

# CANCER GENETICS AND GENOMICS LABORATORY

## HEREDITARY CANCER MULTI-GENE PANEL



BC CANCER 604-877-6000 EXT 67-2094  
 DEPT. OF PATHOLOGY AND LABORATORY MEDICINE FAX: 604-877-6294  
 ROOM 3307 - 600 WEST 10TH AVENUE MON-FRI 8:30AM-4:30PM  
 VANCOUVER BC V5Z-4E6 [WWW.CANCERGENETICSLAB.CA](http://WWW.CANCERGENETICSLAB.CA)  
[GENETIC.COUNSELLOR@BCCANCER.BC.CA](mailto:GENETIC.COUNSELLOR@BCCANCER.BC.CA)

ADDRESSOGRAPH OR PATIENT LABEL

### PATIENT INFORMATION

Last Name		First and Middle Names	
Date of Birth (dd/mmm/yyyy)	Gender Male Female Non Binary/Other/Not Disclosed		
PHN	BC Cancer ID	Cerner MRN	
Email Address			

### REQUESTING PHYSICIAN

Name		MSC	
Phone	Fax		
Email Address			
Address			

NOTE: PHYSICIAN SIGNATURE REQUIRED (BELOW)

### CONSENT

Your sample **may** be sent to a laboratory in the USA for testing. Your personal information (name, date of birth, sex, cancer history) would be sent with the sample.  
 Please contact [genetic.counsellor@bccancer.bc.ca](mailto:genetic.counsellor@bccancer.bc.ca) if you have any questions or concerns.

Patient agrees to their results being shared with relatives referred to BC Cancer for genetic testing  
 Yes No

If patient is unable to receive their results, it should be disclosed to (or shared with):

Name	Relationship to patient	Contact Phone / Email
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### COPY PHYSICIANS (ALL INFORMATION IS NECESSARY)

Name		MSC	
Address			
Name		MSC	
Address			

### SPECIMEN

Specimen Type	Collect 1 x 6mL EDTA blood. Store and ship at room temperature using overnight delivery to Cancer Genetics and Genomics Laboratory (address above). Do not refrigerate or freeze.	Collection Date (dd/mmm/yyyy)
Peripheral Blood		

### INTERPRETER

Interpreter required?	Yes Language:
No	

### HEREDITARY CANCER TESTING INFORMATION

- This is a blood test to see if your cancer is hereditary. About 1 in 10 cancers are hereditary.
- If your cancer is hereditary, you will have an appointment with a genetic counsellor.
- Your test results may have implications for relatives.
- Your test results may be used to guide your cancer treatment and tell us about new cancer risks.
- Under the Canadian Genetic Non-Discrimination Act (GNDA), companies (including insurers) and employers cannot ask for your genetic test results or ask you to have genetic testing.
- Any unused samples may be stored at the BC Cancer Genetics & Genomics Laboratory and may be used to develop new clinical genetic tests in BC.

### TEST REQUESTED

Hereditary Cancer Multi-Gene Panel Testing <sup>SQ HCAGPB</sup> If your patient requires expedited testing for treatment planning, please email [genetic.counsellor@bccancer.bc.ca](mailto:genetic.counsellor@bccancer.bc.ca)

### ANCESTRAL BACKGROUND – SELECT ALL THAT APPLY

Africa / Caribbean	Asia East South/Central	Europe / UK	Indigenous (First Nations, Metis, Inuit)	Jewish Ashkenazi Sephardic	Middle East	South / Central America	Other
							Specify:

### TESTING INDICATION(S) – SELECT ALL THAT APPLY

<b>Breast Cancer</b> HER2-negative breast cancer, eligible for adjuvant Olaparib <b>Hereditary Breast and Ovarian Cancer</b> Breast cancer ≤ age 35 2 primary breast cancers, at least 1 ≤ age 50 Triple negative (ER-PR-HER2-) breast cancer ≤ age 60 Breast cancer ≤ age 50 AND no family history known due to adoption Ovarian, fallopian tube or peritoneal cancer (non-mucinous epithelial; incl. STIC) Male breast cancer  <b>Pancreatic Cancer</b> Pancreatic ductal adenocarcinoma Pancreatic neuroendocrine tumour	<b>Ashkenazi Jewish Heritage</b> Personal or family history of breast, ovarian, pancreatic, high-grade prostate cancer  <b>Other</b> ** Approved by Hereditary Cancer Program ** Confirmation of pathogenic variant result (include relevant report(s) from tumour testing or clinical trial/research testing) **INDICATION/VARIANT DETAILS (REQUIRED FOR TEST TO PROCEED)
<b>Prostate Cancer</b> Metastatic prostate cancer	

### PHYSICIAN SIGNATURE (REQUIRED)

By signing below, I hereby acknowledge that I have informed the patient about the implications of hereditary testing.

DATE

LAB USE ONLY	PB EDTA	Other	HCP USE ONLY	Progeny	Initials	Date