Complete and print.

MAYO CLINIC LABORATORIES

# *Cytogenetics Tech Only HER2 Paraffin Testing Patient Information*

Reset Form

## Patient Information

| Patient Name *(Last, First, Middle)* | Birth Date *(mm-dd-yyyy)* | Legal/Administrative Sex ☐ Male ☐ Female ☐ Nonbinary |
|---|---|---|
| Patient ID (Medical Record Number, if available) | Sex Assigned at Birth ☐ Male ☐ Female ☐ Unknown ☐ Choose not to disclose | |

## Referring Provider Information

| Referring Provider Name *(Last, First)* | Phone | Fax* | **Fax number given must be from a fax machine that complies with applicable HIPAA regulations.* |
|---|---|---|---|
| Other Contact *(Last, First)* | Phone | Fax* | |

## Reason for Testing

## Reviewing Case

| Number of Unstained Slides Submitted | Pathology Report Included ☐ Yes ☐ No | Collection Date *(mm-dd-yyyy)* |
|---|---|---|

Fixative Used
☐ Formalin ☐ Bouins ☐ Prefer ☐ Other: _____

| Reviewing Pathologist Name *(Last, First)* | Date *(mm-dd-yyyy)* |
|---|---|

**Primary Tumor** (site)
- ☐ Breast: ☐ Left ☐ Right
- ☐ Gastroesophageal
- ☐ Gyn (Endometrial, Ovarian, or Fallopian Tube/Adnexal)
- ☐ Colorectal
- ☐ Urothelial
- ☐ Other: _____

**Metastatic Tumors** (indicate site of metastasis, if known)
- ☐ Liver ☐ Lung
- ☐ Lymph node ☐ Pleural fluid
- ☐ Skin ☐ Bone: Decalcified ☐ Yes ☐ No
- ☐ Other: _____

**Breast Morphology Descriptor Only**
☐ Ductal ☐ Lobular ☐ Mucinous ☐ Papillary

**Circled Area**
- ☐ Invasive tumor only
- ☐ Metastatic tumor only
- ☐ Invasive _____ % plus DCIS/LCIS _____ % circled
- ☐ DCIS/LCIS present – not circled _____ %
- ☐ IN SITU ONLY
- ☐ Other: _____

**Gastroesophageal Descriptor Only**
Morphology: ☐ Glandular ☐ Single cell invasion
_____ % invasive vs. noninvasive tumor (dysplasia) circled

Miscellaneous
- ☐ Poor fixation/Morphology
- ☐ Less than 100 tumor cells
- ☐ Other: _____

## Pathologist Notes (other pertinent information)

**Mayo Cytogenetics Use Only**
- ☐ **Cancel – lab will order full study**
- ☐ H2BR ☐ H2GE ☐ H2UR ☐ H2MT

**Trigger**
- ☐ Only block received ☐ Unmarked H&E ☐ Equivocal result ☐ Heterogeneity ☐ HER2 amped outside circled area
- ☐ Difficulty identifying invasive tumor for FISH scoring, requiring consultation with a pathologist



Print