# Cytogenetics Requisition

For Developmental delay/Intellectual delay/Autism/Multiple congenital anomalies please use the CHROMOSOME MICROARRAY Requisition. For Prenatal and Newborn samples, please use the PRENATAL AND NEONATAL Requisition.

## Specimen Type
- **Peripheral Blood** 3 mL NaHep
- **Bone Marrow** 1-2 mL NaHep
- **Paraffin-embedded Tissue Slides** -- Specimen 
- **Other (Specify)**

## Collection Centre
- **NYGH Patient:**
  - **Outpatient**
  - **Inpatient (Ward):**

## Collection Date
- **Routine**
- **STAT**
- **If pregnant, provide gestation:** ___________ weeks
- **Parental or family study, provide name of spouse, proband, etc.**

## Reason for Referral
### Constitutional
- **Ambiguous genitalia**
- **Amenorrhea**
- **Family history (specify):**
- **Infertility**
- **Klinefelter syndrome**
- **Molar pregnancy**
- **Multiple miscarriages (≥3)**
- **Premature ovarian insufficiency**
- **Microarray follow-up**
- **Microarray findings:**
- **Short stature**
- **Turner syndrome**
- **Trisomy (specify)**
- **Other:**

### Oncology
- **AML**
- **Anemia**
- **CLL (performed by microarray)**
- **CML**
- **Lymphoproliferative disease**
- **MDS**
- **MPN**
- **Multiple Myeloma**
- **Mantle Cell Lymphoma**

## Test Required
- **FISH analysis (karyotype)**
- **Constitutional**
  - **Aneuploidy (chr 13, 16, 18, 21, X and Y)**
  - **DiGeorge/Velo-Cardio Facial Syndrome (22q11.2)**
  - **Microarray FISH follow-up**
  - **Other:**
- **Oncology**
  - **PML/RARA (t(15;17))**
  - **BCR/ABL (t(9;22))**
  - **Lymphoma Panel (BCL6, MYC and BCL2)**
  - **IGH/CCND1 (t(11;14))**
  - **MALT1 (18q21)**
  - **MM Panel (CKS1B/CDKN2C (P18), D13S319/LAMP1, IGH, TP53, and Reflex panel)**
  - **Other:**

## Physician Information
- **Referring Physician:**
  - **Address:**
  - **Phone:**
  - **Fax:**
- **Copy to:**
  - **Address:**
  - **Phone:**
  - **Fax:**

## Cytogenetics Lab Use Only
- **Lab Number:**
- **Related Lab Number(s):**
- **Date Received:**
- **Comments:**
- **Req. Check:**
- **Chart Check:**

CG.99.500v1.1
SAMPLE REQUIREMENTS

- Complete a Cytogenetics Requisition and provide ALL information requested. Samples will not be processed if the requisition is incomplete.

- Transport specimens at room temperature directly to the Cytogenetics Laboratory (see address on the other side).

1. **Blood**
   
   Collect 3 mL of venous blood in a sodium heparin vacutainer.

2. **Bone Marrow**
   
   Collect 1-2 mL of bone marrow aspirate in a sodium heparin vacutainer.

3. **Paraffin-embedded Tissue**
   
   10\% neutral buffered formalin-fixed paraffin-embedded tissue cut to 3-5 microns, mounted on positively charged slides (e.g. Surgipath SnowCoat X-tra) and dried at 50-60°C for 30-60 minutes. **Please note: Do not send blocks. Only slides are accepted.**

   Slides and blocks will not be returned.

   **Molar pregnancy and aneuploidy:**
   
   - Four slides, one of which should be H&E stained. The area of interest must be clearly marked on the H&E slide.

   **Oncology:**
   
   - One H&E stained slide with the area of interest clearly marked, or documentation that any area of the tissue may be used.
   
   - One slide per probe ordered + 2 extra for repeats.