ONCOLOGY REQUISITION FORM
GENETIC ANALYSIS OF SOLID TUMORS

GENOMED
Está nos genes.

Patient Identification (mandatory)

Name: _____

Gender: F ☐ M ☐ Date of birth: ____/_____/_____

Identification number: _____

GenoMed use only:
Post label(s)

Conferred by:

CLINICAL DATA AND DIAGNOSIS (describe therapy, if any): Initial Diagnosis ☐ Relapse / Progressive Disease ☐

Reffering Doctor (mandatory)

Name (or print label): _____ ID number:_____

Telephone or email:_____ Hospital: _____ Service: _____

Do you authorize the report to sent by email? Yes ☐ No ☐ If yes, please write your **institutional email** address:

Informed Consent (to be filled by the referring doctor):

I hereby declare that the patient informed consent for diagnosis was obtained. Yes ☐ No ☐
I hereby declare that the patient informed consent for investigation was obtained. Yes ☐ No ☐

Reffering doctor signature: Date: _____/_____/_____

Specimen Details

Parafinn block or Sections*

- We ask a pathology report where possible, for correctly interpret test results.
- When sending sections macrodissection is recomended if tumor cell percentage is lower than 20-30%. To perform a correct CNV analysis, the percentage of neoplastic cells in the sample should be higher than a 50%.
- **Sample Rejection Conditions:** Decalcified specimens. Specimens with tumorous tissue.

Exam nº: _____ **Resection/Biopsy Date:** _____

☐ Surgical resection ☐ Biopsy ☐ Fine Needle Biopsy ☐ *cell-block* ☐ Other _____

Macrodissection ☐ Yes ☐ No **% Neoplastic Cells:** _____

Any other relevant information (main contaminants, blood, necrosis or other):

Pathologist: _____ **Hospital:** _____

Telephone or email:: _____

***Sections –** Verify in each the code that indicates the necessary thickness and quantity of sections (in multiple requests one tube per thickness is enough) (pedidos múltiplos enviar um tubo por espessura):

(1) 6x20 µm **(3) 3x50 µm** **(5) 5x5 µm**
(2) 10x10 µm **(4) 5x10 µm** **(6) Tumour tissue 10x10um + Blood**

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Available Tests

Lung Cancer

☐ **Lung by NGS (1)** 34900

Hotspots: *AKT1; ALK; BRAF*; *DDR2*; *EGFR*; *FGFR2*; *FGFR3*; *ERBB2* (*HER2*); *ERBB3* (*HER3*); *ERBB4* (*HER4*); *KRAS*; *MAP2K1*; *MET; NRAS; PIK3CA; RET; ROS1*
Fusion drivers: *ALK*; *FGFR1*; *FGFR2*; *FGFR3*; *MET* (*skipping* exão 14); *NTRK1*; *NTRK2*; *NTRK3; ROS1*; *RET*
CNVs[a]: *EGFR*; *FGFR1; FGFR2; ERBB2* (*HER2*); *KRAS*; *MET*

☐ ***BRAF*** (Val600) **(2)** 36314
☐ ***ALK*** (2p23) rearrangements by FISH **(3)** 31710
☐ ***ROS1*** (6q22) rearrangements by FISH **(3)** 31710

Colorectal Cancer

☐ **CCR by NGS (1)** 34900

Hotspots: *BRAF*; *EGFR; ERBB2* (*HER2*); *ERBB3* (*HER3*); *KRAS; NRAS; PIK3CA*
Fusion drivers: *NTRK1*; *NTRK2*; *NTRK3*
CNVs[a]: *ERBB2* (*HER2*); *MET*

☐ ***KRAS,*** with ***NRAS*** and ***BRAF*** (Val600) reflex testing **(4)** 34900
☐ ***BRAF*** (Val600) **(2)** 36314
☐ **MSI** - Microsatellite Instability **(6)** 34650
☐ ***MLH1*** promoter hypermethylation **(2)** 34900

Breast Cancer

☐ ***PIK3CA*** **(5)** 34900
☐ ***FGFR1*** **(8p12)** and ***FGFR2*** **(10q26)** amplification by FISH **(3)** 2x31710

Bladder Cancer

☐ **Bladder by NGS (1)** 34900

Hotspots: *AKT1; ALK; BRAF*; *DDR2*; *EGFR*; *FGFR2*; *FGFR3*; *ERBB2* (*HER2*); *ERBB3* (*HER3*); *ERBB4* (*HER4*); *KRAS*; *MAP2K1*; *MET; NRAS; PIK3CA; RET; ROS1*
Fusion drivers: *ALK*; *FGFR1*; *FGFR2*; *FGFR3*; *MET* (*skipping* exão 14); *NTRK1*; *NTRK2*; *NTRK3; ROS1*; *RET*
CNVs[a]: *EGFR*; *FGFR1; FGFR2; ERBB2* (*HER2*); *KRAS*; *MET*

Endometrial Cancer

☐ ***POLE*** (exons 9, 11, 13, and 14) **(2)** 34900
☐ **MSI** - Microsatellite Instability **(6)** 34650
☐ ***MLH1*** promoter hypermethylation **(2)** 34900
☐ ***TP53*** **(2)** 34900

Melanoma

☐ ***BRAF*** (Val600) **(2)** 36314
☐ ***KIT*** (exon 11) **(2)** 34847
☐ ***NRAS*** (codons 12, 13 and 61) **(2)** 34900

GIST

☐ ***KIT*** (exons 9 and 11) **(2)** 2x34847
☐ ***KIT*** (exons 9, 11, 13, 14 and 17) **(2)** 5x34847
☐ ***PDGFRA*** (exons 12, 14 and 18) **(2)** 34900

Brain Cancer

☐ ***BRAF*** (Val600) **(2)** 36314
☐ ***H3F3A*** (K27M and G34R/V) **(2)** 34900
☐ ***HIST1H3B*** (K27M) **(2)** 34900
☐ ***IDH1*** (exon 4) **(2)** 34900
☐ ***IDH2*** (exon 4) **(2)** 34900
☐ ***TERT*** promoter mutations (C228T and C250T) **(2)** 34900
☐ ***MGMT*** Promotor Methylation **(2)** 36312
☐ **1p36** and **19q13** deletions by FISH **(3)** 2x31710
☐ ***RELA*** (11q13) rearrangements by FISH **(3)** 31710
☐ ***EGFR*** (7p12) amplification by FISH **(3)** 31710
☐ ***PTEN*** (10q23.31) deletion by FISH **(3)** 31710
☐ ***BRAF*** (7q34) rearrangements by FISH **(3)** 31710
(BRAF-KIAA1549 fusion and variants)
☐ ***CDKN2A*** **(9p21)** deletion by FISH **(3)** 31710

Other Tumours

☐ **Biomarkers panel for Solid Tumors by NGS (1)** 34900

Mutações (*Hotspots - 35 genes*): *AKT1; ALK; AR; BRAF; CDK4; CTNNB1; DDR2; EGFR; ERBB2 (HER2); ERBB3 (HER3); ERBB4 (HER4); ESR1; FGFR2; FGFR3; GNA11; GNAQ; HRAS; IDH1; IDH2; JAK1; JAK2; JAK3; KIT; KRAS; MAP2K1 (MEK1); MAP2K2 (MEK2); MET; MTOR; NRAS; PDGFRA; PIK3CA; RAF1; RET; ROS1; SMO*
CNVs[a] (19 genes): *ALK; AR; BRAF; CCND1; CDK4; CDK6; EGFR; ERBB2 (HER2); FGFR1; FGFR2; FGFR3; FGFR4; KIT; KRAS; MET; MYC; MYCN; PDGFRA; PIK3CA*
Fusion drivers: (23 genes): *ABL1; AKT3; ALK; AXL; BRAF; EGFR; ERBB2 (HER2); ERG; ETV1; ETV4; ETV5; FGFR1; FGFR2; FGFR3; MET; NTRK1; NTRK2; NTRK3; PDGFRA; PPARG; RAF1; RET; ROS1*

☐ ***Her-2/neu*** amplification by FISH **(3)** 31710
☐ **MSI** - Microsatellite Instability **(6)** 34650
☐ ***PIK3CA*** **(5)** 34900
☐ ***NTRK1***, ***NTRK2***, ***NTRK3*** rearrangements by NGS **(1)** 34900

a – To a correct CNV analysis the percentage of neoplastic cells in the sample should be higher than a 50%.

Informed Consent (mandatory - to be filled by the patient)

I hereby declare that I have read the Privacy Policy of GenoMed® - Diagnósticos de Medicina Molecular, S.A., available at https://genomed.pt/en/privacy-and-cookies-policy/ and I give my consent to the processing of the personal data. ☐ Agree ☐ Not agree

I also declare to authorize the collection of mine/my _____ [affiliation], _____ [name], born on _____/_____/_____, to the execution of the genetic testing described above, whose purposes and limitations were explained by the aforementioned physician. Herewith I declare that I have been informed about the consequences resulting from the teste results. I agree that the sample may be stored in order to allow repetition of the tests or further related tests at GenoMed or authorized partners around the world. The data/test results are subject to medical confidentiality and should only be disclosed to family members or other physicians with my permission. I am entitled to revoke this consent at any time. ☐ Agree ☐ Not agree

I also declare that the data/test results may be used in scientific investigations and publications in an anonymized form when and only approved by the Ethics Committee. ☐ Agree ☐ Not agree
(According to the Direction of General Health Standard nº 015/2013 updated.)

Patient´s Signature: Date: _____/_____/_____

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