

## Specialist Integrated Haematological Malignancies Diagnostic Service (SIHMDS) Study request

Patient name		Consultant name	
Date of birth	Gender	Hospital / address	
D     D     /     M     /     Y       Hospital number	v Male Female		
-		Sender's contact name and phon	e number
NHS number			
		Please tick if Private Patient	
Diagnosis (please provide) Confirmed Provisional		Date sample taken (please provide) $ \begin{bmatrix}                                   $	
Current state	_		
Diagnosis Pre-tre	eatment Active	Bone marrow Blood Other	
Remission (for MRD study)       Relapse         Extra test(s) required outside diagnostic pathway		Please indicate whether relevant tests have been requested outside RMH SIHMDS	
Sample should not follow pathway due to clinical factors eg extreme age, poor condition			
Relevant clinical history and reason for study (please provide)			
*Please give all clinical information that is relevant to the requested studies e.g. treatment/disease history and results of any similar studies.* Please select the study or studies required for each laboratory (separate samples are usually needed)			
		arate samples are usually needed)	
(Sample in EDTA, heparin or	<b>Molecular Diagnostics</b> (Sample in EDTA or trephine		(Sample in heparin only)
trephine in saline)	in saline)		
Panels will be set up according	According to diagnostic	DNA NGS panel other	Karyotype / chromosomes
to suspected diagnosis	pathway	(please specify in clinical details section)	FISH
Please supply a BM / blood film.	AML FLT3 testing at relapse	MPN / CML / Polycythaemia	Please state the FISH study / studies required.
Hb MCV	AML / ALL / APL MRD	diagnostic workup	
WBC Platelets	AML / ALL / MDS diagnostic	Other (please specify in	
Lymphocytes	work-up (NGS / translocation pane l/ NPM1 /FLT3)	clinical details section)	
Neutrophils	B-Cell Clonality	Paediatric DNA NGS panel (technical report only)	Histopathology
Monocytes	BCR-ABl1 monitoring / MRD	Paediatric NGS panel	BM trephine
Blasts	Chimerism	(technical report only)	LN biopsy
Lymphadenopathy	Chronic T Lymphoid NGS	Paediatric RNA NGS panel	Others (please specify)
Splenomegaly	panel (RHOA, DNMT3A, IDH2, TET2, STAT3,	(technical report only)	
Paraprotein	STAT5B, TP53)	T cell clonality	
Morphology	CLL NGS panel / Chronic B Lymphoid NGS panel / IGH	Please contact the laboratory directly for further details of NGS panels available.	
PB	mutation screen	panens avanabies	
BM	CLL TP53 mutation/detection		

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SIHMDS, Centre for Molecular Pathology, The Royal Marsden, Cotswold Road, Sutton, Surrey SM2 5NG Central Specimen Reception: 020 8915 6570 to be put through to relevant laboratory.