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*Please complete **ALL** sections and email to geneticlabs@belfasttrust.hscni.net or send a copy to the Regional Molecular Diagnostic Service, Belfast City Hospital. **This must be accompanied by our standard genetics blood collection form containing signed patient consent***

Belfast Health and Social Care Trust
caring supporting improving together

Targeted Cancer Panel testing (R208): Inherited Breast Cancer

Northern Ireland Regional Molecular Diagnostic Service

Clinical genetics enquiries **Email:** genetic.medicine@belfasttrust.hscni.net **Phone:** 028 9504 8022
Lab enquiries **Email:** geneticslabs@belfasttrust.hscni.net **Phone:** 028 9504 7353

Patient Details

Full name: **Diagnosis:**

NHS no: **DoB:** **Age at diagnosis:**

Further personal/family history of cancer:

Will the results influence near clinical management?

If yes, specify (including timeframe):

Additional comments:

Referring Clinician Details-referrals will be accepted from the following *(tick as appropriate)*

- ☐ Consultant oncologist
- ☐ Consultant breast surgeon
- ☐ Other- please specify below

_____

Full name:
Hospital:
Department:
Email:
Consultant:
(referrals without a named consultant will be refused)

Indication for testing - patient **must** meet one of the following *(tick as appropriate)*

- ☐ Breast cancer* **<40**
- ☐ Triple negative breast cancer **<60**
- ☐ Bilateral breast cancer **<50**

** Breast cancer definition includes high grade DCIS*

- ☐ Male breast cancer (**any age)**
- ☐ Breast cancer **<45 AND** a one or more first-degree relative with breast cancer **<45**
- ☐ Breast cancer and Ashkenazi Jewish ancestry (**any age**)

Patients who do not have any of the above indications may still be eligible for genetic testing **through the clinical genetics service**. Details of additional criteria can be found on page 2 of the FAQ document.

Panel genes: the following genes will be tested for all patients

Note that this gene panel includes 6 additional genes that were previously limited to testing of those with a family history of ovarian and/or colorectal cancer

Inherited Breast and Ovarian Cancer Panel:
ATM, BRCA1, BRCA2, BRIP1, CHEK2, EPCAM, MLH1, MSH2, MSH6, PALB2, PMS2, PTEN, RAD51C, RAD51D, STK11, TP53

Following a referral to genetics, any patients found to have a variant in any of these genes will be offered a follow-up appointment to discuss their result and next steps (e.g. testing of relatives).