impact genetics

LAB USE ONLY DO NOT FILL OUT

Date received: Y M D

Specimen type:

Condition:

MRN: Tech:

Form 1b: *BAP1-TPDS Genetic Test Requisition* *(BAP1 Tumor Predisposition Syndrome)*

Patient

Last name:

First name:

Date of birth: Y M D

Gender: ☐ Male ☐ Female

Ordering Options

☐ **Proband** - *BAP1* full sequencing and copy number

☐ **Known familial mutation** - *BAP1* targetted sequencing

Has the Patient had uveal melanoma prognostic testing done at Impact Genetics?

☐ Yes ☐ No

Sample

☐ **Blood** – 10ml EDTA

☐ **DNA from blood stored at Impact Genetics**
Please call to ensure sufficient volume is available.

Clinical History *– Check all that apply*

☐ Uveal melanoma

☐ Mesothelioma

☐ Melanocytic skin tumors

☐ Renal cell carcinoma

☐ Other (specify type):

Family History

Relationship to Patient:
Type of cancer:
Age at diagnosis:

Relationship to Patient:
Type of cancer:
Age at diagnosis:

Relationship to Patient:
Type of cancer:
Age at diagnosis:

Relationship to Patient:
Type of cancer:
Age at diagnosis:

Relationship to Patient:
Type of cancer:
Age at diagnosis:

Referring Specialist

Name:

Specialty:

Contact:

Telephone: Fax:

Email:

Signature:

Institution:

Address:

City: Prov/State:

Postal code: Country:

Additional copies to:

Email: Fax:

Billing

☐ a) Institution

Provide details:

☐ b) Patient Pay
Complete ***Form 1d:*** *Credit Card Authorization for Non-Covered Services.*

☐ c) Third party insurance (USA only)
Complete ***Form 1c:*** *U.S. Insurance Information and to expedite testing, complete* ***Form 1d:*** *Credit Card Authorization for Non-Covered Services.*

How to arrange genetic counselling

Patient is required to login to genetic counseling services portal: **http://impactgenetics.com/genetic_counseling/**

Or call, **855 GC CALLS (855-422-2557).**

Telegenetics appointment will be scheduled at which time genetic counseling will be provided by a board certified genetic counselor.

1100 Bennett Road - Unit 4, Bowmanville, ON L1C 3K5
t: 647-478-4902 or 1-877-624-9769 f: 905-697-9786
e: info@impactgenetics.com *Please ensure to use secure email*