



PATIENT INFORMATION

Patient Last Name First Name Middle Initial Sex: OM OF
Date of Birth Hospital/ID Number INPATIENT OUTPATIENT

REFERRED BY

PHYSICIAN FACILITY
Address Address
City State Zip City State Zip
Telephone Fax Telephone Fax

BILLING

BILL CHARGES TO: Patient Insurance Hospital Physician/Clinic (provide billing information on reverse side of form)

SIGNS, SYMPTOMS, NARRATIVE DIAGNOSIS AND ICD9 CODES

ICD9 Required for specimen processing (PLEASE DO NOT USE "RULE OUT")
ICD9
ICD9

In addition to the studies requested below, the Colorado Genetics Laboratory is authorized to perform FISH (fluorescence in situ hybridization) if indicated by the patient's clinical history or cytogenetic results.

Physician Signature

SPECIMEN COLLECTION

Date Collected: Time: AM PM Amount Collected:

PRENATAL & TISSUE SPECIMENS

Gestation by ultrasound on date specimen collected
LMP
G P SAB TAB
Fetal sex (if known): M F

Specimen Type

- Amniotic Fluid
Chorionic Villus
Percutaneous umbilical blood
Products of conception
Placenta
Fetal Tissue

- Skin Biopsy
Other

Studies Requested

- Chromosome analysis
Trisomy screen by FISH and chromosome analysis
Alpha-fetoprotein? Yes No
Acetylcholinesterase (AChE)
FISH for:

- Culture and freeze for future studies
Culture for molecular or biochemical studies:*

*Please attach "Information for Referral Specimens" form

CANCER SPECIMENS

- CML B-cell Lymphoma
AML T-Cell Lymphoma
ALL CLL
Myeloma Post Transplant
Diagnostic Sex of Donor: M F
Myelodysplasia

Specimen Type

- Bone marrow aspirate
Bone marrow core biopsy
Peripheral blood
Lymph Tumor
Solid Tumor:
Other:

Studies Requested

- Chromosome analysis
Fish Studies for:
BCR/ABL t(9;22)
MLL [11q23]
PML/RARA t(15;17)
ALL Panel
AML Panel
CLL Panel
MDS Panel
Myeloma Panel
Chimerism (for BMT patients)
Screen for prior abnormal clone
Other

Additional FISH studies available. Please call the laboratory.

CONSTITUTIONAL BLOOD SPECIMENS

- Peripheral blood
Cord blood
Other:

Studies Requested

- High resolution chromosome analysis
Routine chromosome analysis
STAT trisomy screen by FISH and routine chromosome analysis (Call before ordering)

- FISH for:

FISH studies include routine chromosome analysis if not previously performed

- Chromosomal Microarray and 5 cell high resolution chromosome screen
Chromosomal Microarray (CMA)
Parental FISH follow-up for abnormal array

PATIENT STAMP HERE