REQUEST FOR PROSTATE CANCER GENETIC TESTING

Please send an EDTA blood sample with completed form to your local Genetics laboratory for DNA extraction.
Please note, where referral is from Urology, Clinical Genetics approval will be required prior to activation of testing.
Genes tested: *BRCA1, BRCA2, CHEK2, ATM, PALB2, TP53, MLH1, MSH2, MSH6, RAD51D, PMS2, EPCAM, HOXB13*
Please note, where there is no family history of breast cancer, *PALB2* will not be analysed.

Patient Demographics (Patient label can be used)		
Forename:	Surname:	
CHI No.:	Date of Birth:	Sex: Male
Address (**must** include postcode):		
		Postcode:
Pedigree No. (if known):		

Referrer Details	
Referring Clinician(s):	Address for Report:
Copy to:	

Sample Information		
Sample Type:	Date Taken:	Infection High Risk: YES / NO If yes, please state infection risk (e.g.HepC) _____

Referral Information					
Age at diagnosis		Stage of disease		Gleason grading	
Metastatic?	Yes / No	Hormone resistant	Yes / No		
Family history:					
Additional relevant clinical information:					

Clinical Criteria (tick which applies)	
A man with prostate cancer diagnosed below the age of 50 years	
A man with metastatic prostate cancer diagnosed below 60 years with one first degree relative (a brother or a father) diagnosed with prostate cancer below 60 years	
A man diagnosed with metastatic prostate cancer with two first degree relatives (or one first and one second degree relative who are all first degree relatives of each other) with prostate cancer (patient and two brothers/ patient + 1 brother and father/ patient, father and father's brother/ patient, father & father's father)	
A man with prostate cancer who has a family history of cancer other than the above (referral by clinical genetics for the Manchester score greater than or equal to 15)	

***CONSENT:* It is the responsibility of the referring clinician to obtain informed consent from the patient / carer for the test and for the sample to be stored for future diagnostic testing.**

Signature of referring clinician: _____ ***Print name:***_____