

Solid tumour

Department of Laboratory Medicine and Molecular Diagnostics

Shipping Address / Contact:

Sunnybrook Health Sciences Centre
2075 Bayview Avenue, Toronto, ON M4N 3M5
<https://sunnybrook.ca/content/?page=dept-labs-moleserv>
Email: molecular.services@sunnybrook.ca
T: 416-480-4012 F:416-480-4271

Patient Information:

Name: _____
MRN: _____
DOB: _____ Sex: M / F
Health Card#: _____

Instructions

1. Fill out the Patient and Referring Physician information.
2. Enter specimen information below and select test(s) on the 2nd page.
3. Send completed requisition with specimen.
4. For shipping non-FFPE sample to Sunnybrook, collect sample Monday to Thursday ONLY and send with same day or next day delivery.

Referring Physician Info:

Name: _____
Address: _____
Phone: _____ Fax: _____
Signature: _____
Copy to: _____

Reason for Referral:

- New Diagnosis Resistance to targeted therapies Other (explain): _____
 RUSH (reason): _____

Specimen Information

Type of Request:

- Sample previously reported (Referral):
Accession #: _____ Institution: _____

Fax completed form to 416-480-4271

- New Sample:
Tissue source/site: _____ Collection date & time: _____

Select tissue type below and test required in section IV.

Submit completed form and Pathology Report (required) with specimen to E410

Tissue Type

- | | |
|--|---|
| <input type="checkbox"/> FFPE | <input type="checkbox"/> Fresh tissue in sterile saline/RPMI at room temp |
| <input type="checkbox"/> Cytology cell block (alcohol fixed, FFPE)+H&E slide | <input type="checkbox"/> Extracted DNA (> 1 ug) |
| <input type="checkbox"/> Cytology fluid (SurePath) | <input type="checkbox"/> Extracted RNA (> 1 ug) |
| <input type="checkbox"/> Frozen tissue (5mm ³) | <input type="checkbox"/> Other: _____ |

For FFPE specimen:

Ischemic time: <1 hour Other: _____
Fixation time: 6-48 hr (biopsy) or 12-72 hr (resection) 72-96 hr Other: _____
Fixative (if not 10% NBF): _____

- **Preferred: Block + H&E slide**
- If block unavailable, 10 unstained slides at 5 microns with pre and post H&E
For Prostate and NTRK testing, send an additional charged unstained slide for IHC
- Curls with an H&E

MOLECULAR/BIOMARKERS REQUISITION

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Patient Information:

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MRN:

DOB:

Sex: M / F

Health Card#:

Solid Tumor Test List by Primary Site

Refer to page 3 for gene lists in NGS panels

Biliary Tract:

- Biliary NGS panel

Bladder:

- Bladder NGS panel

Breast:

- ER PR HER2 HER2 re-score
 Ki-67 for radiotherapy omission
 Ki-67 for Abemaciclib
 PD-L1
 Breast NGS panel
 Pan-TRK, NTRK1-3

Colorectal/Small Bowel:

- MMR / MSI
 Colorectal NGS panel
 BRAF / MLH1 methylation for Lynch syndrome screening
 HPV

Endometrium:

- MMR / MSI
 Endometrial NGS panel

Gastric/esophagus (adenocarcinoma):

- HER2
 MMR / MSI
 PD-L1

GIST

- GIST NGS panel
 SDHB for negative molecular results

Glioma:

- IHC: ATRX, H3-K27M, IDH R132H, TP53
 MGMT promoter methylation
 NGS for high grade glioma
 NGS for low grade glioma
 1p/19q FISH
 SNP array: 1p/19q codeletion, +7,-10/PTEN deletion, CDKN2A deletion, EGFR amplification
 MMR

Lung:

- Lung NGS panel
 EGFR T790M & other resistant variants
 PD-L1

Head and Neck:

- PD-L1
 HPV
 EBER
 SDHB
 pan-TRK (NTRK1-3)
 * Salivary gland NGS panel
 Thyroid NGS panel

Lymphoma:

- * B-cell clonality (IGH/IGK)
 * T-cell clonality (TCR β and γ)
 * IGH/BCL2 (BCL2)

Melanoma:

- Melanoma NGS panel
 GNAQ, GNA11 (Uveal Melanoma)

Ovary:

- Ovarian NGS panel

Prostate:

- Prostate NGS panel

Others:

- EBER (Gastric)
 HPV (Cervix, Penile)
 MMR (Adrenal, Endometrium, Gallbladder, Gastric, Ocular, Ovary, Pancreas, Sebaceous, Ureter)
 MLH1 methylation for Lynch screening
 NTRK fusion (IHC/NGS):

Primary site: _____

* Indicates testing for non-Sunnybrook patient will be billed to the referring physician, hospital or laboratory

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Gene list in NGS panel

Biliary Tract panel:

BRAF, ERBB2, FGFR1, FGFR2, FGFR3, IDH1, IDH2, KRAS, NRAS and RNA panel

Bladder panel:

FGFR2, FGFR3 and RNA panel

Breast panel:

AKT1, ESR1, PIK3CA, PTEN

Colorectal/Small Bowel panel:

BRAF, ERBB2, KRAS, NRAS, PIK3CA, PTEN

Endometrial panel:

CTNNB1, ERBB2, KRAS, PIK3CA, POLE, PTEN, TP53

GIST panel:

BRAF, KIT, PDGFRA

Glioma (High Grade) panel:

ATRX, BRAF, EGFR, FGFR1, FGFR2, FGFR3, H3-3A, H3C2, HIST1H3B, IDH1, IDH2, KRAS, NF1, PDGFRA, PIK3CA, PTEN, PTPN11, TERT, TP53

Glioma (Low Grade) panel:

ATRX, BRAF, EGFR, FGFR1, FGFR2, FGFR3, H3-3A, H3C2, HIST1H3B, IDH1, IDH2, KRAS, NF1, PDGFRA, PIK3CA, PTEN, PTPN11, TERT, TP53 and RNA panel

Lung panel:

BRAF, EGFR, ERBB2, KRAS, MET, NRAS, PIK3CA, RET, STK11 and RNA panel

Melanoma panel:

BRAF, KIT, NRAS, GNA11, GNAQ

Ovarian panel:

BRCA1, BRCA2

Prostate panel:

ATM, BRCA1, BRCA2, PALB2

Salivary gland panel: (for Sunnybrook patients only)

BRAF, ERBB2, RET and RNA panel

Thyroid panel:

BRAF, HRAS, KRAS, NRAS, RET and RNA panel

RNA panel:

AKT1, AKT2, AKT3, ALK, AR, BRAF, BRCA1, CDKN2A, EGFR, ERBB2, ERBB4, ERG, ESR1, ETV1, ETV4, ETV5, FGFR1, FGFR2, FGFR3, MET, MTAP, MAP3K8, MYB, MYBL1, NOTCH1, NOTCH2, NOTCH3, NRG1, NTRK1, NTRK2, NTRK3, NUTM1, PIK3CA, PIK3CB, PPARG, PRKACA, PRKACB, RAF1, RARA, RELA, RET, ROS1, RSPO2, RSPO3, TERT, TFE3, TFEB, STAT6, YAP1

* Testing for tumor types that are not CCO funded will be billed to the referring physician, hospital or laboratory