



Molecular Diagnostics Request Form RAS Mutation Analysis

T-Nr.

Referring physician/institution:

Patient:

Date of request:

E-No.:

Material:

The result should be sent by fax/e-mail to the following number/address

Request for the following analyses (please indicate):

- KRAS Exon 2 (Codon 12 and Codon 13)
- KRAS Exon 3 (Codon 61)
- KRAS Exon 4 (Codon 117 and Codon 146)
- NRAS Exon 2 (Codon 12 and Codon 13)
- NRAS Exon 3 (Codon 61)
- NRAS Exon 4 (Codon 117 and Codon 146)

- Tumor areas were dissected and DNA was extracted from formalin-fixed and paraffin-embedded (FFPE) tissue sections.
- No microdissection** was performed. DNA was prepared from the whole section and used for analysis.
- DNA was used for RAS PCR. The generated product was **suitable** **unsuitable** for further analysis
- content of tumor cells (%): number of slides:

Evaluation: A mutation was detected by RAS PCR and subsequent sequencing of the PCR products **yes** **no**.

The results of the sequencing confirm the existence of a **RAS mutation** of the following kind:

- | | |
|---|-------|
| <input type="checkbox"/> KRAS Exon 2 (Codon 12 or Codon 13) | Type: |
| <input type="checkbox"/> KRAS Exon 3 (Codon 61) | Type: |
| <input type="checkbox"/> KRAS Exon 4 (Codon 117 or Codon 146) | Type: |
| <input type="checkbox"/> NRAS Exon 2 (Codon 12 or Codon 13) | Type: |
| <input type="checkbox"/> NRAS Exon 3 (Codon 61) | Type: |
| <input type="checkbox"/> NRAS Exon 4 (Codon 117 or Codon 146) | Type: |

The percentage of the mutant in relation to the total of the examined RAS DNA is %.

Comments:

Date

Laboratory Management

Leistungen

Ziffern

im dc-pathos erfasst

Leistungen werden vom PCR-Labor erfasst - nicht diktieren!