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DNA loc:

In before?

Initials

Date of receipt:

Mainstream germline test for inherited cancer: Ovarian, Breast and Prostate.

PATIENT DETAILS

SURNAME	FORENAME
Date of birth	NHS number
Sex	Hospital number / Genetics number
Consultant	Hospital / Department
Additional copies to	NHS Private (address for invoicing):
Patient post code	GP name GP address

Clinical details

Please state in this box the full clinical details that meet the eligibility criteria overleaf:
DNA will be stored and not tested unless these details are provided.

Address to email final report:

Please use an NHS digital accredited secure e-mail address, generic department e-mail addresses are preferred

EDTA blood only

Date of collection : :

Collected by

Please pick one of the following tests (tick in the appropriate box):

- R207** Inherited ovarian cancer (without breast cancer). R207 genes tested: *BRCA1, BRCA2, BRIP1, MLH1, MSH2, MSH6, PALB2*, and truncating variants in *RAD51C* and *RAD51D*. See overleaf for testing criteria.
- R208** Inherited breast cancer and ovarian cancer. R208 genes tested: *BRCA1, BRCA2, PALB2*, and truncating variants in *ATM, CHEK2, RAD51C* and *RAD51D*. See overleaf for testing criteria.
- R430** Inherited prostate cancer. R430 genes tested: *BRCA1, BRCA2, MLH1, MSH2, MSH6, PALB2*, and truncating variants in *ATM* and *CHEK2*. See overleaf for testing criteria.
- R444** Breast cancer and metastatic, castration-resistant prostate cancer patients not meeting the R208/R430 criteria AND eligible for NICE approved PARP inhibitor treatment. R444 genes tested: *BRCA1* and *BRCA2*. **Note that M218.2 somatic tumour testing in prostate cancer should be performed as the first-line test, where possible.**

Referrals will only be accepted from one of the following:

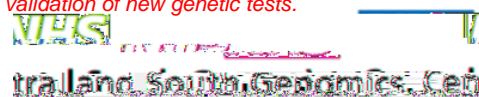
- Consultant Clinical Geneticist / Registered Genetics Counsellor
- OR** Consultant Oncologist (breast/gynaecology/urology)
- Consultant Surgeon (breast/gynaecology/urology)
- Breast Physician
- Clinical Nurse Specialist (breast/gynaecology/urology)

Name of clinician consenting the patient:

Please see next page for NHS England testing criteria. If the patient does not fulfil the testing criteria, the case should be discussed with Clinical Genetics (see link below).

<https://www.uhs.nhs.uk/ourservices/genetics/genetics.aspx>

In submitting this sample the clinician confirms that consent has been obtained for testing and storage. Anonymised stored samples may be used for quality control procedures including validation of new genetic tests.



R208 - Relevant testing criteria for clinical indication R208: Inherited breast cancer and ovarian cancer

1. Living affected individual (proband) with breast (including high grade DCIS) or high grade ovarian cancer where the individual (with or without family history) meets at least one of the criteria. The proband has:
 - a. Breast cancer (age < 40 years); OR
 - b. Bilateral breast cancer (age < 60 years); OR
 - c. Triple-negative breast cancer (age < 60 years); OR
 - d. Assigned male at birth and affected with breast cancer (any age); OR
 - e. Breast cancer (age <45 years) and a first-degree relative with breast cancer (age <45 years); OR
 - f. Combined pathology-