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