| WGLS use only): NONA loc: In before? Date of receipt: | Investigation(s): Referral reason: | Wessex Genomics Laboratory Salisbury District Hospital, Salisbury, Wilt Tel.: +44(0)1722 429080 E-mail: shc-tr.WRGLdutyscientist@nhs.ne Web: www.wrgl.org.uk | s. SP2 8BJ |
|---|------------------------------------|--|---|
| BLOOD SAMPLES FOR RNA ANALYSIS | | | |
| Diagnostic test: R2 9 | 96 | | |
| PATIENT DETAILS | | | REFERRAL DETAILS |
| | FORENAME | | Provide <u>full clinical details</u> including any relevant family history |
| Date of birth | Date of birth NHS number | | |
| Sex Hospital number | | nber | |
| Referring clinician Hospital / Departr | | partment / Referral centre | |
| Clinician's contact number NHS Private (address for invoicing): NHS.net email | | | |
| Date of sample collection: Collected by: | | Collected by: | |
| Details of previous genetic investigations: | | | |
| Salisbury laboratory identifier: W | | | |
| Gene to be investigated: Variant nomenclature (HGVS): | | | |
| Transcript: NM_ Any other information: | | | |
| Sample requirements: | | | |
| Please fill 2 x PA8d6B2 xUNLABELLED SAMPLES WILL | | | |

NOT BE PROCESSED.

ACCEPTANCE CRITERIA

The National Genomic Test Directory specifies which tests are funded by NHS England, together with their eligibility criteria (https://www.england.nhs.uk/publication/national-genomic-test-directories/).

Eligibility criteria for Test Directory indication **R296**: Variant(s) requiring RNA analysis to aid interpretation where a molecular diagnosis will guide management or alter advice through reclassification of a variant from ACMG class 3 to class 4 or class 5.

Clinical Genetics services are available if required for advice or discussion of rare or unusual cases.

SAMPLE COLLECTION

Please fill 2 x PAX tubes with 2.5 ml of blood in each tube. Mix well by inverting the tube after collection.

Details on both the referral form and the sample tube should be **complete and legible.** We reserve the right to refuse to process samples with incomplete, illegible or ambiguous patient information.

Any samples in the wrong tube or medium, or which are subject to significant delay in transit, are liable to be rejected. Blood samples from patients who have had a recent white cell blood transfusion may not be suitable for testing.

SAMPLE DESPATCH AND TRANSPORT

Sample and referral form should be sent **together** in a secure leak-proof package according to UN3373 shipment classification and packaging instruction P650, to arrive as soon as possible after collection (e.g. by first class post, courier service or hospital transport) and **within 48 hours for optimum results.** Outside packaging should be clearly labelled

Opening hours are 9 am - 5.30 pm Mon - Fri; please inform the laboratory of any samples likely to arrive over a weekend or bank holiday, or of anything sent by courier which might arrive outside normal working hours. If there is an unavoidable delay between the sample collection and despatch, blood or tissue may be stored in a refrigerator at 4 °C.

For current information and to download copies of our referral forms and service guides, please refer to our website: www.wrgl.org.uk