ALK/EGFR Detection Requisition

Ontario Patients Only: LHIN 9 & 10

(Please fill in the form online, then print)

Kingston General Hospital
Department of Pathology & Molecular Medicine

76 Stuart Street, Douglas 2 - Room 8-218

Kingston Ontario, Canada K7L 2V7

Tel: 613-549-6666 ext. 6827 Fax: 613-548-1364

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1PL	.EA	SE	NO	IE:

- 1- Incomplete requisitions will not be processed.
- 2- Hard copy must be faxed to Kingston General Hospital along with original Pathology Report.
- 3- Hard copy requisition must be signed by Referring Physician.

This patient has been diagnosed with non-squamous non-sma cell lung cancer
century cancer

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	Other (please provide more information)
	,



samples to Kingston General Hospital.

Patient Information:		
First Name:		
Last Name:		
Middle Name:		
Hospital ID#:		
Date of Birth:		
HCN#:		
Request date: yyyy/mm/dd		
○ Male ○ Female		

Ordered By:

Physician Name:	Clinic:					
Address:						
Province: Postal	I code:					
Tel: Fax:	Email:					
Specimen ID #:						
Surgery date: Location (Hospital Name):						
Hospital address:						
Hospital/Lab Contact Info:						
_ Original Pathology report will be faxed to KGH _ Oncologist will organize sending tissue/block						

TISSUE REQUIREMENTS:

Physician Signature:

along with this requisition.

EGFR: One routinely stained slide and 10 unstained sections (4 microns) on uncharged slides and unbaked OR tumour tissue block (select most tumour rich block).

ALK: One routinely stained slide and 5 unstained sections (4 microns) on charged slides and baked at 60^oC for 1-2 hours OR tumour tissue block (select most tumour rich block).