Hôpitaux Universitaires Genève

DIAGNOSTIQUE / Service de Pathologie Clinique
Centre d'accueil des prélèvements (CAP)
Bâtiment des Laboratoires (BATLab), local 8D-0-850.1
4 rue Gabrielle-Perret-Gentil, 1211 Genève 14

Laboratoire d'oncologie moléculaire et pharmacogénomique

ONCOMOL

http://www.hug-ge.ch/feuilles-de-demande

Médecin Chef : Prof. Laura Rubbia-Brandt
Responsable du laboratoire : Dre A.-L. Rougemont (022 37) 28 568
Responsable technique FAMH : Mme I. Gauchat-Bouchardy (022 37) 21 827
Labo direct ou résultats : Tél./Fax : (022 37) 21 830 / 21 843
Centre d'accueil des prélèvements (CAP) : Tél (022 37) 21 800

Mr. ❑ Ms. ❑ (please print clearly)

Name:……

Maiden name :……

First name :……

Date of birth : ..... / ..... / ……

Legal representative for minor patient : ❑ father ❑ mother

Name/first name : ……

Street/N°:……

City, Zip code :……

Hospital Unit : …… Doctor :……

N° EdS : ……

Address for facturation: ❑ Patient ❑ Requester ❑ Insurance

Nature of the case : ❑ Disease ❑ AI ❑ Accident ❑ Maternity

N° AVS (AI mandatory) : ……

Insurance : ……Insurance **N° :** ……

Requester *(*Name / First name - Street/N°, City, Zip code - Phone/Fax) ***:***

Copy to (Name / First name - Street/N°, City, Zip code - Phone/Fax) : *The applicant laboratory / prescriber has obtained the agreement of the prescriber / patient to forward copies to other doctors that the prescribing physician*

Laboratory identification :

PATIENT information:
Ethnic origin: ❑ Ashkenazi Jewish ❑ Other: .....

Familial cancer history (or join a pedigree): ……
……
……
……
……

SAMPLE

Date of sample: ……..

❑ **EDTA blood sample**…….ml, at room temperature (recommended volume: 5 ml)

❑ **Purified DNA** ……. ng / µl (recommended quantity: 10µg)

External Reference: ☐ Internal Reference (DNA banking): ☐

❑ **Other** *(to specify for example bioinformatic data)* ……..

REPORT LANGUAGE ***(by default in french)*****:**
❑ French
❑ English

INFORMED CONSENT
I certify that the concerned person (patient, legal representative) has received genetic counseling according to the law on human genetic analysis (LAGH) on the various aspects of the described genetic analysis in the form "patient information". This person has given its consent and had enough time to ask questions and make its decision.

Prescriptor's mandatory date and signature*:

Patient decision on storage and use of the remaining biological material and analytical data for further analyses * = mandatory

- The patient agrees that his remaining biological material and analytical data will be stored for possible further analyses with his consent. Check "NO" means that the samples will be destroyed after analysis: ❒ YES ❒ NO
- The patient agrees with the storage and anonymous use of his samples and analytical data for improvement of the quality of genetic analysis : ❒ YES ❒ NO

Use of patient sample and his analytical data for research purposes

- In principle, the patient agrees that his biological sample and analytical data could be kept and used for research purposes : ❒ YES ❒ NO
  At this point, **his response does not imply any consent on his part.**

NAME Firstname

Reserved for the laboratory

ANALYSIS - Breast and ovarian cancer predisposition:

❑ **DNA banking**

❑ **Three *BRCA1/2* Ashkenazi Jewish founder mutations**

❑ **Specific mutation** (please specify which gene and mutation):

Family carrier already tested in our laboratory: ❑ Yes ❑ No NAME, Firstname, N°DNA:

***Gene**: ……...*

Mutation: ……..…….....

NGS Panels[na]:

❑ ***BRCA1* and *BRCA2* only**

❑ **Breast Cancer (*BRCA1, BRCA2, ATM, CHEK2, PALB2, PTEN, STK11, TP53*)**

❑ **Ovarian Cancer (*BRCA1, BRCA2, BRIP1, MLH1, MSH2, MSH6, PALB2, PMS2, RAD51C, RAD51D*)**

❑ **Complete HBOC (*ATM, BRCA1, BRCA2, BRIP1, CHEK2, MLH1, MSH2, MSH6, PALB2, PMS2, PTEN, RAD51C, RAD51D, STK11, TP53*)**

❑ **Additional/other genes:**

- ❑ ***CDH1***
- ❑ ***NBN***
- ❑ ***SMARCA4***
- ❑ ***BARD1***

Sanger:

- ❑ ***HOXB13[na]***

Complementary bioinformatics analysis from NGS data:

- ❑ ***ATM***
- ❑ ***BARD1***
- ❑ ***BRIP1***
- ❑ ***CDH1***
- ❑ ***CHEK2***
- ❑ ***MLH1***
- ❑ ***MSH2***
- ❑ ***MSH6***
- ❑ ***NBN***
- ❑ ***PALB2***
- ❑ ***PMS2***
- ❑ ***PTEN***
- ❑ ***RAD51C***
- ❑ ***RAD51D***
- ❑ ***SMARCA4***
- ❑ ***STK11***
- ❑ ***TP53***

Please indicate here any additional helpful information :

na = not accredited

NGS analysis is outside the accredited domain. The transition from "NGS per amplicon" technology to "NGS per capture" technology allows for better quality/sensitivity of analysis and an increased number of genes tested. The validation of this analysis is complete and the accreditation with the SAS is in progress.

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