Northwell Health® Genomics Alliance

HEREDITARY CANCER REQUISITION

OUTLINED AREAS MUST BE COMPLETED

PATIENT

PATIENT IDENTIFIER			
NAME, LAST (Please Print)	FIRST	M.I.	
BIRTHDATE	M/F	DATE/TIME COLLECTED	
STREET	PHONE #		
CITY	STATE	ZIP	

BILLING

INSURANCE CARRIER NAME	ADDRESS	
INSURED NAME	INSURED ID#	PT. RELATIONSHIP TO INSURED: ☐ Self ☐ Spouse ☐ Dependent
GROUP # or NAME		☐ INSURANCE CHANGE
☐ MEDICARE #	☐ MEDICAID #	☐ SELF-PAY

RACE/ETHNICITY ☐ NATIVE AMERICAN ☐ ASIAN ☐ AFRICAN-AMERICAN ☐ CAUCASIAN ☐ ASHKENAZI JEWISH ☐ PACIFIC ISLANDER ☐ HISPANIC ☐ OTHER _____

AFFIX TO SPECIMEN CONTAINER

I attest that this patient has been informed about and has given consent for the test(s) I have ordered below under applicable law.
PHYSICIAN SIGNATURE: (required)

X

REPORT COPY TO:

DIAGNOSIS		DX CODE
DX CODE	DX CODE	DX CODE

ORDER COMMENTS

INFORMED CONSENT

Patient has read the appropriate consent form on the following pages and has been informed of the required information regarding testing for inherited genetic disorders or predisposition.

Patient Signature: _____ Healthcare Provider Signature: _____ Date: _____

ACCOUNT S4762 Northwell Health Genomics Alliance
T: (516) 719-1100 F: (516) 719-1220

OncoGeneDx Tests

Breast/Gynecologic Cancers

☐	BRCA 1/2	BRCA1/BRCA2 Ashkenazi Founder Panel
☐	BRCA 1/2 Seq	BRCA1 BRCA2 Sequencing and DEL/Dup Analysis
☐	BC High/Mod	Breast Cancer Management Panel
☐	B/O Cancer	Breast/GYN Cancer Panel

Colorectal Cancer

☐	Colorectal	Colorectal Cancer Panel
☐	LYNCH	GI/Colorectal High Risk Panel

Multiple Cancers

☐	CompCancer	Comprehensive Common Cancer Panel
☐	Hi/Mod Risk	Common Cancer Management Panel

Tumor Specific Panels

☐	MaligMelan	Melanoma Panel
☐	PancCancer	Pancreatic Cancer Panel
☐	PedTumor	Pediatric Tumor Panel
☐	PGL/PCC	PGL/PCC Panel
☐	RenCancer	Renal Cancer Panel

Patient Clinical Information

Personal History of Cancer: _____

☐ Breast Cancer(s) Age at Dx: _____ ER _____ PR _____ HER2 _____ ☐ triple negative

☐ Bilateral ☐ Two primaries ☐ Invasive Ductal ☐ Invasive Lobular ☐ DCIS ☐ LCIS ☐ Other: _____

☐ Colorectal Cancer(s) Age at Dx: _____ Pathology: _____

Location: ☐ Right ☐ Left ☐ Transverse ☐ Rectum

Patient has had a blood transfusion ☐ Yes ☐ No Date of last transfusion ____/____/____ (2-4 weeks of wait time is required for some testing)
Specimens are not accepted for patients who have had allogeneic bone marrow transplants.

☐ Treatment-Related RUSH: _____ (If known, please provide date)

Family History of Cancer(s) Tumor(s) or Relevant History

☐ No Known Family History ☐ Pedigree Attached ☐ Adopted

Please include clinical details, such as bilateral, pathology (including triple negative breast cancer), premenopausal breast cancer, and Gleason score for prostate cancer. For pancreatitis history, please indicate acute or chronic, if available.

Relationship	Maternal	Paternal	Cancer/Tumor Site or Relevant History	Age at Dx
_____	☐	☐	_____	_____
_____	☐	☐	_____	_____
_____	☐	☐	_____	_____
_____	☐	☐	_____	_____

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OncoGeneDx Panel Components	
Breast Cancer Management Panel (9 genes)	ATM, BRCA1, BRCA2, CDH1, CHEK2, NBN, PALB2, PTEN, TP53
Breast/Gyn Cancer Panel (23 genes)	ATM, BARD1, BRCA1, BRCA2, BRIP1, CDH1, CHEK2, EPCAM*, FANCC, MLH1, MSH2, MSH6, MUTYH, NBN, NF1, PALB2, PMS2, POLD1, PTEN, RAD51C, RAD51D, RECQL, TP53
Lynch/Colorectal High Risk Panel (7 genes)	APC, EPCAM*, MLH1, MSH2, MSH6, MUTYH, PMS2
Colorectal Cancer Panel (20 genes)	APC, ATM, AXIN2, BMPR1A, CDH1, CHEK2, EPCAM*, MLH1, MSH2, MSH6, MUTYH, NTHL1, PMS2, POLD1, POLE, PTEN, SCG5/GREM1*, SMAD4, STK11, TP53
Common Cancer Management Panel (37 genes)	APC, ATM, AXIN2, BMPR1A, BRCA1, BRCA2, BRIP1, CDH1, CDKN2A, CHEK2, EPCAM*, FH, FLCN, MLH1, MSH2, MSH6, MUTYH, NBN, NF1, NTHL1, PALB2, PMS2, POLD1, POLE, PTEN, RAD51C, RAD51D, SCG5/GREM1*, SDHB, SDHC, SDHD, SMAD4, STK11, TP53, TSC1, TSC2, VHL
Comprehensive Common Cancer Panel (46 genes)	APC, ATM, AXIN2, BAP1, BARD1, BMPR1A, BRCA1, BRCA2, BRIP1, CDH1, CDK4, CDKN2A, CHEK2, EPCAM*, FANCC, FH, FLCN, HOXB13, MET, MITF*, MLH1, MSH2, MSH6, MUTYH, NBN, NF1, NTHL1, PALB2, PMS2, POLD1, POLE, POT1, PTEN, RAD51C, RAD51D, RECQL, SCG5/GREM1*, SDHB, SDHC, SDHD, SMAD4, STK11, TP53, TSC1, TSC2, VHL
Melanoma Panel (9 genes)	BAP1, BRCA2, CDK4, CDKN2A, MITF*, POT1, PTEN, RB1, TP53
Pancreatic Cancer Panel (15 genes)	APC, ATM, BRCA1, BRCA2, CDK4, CDKN2A, EPCAM*, MLH1, MSH2, MSH6, PALB2, PMS2, STK11, TP53, VHL
Pediatric Tumor Panel (27 genes)	ALK, APC, CDC73, DICER1, EPCAM*, MEN1, MLH1, MSH2, MSH6, NF1, NF2, PHOX2B*, PMS2, PRKAR1A, PTCH1, PTEN, RB1, RET*, SMARCA4, SMARCB1, STK11, SUFU, TP53, TSC1, TSC2, VHL, WT1
PGL/PCC Panel (12 genes)	FH, MAX, MEN1, NF1, RET*, SDHA*, SDHAF2, SDHB, SDHC, SDHD, TMEM127, VHL
Renal Cancer Panel (18 genes)	BAP1, EPCAM*, FH, FLCN, MET, MITF*, MLH1, MSH2, MSH6, PMS2, PTEN, SDHB, SDHC, SDHD, TP53, TSC1, TSC2, VHL

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