: DATE (DD/MM/YY):
Please put a "√" in the box(es) to	indicate the test(s) to be performed.
Oncology Testing	Oncology Testing (Cont.)
☐ LUNG@MPD NGS Panel	RET Gene Hotspot Mutation Detection (exon 5, 8, 10, 11, 13-16)
Lung Cancer Panel I (EGFR, ALK FISH & ROS1 FISH)	☐ RET Gene Rearrangement Detection by FISH
Lung Cancer Panel II (BRAF, MET ex.14 skipping & ERBB2 ex.20)	ROS1 Gene Rearrangement Detection by FISH
Lung Cancer Panel III (EGFR, ALK IHC & ROS1 FISH)	☐ TERT Gene Promoter Mutation Detection
☐ COLON ^{@MPD} NGS Panel ☐ Colorectal Cancer Panel (KRAS, NRAS, BRAF & MSI)	Foundation Medicine / Oncotype
☐ ACTION ^{@MPD} NGS Panel	☐ FOUNDATIONONE CDx (324 cancer-related genes)
☐ Brain Cancer Panel (MGMT Promoter Methylation & Chromosome 1p/19q Deletion)	FOUNDATIONONE LIQUID CDx (324 cancer-related genes)
☐ Endometrial Adenocarcinoma Classification Panel (POLE, MMR IHC & p53 IHC)	FOUNDATIONONE HEME Tissue (406 (DNA) & 265 (RNA) cancer-related genes)
☐ BRCA1 & BRCA2 Gene Comprehensive Study	☐ Oncotype DX Breast Recurrence Score test ☐ Oncotype DX Colon Recurrence Score test
☐ KRAS & NRAS Gene Mutation Detection	☐ Officotype DX Coloff Reculterice Score test
☐ KIT & PDGFRA Gene Mutation Detection	Hereditary Cancer Screening
□ IDH1 & IDH2 Gene Mutation Detection	☐ APC Gene Comprehensive Study
MAP2K1 (MEK1) & MAP2K2 (MEK2) Gene Mutation Detection	☐ BRCA1 & BRCA2 Gene Comprehensive Study
☐ Microsatellite Instability Test & MMR Immunohistochemistry ☐ AKT1 codon 17 Mutation Detection	☐ BMPR1A Gene Comprehensive Study
ALK Gene Rearrangement Detection by FISH	☐ CDH1 Gene Mutation Detection ☐ CHEK2 1100delC Mutation Detection
☐ BRAF codon V600 Mutation Detection	EPCAM Gene Deletion Study
☐ Breast Immunohistochemistry Panel (ER, PR, HER2 & Ki-67)	☐ MLH1 Gene Comprehensive Study
☐ Chromosome 1p/19q Deletion by FISH	☐ MMR Genes Promoter Methylation Detection
☐ EGFR Gene Hotspot Mutation Detection (exons 18-21)	☐ MSH2 Gene Comprehensive Study
☐ EGFR Gene Amplification Detection by FISH	☐ MSH6 Gene Comprehensive Study
ERBB2 exon 20 Mutation Detection	MUTYH Gene Comprehensive Study
 □ ERBB2 (HER2) Gene Amplification by FISH Fixation time □<6 hrs □6-72 hrs □>72 hrs □ ERBB2 (HER2) Immunohistochemistry 	☐ PMS2 Gene Comprehensive Study
☐ ESR1 Gene Hotspot Mutation Detection (exon 5, 7 & 8)	☐ PTEN Gene Comprehensive Study ☐ RET Gene Mutation Detection
☐ HRAS Gene Hotspot Mutation Detection (exons 2-4)	SLC25A13 Gene Mutation Detection
☐ HPV Detection and Genotyping (FFPE) ☐ 21 Genotypes ☐ 37 Genotypes	STK11 Gene Comprehensive Study
☐ KIT Gene Hotspot Mutation Detection (exon 9, 11, 13, 14 & 17)	☐ SMAD4 Gene Comprehensive Study
☐ KRAS Gene Hotspot Mutation Detection (exons 2-4)	☐ TP53 Gene Comprehensive Study
MAPK1 E322K Mutation Detection	☐ VHL Gene Comprehensive Study
	☐ Hereditary Cancer Panel (84 cancer-related genes)
☐ MGMT Promoter Methylation by Methylation Specific PCR	Pharmacogenomics
☐ Microsatellite Instability Test	☐ CYP2C9 & VKORC1 Genotyping for Warfarin Treatment
☐ MMR Immunohistochemistry	CYP2C19 Genotyping for Clopidogrel Treatment
☐ NRAS Gene Hotspot Mutation Detection (exons 2-4)	DPYD Genotyping for 5-FU Responsiveness
p53 Immunohistochemistry	☐ HLA-B*1301 Genotyping for Dapsone, Baktar or Phenytoin Treatment
PALB2 Gene Comprehensive Study	☐ HLA-B*1502 Genotyping for Carbamazepine Treatment
☐ PDGFRA Gene Hotspot Mutation Detection (exon 12 & 18)	☐ HLA-B27 Genotyping ☐ HLA-B*5801 Genotyping for Allopurinol Treatment
 □ PDL1 Immunohistochemistry □ 22C3 □ 28-8 □ PIK3CA Gene Hotspot Mutation Detection (exon 9 & 20) 	NUDT15 Genotyping for Thiopurine Drugs Treatment
☐ PIK3CA Gene Hotspot Mutation Detection (exon 9 & 20)	☐ TPMT Genotyping for Thiopurine Drugs Treatment
POLE Gene Hotspot Mutation Detection (exons 9-14)	☐ UGT1A1 Genotyping for Irinotecan Toxicity
Others Please Specify:	