

BIOMARKER REQUEST FORM

ALL FIELDS MUST BE COMPLETED LEGIBLY – ADDRESSOGRAPH LABEL IS ACCEPTABLE

Patient Name (Last, First):			PHN:		
Date of Birth (dd/mmm/yy):	Sex: M <input type="checkbox"/> F <input type="checkbox"/> X <input type="checkbox"/>	BCC Patient: Y <input type="checkbox"/> N <input type="checkbox"/>	Cerner MRN:		
Requesting Physician:				MSC:	
Phone Number:		Fax Number:			
Copy To Name:		Phone#:		MSC:	
Copy To Name:		Phone#:		MSC:	
Hospital:					
Pathology Case#:			Block:		

When requisition is complete, fax the hospital lab that holds the tissue.

SAMPLE INFORMATION:

Fixative:	<input type="checkbox"/> Neutral Buffered Formalin	<input type="checkbox"/> Other (specify):			
Ischaemic Time:	<input type="checkbox"/> < 1 hr	<input type="checkbox"/> > 1 hr	<input type="checkbox"/> Unknown		
Fixation Time:	<input type="checkbox"/> < 6 hrs	<input type="checkbox"/> 6-72 hrs	<input type="checkbox"/> > 72 hrs		

BIOMARKERS:

BREAST:	<input type="checkbox"/> DCIS (ER Only)	
	<input type="checkbox"/> Invasive Carcinoma (ER, PR, HER2)	
	<input type="checkbox"/> HER2 Only	
	<input type="checkbox"/> PDL1 22C3 Triple Negative Breast Cancer	
	<input type="checkbox"/> Ki67* (ER+ HER2- Breast Cancer) *for BC Cancer Oncologists use only	
GI/GU:	<input type="checkbox"/> Gastric HER2: GE Junction	<input type="checkbox"/> Gastric HER2: Stomach
	<input type="checkbox"/> MMR Gastrointestinal	<input type="checkbox"/> MMR Genitourinary
Lung:	<input type="checkbox"/> PDL1 22C3 (EGFR and ALK already completed)	
	<input type="checkbox"/> PDL1 22C3 Squamous Cell Carcinoma	
Other:	<input type="checkbox"/> PDL1 22C3 Head and Neck	
	<input type="checkbox"/> PDL1 22C3 Specify Site:	
	<input type="checkbox"/> HER2 Specify Site:	
	<input type="checkbox"/> p53 Specify Site:	
	<input type="checkbox"/> MMR Specify Site:	

Originating Hospital: Please send one representative tumour block, this requisition and a copy of the pathology report to:

Pathology Office - Room 3225
BC Cancer Agency
600 West 10th Avenue
Vancouver, BC V5Z 4E6