Diagnosis: ____________________________________________
Performing Pathologist: ____________________________ (note outreach physician if not RMH path)

SITE: Posterior Superior Iliac Crest RIGHT LEFT BILATERAL (circle one)

SPECIMEN: Indicate the number of slides

____ Peripheral blood smears
____ Direct Aspirate Smears
____ Squash Preps (slants)
____ Touch Preps (Core)
____ # of slides sent for Flow Cytometry

SAMPLES: Indicate tubes received

____ # Heparin Tubes
____ # EDTA Bone Marrow
____ # EDTA Blood
____ # Clot Tubes
____ # Other ( Specify)

SPECIAL TESTING REQUIREMENTS – Do not Send Duplicate Tests Unless Approved By The Pathologist. (For example: Flow on both the Right and Left, if bilateral).

Special studies needed:

__ Flow Cytometry (LLTOF)
__ Chromosome analysis (CHRBHM)
__ Culture
  ___ AFB Smear(SAFB), Culture(CTB)
  ___ Routine RHM 1-3 mls in Peds bottle
  ___ Fungus FGEN (1 ml sterile screw cap)
  ___ PNH profile by flow cytometry (PLINK)
__ Lymphoma
  ___ CLL FISH panel (CLLF)
  ___ CLL IgVh mutation (BCLL)
  ___ B cell FISH specify locus:
  ___ B cell gene rearrangements (BCGBM)
  ___ T cell gene rearrangements (TCGBM)
  ___ MYD88 mutation PCR (MYD88)
__ Myeloma
  ___ Plasma Cell Proliferation Disorder FISH (PCPDF)
  ___ Congo red for amyloid
__ MDS
  ___ MDS FISH panel (MDSF)
  ___ MDS FISH specify locus:
  ___ OncoHeme Next Gen Sequencing (NGSHM)
__ Other:

Myeloproliferative disorder

__ JAK2 V617F Mutation by PCR (JAK2M)
__ BCR/ABL diagnosis by PCR (BADX)
__ BCR/ABL monitoring by PCR
__ Calreticulin by PCR (CALR)
__ MPL1 by PCR (MPLM)
__ JAK2 Exon 12 and other non V617 by PCR(JAKXM)
__ Imatinib responsive gene FISH (IMRGF)
__ FGFR1 rearrangement by FISH (FGFRF)
__ Myeloproliferative neoplasma, JAK2 V617F with reflex to CALR and MPL (MPNR)

AML

__ AML FISH panel (AMLF)
__ AML FISH specify locus:
__ FLT3 mutation (FLT)
__ NPM1 mutation (NPIM)
__ CEBPA mutation by Sanger sequencing (CEBPA)
__ Next Generation sequencing (NGAML or NGSHM)
__ PML/RARA PCR (PMLR)

COLLECTION OF ASPIRATE, CLOT, AND CORE BIOPSY:

____ Aspirate clot section Collected
____ Left Core Collected – estimated measurement for adequacy
____ Right Core Collected – estimated measurement for adequacy

TIME PLACED IN FIXATIVE:

B Plus Fixative Time: _______
Formalin Time: _______

WRIGHT-GIEMSA STAINED SLIDES: (Indicate number of slides stained, RMH use only)

___ Peripheral Smear
___ Direct Aspirate Smears
___ Squash Preps
___ Touch Preps (Core)
___ "F" Smear (Flow Cytometry)

(updated 11/28/18)
W:\Manuals - Procedure\Hematology Forms\BONE MARROW GROSS FORM- Test catalog.doc