SydPath
ST VINCENT'S PATHOLOGY

SYDPATH MOLECULAR PATHOLOGY
ONCOLOGY TESTING REQUEST FORM

RCPA The Royal College of Pathologists of Australasia

NATA ACCREDITED FOR TECHNICAL COMPETENCE

PATIENT DETAILS

Family Name _____

Given Name _____

Address _____

_____ Postcode: _____

DOB _____ Age _____ Sex _____

REQUESTING CLINICIAN

Name _____

Address _____

_____ Postcode _____

Provider no. _____

Phone _____

Fax _____

Email _____

Signature ✗ _____ Date _____

REFERRING PATHOLOGIST

Name _____

Address _____

_____ Postcode _____

Provider no. _____

Phone _____

Fax _____

Email _____

Signature ✗ _____ Date _____

HOSPITAL STATUS OF PATIENT AT SPECIMEN COLLECTION OR DATE OF SERVICE

- ☐ Private patient in a private hospital or approved day hospital facility
- ☐ Private patient in a recognised hospital
- ☐ Public patient in a recognised hospital
- ☐ Outpatient of a recognised hospital

INVOICING PROCEDURE

- ☐ Bulk Bill: Medicare assignment signed below
- ☐ Bulk Bill: send DB3 (not appropriate for public inpatients)
- ☐ Bill laboratory
- ☐ Bill patient (complete authorisation on reverse)
- ☐ Bill private health fund: _____

Membership no. _____

11 DIGIT MEDICARE NO.

☐☐☐☐☐☐☐☐☐☐ ☐

MEDICARE ASSIGNMENT *(Section 20A of the Health Insurance Act 1973)*

TO BE COMPLETED BY THE PERSON ASSIGNING BENEFITS FOR THE SERVICES ON THIS FORM *I offer to assign my right to benefits to the approved pathology practitioner who will render the requested pathology service(s) and any eligible pathologist determinable service(s) established as necessary by the practitioner.*

Patient signature ✗ _____ Date _____

Please detail if the assignor is not the patient: _____

CLINICAL HISTORY

Cancer Staging: ☐ I/II ☐ III ☐ IV ☐ **URGENT**

TESTS REQUESTED

TESTS REQUESTED	MBS ITEM/ COST IF UNFUNDED
NGS ONCOMINE PRECISION ASSAY	
☐ NSCLC PANEL (DNA & RNA incl. *EGFR, BRAF, KRAS, MET* exon 14 skipping)	73437
☐ NSCLC DNA ONLY PANEL	73438
☐ NSCLC RNA ONLY PANEL	73439
☐ NSCLC PD-L1 IHC (see sample requirements below)	72814
☐ MELANOMA PANEL (incl. *BRAF, GNAQ, GNA11, KIT, NRAS*)	73336
☐ COLORECTAL PANEL (incl. *BRAF, KRAS, NRAS*)	73338
☐ CHOLANGIOCARCINOMA DNA & RNA PANEL (incl. *IDH1/2, BRAF, KRAS, ERBB2, FGFR2, NTRK, RET*)	73329
☐ CHOLANGIOCARCINOMA DNA ONLY	73319
☐ BREAST PANEL* (incl. *AKT1, ERBB2, ESR1, PIK3CA, PTEN*)	$600
☐ THYROID DNA PANEL* (incl. *AKT1, BRAF, NRAS, PIK3CA, TP53*)	$600
☐ THYROID DNA & RNA PANEL* (incl. *NTRK, RET*)	$950
☐ OPA (DNA ONLY) For other tumour types*	$600
☐ OPA (RNA ONLY incl. *ALK, RET, ROS1, NTRK, FGFR3*) For other tumour types *	$600
☐ OPA (DNA & RNA) For other tumour types *	$950
NGS ONCOMINE COMPREHENSIVE ASSAY V3	
☐ 161 GENE PANEL FOR ALL TUMOUR TYPES* Refer to Gene List on page 2	$1,350
NGS LYMPHOMA ASSAY	
☐ Suspected Lymphoid Malignancy	73448

* I understand that the cost of this testing is not covered under Medicare funding. Furthermore, that payment for this testing is the responsibility of the requesting Doctor or department, unless a signed patient consent to pay is provided (see other side of this form).

Requesting Dr signature: ✗ _____

PLEASE SEND:

NGS: Paraffin block containing tumour (preferred) OR 14 unstained 4µm sections on uncoated slides
PD-L1 IHC: Paraffin block containing tumour (preferred) OR 3 unstained 4µm sections on coated slides
AND copies of the pathology report and original request form to:

Department of Molecular Pathology
Level 6 Xavier Building, St Vincent's Hospital
Darlinghurst NSW Australia 2010
Phone: (+61 2) 8382 9263 Fax: (+61 2) 8382 2888
Email: SydPathCancer@svha.org.au Website: www.SydPath.com.au

Original Pathology Laboratory: _____

Block Identification Number: _____

SydPath
ST VINCENT'S PATHOLOGY

SYDPATH MOLECULAR PATHOLOGY
ONCOLOGY TESTING REQUEST FORM

RCPA The Royal College of Pathologists of Australasia

NATA ACCREDITED FOR TECHNICAL COMPETENCE

NGS 50 GENE LIST (Oncomine Precision Assay)

Hotspot genes: AKT1, AKT2, AKT3, ALK, AR, ARAF, BRAF, CDK4, CDKN2A, CHEK2, CTNNB1, EGFR, ERBB2, ERBB3, ERBB4, ESR1, FGFR1, FGFR2, FGFR3, FGFR4, FLT3, GNA11, GNAQ, GNAS, HRAS, IDH1, IDH2, KIT, KRAS, MAP2K1, MAP2K2, MET, MTOR, NRAS, NTRK1, NTRK2, NTRK3, PDGFRA, PIK3CA, PTEN, RAF1, RET, ROS1, SMO, TP53.

Copy number genes: ALK, AR, CD274, CDKN2A, EGFR, ERBB2, ERBB3, FGFR1, FGFR2, FGFR3, KRAS, MET, PIK3CA, PTEN.

Gene fusions (inter and intragenic): ALK, AR, BRAF, EGFR, ESR1, FGFR1, FGFR2, FGFR3, MET, NRG1, NTRK1, NTRK2, NTRK3, NUTM1, RET, ROS1, RSPO2, RSPO3.

NGS 161 GENE LIST (Oncomine Comprehensive Assay v3)

Hotspot genes: AKT1, AKT2, AKT3, ALK, AR, ARAF, AXL, BRAF, BTK, CBL, CCND1, CDK4, CDK6, CHEK2, CSF1R, CTNNB1, DDR2, EGFR, ERBB2, ERBB3, ERBB4, ERCC2, ESR1, EZH2, FGFR1, FGFR2, FGFR3, FGFR4, FLT3, FOXL2, GATA2, GNA11, GNAQ, GNAS, H3F3A, HIST1H3B, HNF1A, HRAS, IDH1, IDH2, JAK1, JAK2, JAK3, KDR, KIT, KNSTRN, KRAS, MAGOH, MAP2K1, MAP2K2, MAP2K4, MAPK1, MAX, MDM4, MED12, MET, MTOR, MYC, MYCN, MYD88, NFE2L2, NRAS, NTRK1, NTRK2, PDGFRA, PDGFRB, PIK3CA, PIK3CB, PPP2R1A, PTPN11, RAC1, RAF1, RET, RHEB, RHOA, ROS1, SF3B1, SMAD4, SMO, SPOP, SRC, STAT3, TERT, TOP, U2AF1, XPO1.

Full-length genes: ARID1A, ATM, ATR, ATRX, BAP1, BRCA1, BRCA2, CDK12, CDKN1B, CDKN2A, CDKN2B, CHEK1, CREBBP, FANCA, FANCD2, FANCI, FBXW7, MLH1, MRE11, MSH2, MSH6, NBN, NF1, NF2, NOTCH1, NOTCH2, NOTCH3, PALB2, PIK3R1, PMS2, POLE, PTCH1, PTEN, RAD50, RAD51, RAD51B, RAD51C, RAD51D, RB1, RNF43, SETD2, SLX4, SMARCA4, SMARCB1, STK11, TP53, TSC1, TSC2

Copy number genes: AKT1, AKT2, AKT3, ALK, AR, AXL, BRAF, CCND1, CCND2, CCND3, CCNE1, CDK2, CDK4, CDK6, CKDN2A, CDKN2B, EGFR, ERBB2, ESR1, FGF19, FGF3, FGFR1, FGFR2, FGFR3, FGFR4, FLT3, IGF1R, KIT, KRAS, MDM2, MDM4, MET, MYC, MYCL, MYCN, NTRK1, NTRK2, NTRK3, PDGFRA, PDGFRB, PIK3CA, PIK3CB, PPARG, RICTOR, TERT.

Gene fusions (inter and intragenic): AKT2, ALK, AR, AXL, BRAF, BRCA1, BRCA2, CDKN2A, EGFR, ERBB2, ERBB4, ERG, ESR1, ETV1, ETV4, ETV5, FGFR1, FGFR2, FLT3, GFR3, JAK2, KRAS, MDM4, MET, MYB, MYBL1 , NF1, NOTCH1, NOTCH4, NRG1, NTRK1, NTRK2, NTRK3, NUTM1, PDGFRA, PDGFRB, PIK3CA, PPARG, PRKACA, PRKACB, PTEN, RAD51B, RAF1, RB1, RELA, RET, ROS1, RSPO2, RSPO3, TERT

NGS LYMPHOMA 75 GENE LIST

ABL1, ARAF, B2M, BCL2, BCOR, BIRC3, BRAF, BTK, CARD11, CCND1, CCND3, CCR4, CD19, CD28, CD79A, CD79B, CDKN2A, CRBN, CREBBP, CRLF2, CSF1R, CXCR4, DDX3X, DNMT3A, EGR2, EP300, ETV6, EZH2, FBXW7, FOXO1, FYN, GPRC5D, ID3, IDH2, IKZF1, IL7R, IRF8, JAK1, JAK2, JAK3, JUNB, KLF2, KMT2D, KRAS, MAP2K1, MEF2B, MS4A1(CD20), MYC, MYD88, NFKBIE, NOTCH1, NOTCH2, NRAS, PAX5, PIK3CA, PIM1, PLCG1, PLCG2, PTEN, RHOA, SETD2, SF3B1, SGK1, SOCS1, STAT3, STAT5B, STAT6, TCF3, TET2, TNFAIP3, TNFRSF14, TNFRSF17, TP53, VAV1, XPO1

ASSAY	FUNDING CURRENTLY AVAILABLE (IF MBS CRITERIA MET)	COST IF UNFUNDED*
50 Gene Panel (NGS OPA Panel)	Medicare items 73436, 73437, 73438, 73439, 73336, 73337, 73338, 73351, 73372, 73319, 73329	$600 (DNA), $600 (RNA), $950 (combined)
161 Gene Panel (Oncomine Comprehensive Assay)		$1,350
NGS Lymphoma Panel	Medicare item 73448	$950

* Not applicable to clinical trials. Please enquire for further information.

PATIENT AUTHORISATION

I understand that my medical practitioner has requested test(s) that are not covered by Medicare or are not covered/partly covered by my private health fund.

I agree to accept responsibility for the full payment of $_____for this test(s)

Patient signature: ✗ _____Date: _____

Patient email address: _____

For any further information required on SydPath's billing policy for Molecular Pathology testing please phone 02 8382 9263

Dear Patient,

Your doctor has recommended that you use SydPath. You are free to choose your own pathology provider. However, if your doctor has specified a particular pathologist on clinical grounds, a Medicare rebate will only be payable if that pathologist performs the service. You should discuss this with your doctor.

Privacy Note: The information provided will be used to assess any Medicare benefit payable for the service(s) rendered and to facilitate the proper administration of government health programs, and may be used to update enrolment records. Its collection is authorised by provisions of the *Health Insurance Act 1973*. The information may be disclosed to the Department of Health and Ageing or to a person in the medical practice associated this claim, or as authorised/required by law.

NATA ACCREDITED FOR TECHNICAL COMPETENCE

RCPA The Royal College of Pathologists of Australasia

This document is issued in accordance with the NATA/RCPA accreditation requirements. Accredited for compliance with ISO 15189

Accreditation No 2115

Level 6, Xavier Building - St Vincent's Hospital
Victoria Street, Darlinghurst NSW 2010