

Corewell Health West - ATL Laboratories

Surgical Specimen Testing by Cytogenetics/Flow Cytometry/Molecular Diagnostics

ATL Lab Central: Phone (616) 486-6233 Fax (616) 486-6234

Patient Name: _____

Pathologist: _____

MRN/CPI: _____

Case # and block(s): _____

DOB: _____

***Specimen Treatment:** ☐ None

Place label here if available

☐ EDTA – Gross ☐ Decal Stat – Bench

☐ Decal Stat – Gross ☐ Other: _____

CYTOGENETICS FISH

- 1 H&E stained recut slide, 4 unstained 5µ slides

- ☐ Burkitt Panel (MYC breakapart; IGH/MYC) LAB2111357
- ☐ Del 1p19q (Oligodendroglioma) LAB2111336
- ☐ EWSR1 (Ewing sarcoma) LAB2111387
- ☐ Her2 Amplification LAB2111418
- ☐ Liposarcoma (MDM2) LAB3275
- ☐ Mantle Cell Probe (IGH/CCND1) LAB2111396
- ☐ N-MYC (2p24) Amplification LAB2111412
- ☐ Rhabdomyosarcoma (FOX01A/FKHR) LAB2111389
- ☐ Other _____ LAB2111413

- ☐ FGFR2
- ☐ IGH/MYC/CEP8
- ☐ P53 Deletion by FISH
- ☐ Synovial sarcoma (SS18/SYT)
- ☐ USP6 Rearrangement (Aneurysmal bone cyst)

- 1 H&E stained recut slide, 6 unstained 5 µ slides

- ☐ Aneuploidy (POC) LAB2111421
- ☐ High grade B-cell Lymphoma (dble/triple hit) LAB3273
- ☐ Myxoid Liposarcoma (DDIT3/CHOP & FUS) LAB2111363,
- LAB2111394

MOLECULAR DIAGNOSTICS

- 1 H&E stained recut slide and corresponding block

- ☐ BRAF LAB3429
- ☐ BRAF Gene Fusions (Brain Tumor) Lab1230852
- ☐ Cancer Hot Spot LAB3406
- ☐ Colon Panel (BRAF, KRAS, NRAS) LAB3604
- ☐ CTNNB1 LAB1230664
- ☐ CXCR4 LAB1230879
- ☐ EGFR LAB3181
- ☐ EGFR & ALK LAB3181 & LAB1231056
- ☐ FLT3 LAB1230860
- ☐ GIST LAB1230665
- ☐ GNAS Gene Mutation LAB1230861
- ☐ Heme Molecular Analysis LAB3613
- ☐ IGH@ clonality (B-cell) LAB2111112
- ☐ IDH Mutation Analysis (IDH 1 & 2) LAB3446
- ☐ KIT LAB1230106
- ☐ KRAS LAB3431
- ☐ Lung Cancer Panel LAB3507
- ☐ MLH1 Promoter HyperMethylation LAB3581
- ☐ MGMT Methylation LAB3404

- ☐ MSI Molecular (Normal & Tumor) LAB3001

MOLECULAR DIAGNOSTICS

- ☐ MYD88 Mutation Analysis LAB3643
- ☐ NRAS LAB3430
- ☐ NTRK Gene Fusion LAB1230897
- ☐ POLE Gene Mutation LAB1230862
- ☐ Sarcoma Gene Fusion LAB1230869
- ☐ TRG@ clonality (T-cell) LAB2111172
- ☐ TP53 LAB1230578
- ☐ Molecular, Other LAB1231056 _____

**This box must be filled out by the Pathologist
before the case goes to ATL**

I have reviewed the H&E slide(s) and marked area(s) to be tested.

Pathologist's initials: _____ Date: _____

% viable tumor cells compared to all viable cells (tumor and nontumor) within circled area: _____

MSI only: Normal Present: Yes: _____ No: _____

If yes indicate normal area on slide

TISSUE SOURCE

- ☐ Bone
- ☐ Bone Marrow
- ☐ Brain
- ☐ Breast
- ☐ Colon/Rectum
- ☐ Lung
- ☐ Lymph node
- ☐ Skin
- ☐ Soft Tissue
- ☐ Other: _____

ORDER TYPE

☐ Reflex order or working case order (testing needed for diagnosis) initiated by pathologist (no additional written order needed)

☐ Requested by physician's order

-Cases that are not reflex testing

-Cases that are not done for initial diagnostic testing

Authorizing provider _____

Date on written order _____

(Should be used if from prior to EPIC go Live 11/4/17 or collected at outside site)

Secretaries: Please attach a copy of the faxed/written order to this sheet for cases that are not reflex or working case diagnostic testing