

<p>Patient and sample details:</p> <p>Name: _____</p> <p>Date of birth: / / Male <input type="checkbox"/> Female <input type="checkbox"/></p> <p>Hospital No. _____</p> <p>NHS No. _____</p> <p>Histopathology Lab No. _____</p> <p>Date taken: / /</p> <p>Diagnosis/tumour type: _____ Stage: _____</p> <p><i>Please provide a copy of the histopathology report</i></p> <p>Specimen type: _____</p> <p>Tissue type: Biopsy <input type="checkbox"/> Resection <input type="checkbox"/></p> <p style="padding-left: 40px;">Primary <input type="checkbox"/> Metastasis <input type="checkbox"/></p>	<p>Destination of report:</p> <p>Name: _____</p> <p>Hospital: _____</p> <p>Department: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Copy report to (NHS.NET contact): _____</p> <p>_____</p> <p>Sender's contact name and phone/email details: _____</p>
<p><input checked="" type="checkbox"/> NHS patient <input type="checkbox"/> Private patient <input type="checkbox"/> Other</p> <p>Please provide details for billing information if different from the requesting hospital above.</p>	

MLH1 promoter hypermethylation



MSI testing



Please send **1 H&E section** with the tumour area clearly marked and **5 x 10 µm mounted sections** (unstained, uncharged)

Please tick appropriate boxes and send samples to the address above

IHC results:

Loss of MSH2/MSH6

Loss of MLH1/PMS2

Other – please specify: _____

Please tick the appropriate box according to your local pathology assessment of the tissue sent for testing:

Cellularity: High Intermediate Low Very Low

Neoplastic nuclei: >70% 50-70% 30-50% 20-30% 10-20%

Necrotic: YES NO High Melanin content: YES NO