

REQUEST FORM: ONCOGENOMIC ANALYSIS



Service d'hématologie
Laboratoire d'oncogénomique
 Réception des laboratoires BH18-100
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 Laboratory opening hours : Monday-Friday 8am-5pm



PATIENT

Surname :
 Name :
 Address :
 Date of birth :
 Sex : ☐ Male ☐ Female

Sample date :

BILLING

☐ Patient
☐ Requester

PROVENANCE

Clinician :

Tel./BIP :

Hospital :

Departement :

COPY(IES) of results to be sent (IF ANY) :

CONSENT FOR BIOLOGICAL ANALYSES

Following any biological analysis performed in our laboratory, any sample or analysis product:

- ☐ can be stored in the laboratory in order to be able to respond to a request to add analyses by the requesting doctor (by default)
- ☐ can be used for development and research (by default)
- ☐ must be destroyed

Every constitutional genetic test must be accompanied by genetic counseling (Federal Act on Human Genetic Testing – HGTA). By his signature, the requesting doctor certifies having informed the person concerned according to the legal obligations in force for constitutional genetics and having received his consent for genetic analyses and all other biological analyses.

Signature of the requesting doctor required :

MATERIAL

Lithium Heparin, to stock at room temperature

If < 2ml justify the reason for the small volume please :

- ☐ Bone marrow
☐ Biopsy
☐ Peripheral blood, blasts proportion (%) :
☐ Autre :

STATUS

Date of initial diagnosis :

- ☐ Initial diagnosis
☐ Follow up : ☐ Remission
☐ Relapse/Progression
☐ Transformation

THERAPY / OTHER PATHOLOGY

- ☐ No
☐ Yes
 Comments :

TRANSPLANT

- ☐ No ☐ Yes

Date : Sex of the donor: ☐ Male
☐ Female
☐ Autologous
☐ Allogenic

DIAGNOSIS

☐ Preliminary ☐ Definitive

- ☐ AML ☐ MDS ☐ CMML ☐ MDS-MPN ☐ MPN ☐ PV ☐ ET ☐ PMF
☐ Eosinophilia ☐ AA/SAA ☐ Mastocytosis ☐ CML ☐ B-ALL ☐ T-ALL ☐ Myeloma ☐ MGUS
☐ CLL ☐ Waldenström ☐ Lymphoma (Type :)
☐ VEXAS Syndr. ☐ Other :

Comments :

METHODES

- ☐ **Standard analyses according to diagnosis** ☐ **Standard analyses without NGS/ddPCR** according to diagnosis
 (If no method is selected, the laboratory will perform the most appropriate oncogenic analyses according to the diagnosis/indication)

Apart from the standard analyses, the analyses below may be performed :

- ☐ **Conventional cytogenetics (CC)** ☐ **Digital PCR (ddPCR)**
☐ **SNP array** ☐ **KIT** c.2447A>T p.D816V
☐ **Fluorescence in situ hybridization (FISH):** ☐ **MYD88** c.794T>C p.L265P
☐ **Next generation sequencing (NGS DNA, mutation analysis)** ☐ **BRAF** c.1799T>C p.V600E
☐ **Standard Myeloid Panel** (see below for gene details*) ☐ **NOTCH1** c.7541_7542delICT p.P2514Rfs*4
☐ **Additional available genes** (see below for gene details**) :
☐ **Myeloma Panel** (TP53, BRAF, NRAS, KRAS) ☐ **Next generation sequencing (NGS RNA, 687 Fusions)**
☐ **TP53 only** ☐ **UBA1** (VEXAS, Syndr. Full gene sequencing)

Standard analyses according to diagnosis

- **AML Panel** (CC, SNP array, FISH KMT2A, MECOM and RUNX1, NGS standard myeloid panel*)
- **MDS/AA Panel** (SNP array, NGS standard myeloid panel*)
- **Eosinophilia Panel** (CC, FISH FIP1L1::PDGFRA, PDGFRB, FGFR1, JAK2)
- **MDS-MPN/CMML Panel** (CC, SNP array, NGS standard myeloid panel*)
- **CML Panel** (CC)
- **MPN Panel** (CC, NGS standard myeloid panel* including JAK2 ex12+14, MPL, CALR)
- **ALL Panel** (CC, SNP array, test for KMT2A, TCF3, ETV6::RUNX1, BCR::ABL1 rearrangements)
- **CLL Panel** (SNP array, NGS TP53)
- **Myeloma Panel** (SNP array & FISH IGH) If IGH positive: analysis of IGH::CCND1, IGH::FGFR3, IGH::MAF
- **Mastocytosis Panel** (CC, ddPCR KIT)
- **Waldenström Panel** (CC, ddPCR MYD88)

* NGS - Standard myeloid panel genes: ASXL1, BCOR, BCORL1, BRAF, CALR, CBL, CEBPA, CSF3R, CUX1, DDX41, DNMT3A, ETV6, EZH2, FLT3, GATA2, GNB1, HRAS, IDH1, IDH2, JAK2, KIT, KRAS, MPL, NPM1, NF1, NRAS, PHF6, PPM1D, PRPF8, PTPN11, RUNX1, SETBP1, SF3B1, SH2B3, SRSF2, STAG2, TET2, TP53, UBA1, U2AF1, WT1, ZRSR2 + Fragment analysis FLT3-ITD, ASXL1

** NGS - Additional available genes : CXCR4, ARID1A, SMC3, RAD21, GATA1, SETD1B, KMT2D, XPO1, CSF3R (full gene)

Comments :

