INSTRUCTIONS FOR SAMPLE SUBMISSION

Documentation:
Each sample must be accompanied by:
1. A request form for DNA analysis completed by the physician, nurse or genetic counselor requesting screening. Please note: ICD-10 code is required for billing purposes. If ICD-10 code is unknown, please provide patient’s clinical symptom(s) or family history that prompted testing.
2. A completed registration form with check, money order, credit card authorization or information for billing the referring institution.
3. An informed consent signed by the patient (if under 18 years of age, the parent or guardian should sign) and the professional obtaining the consent. Please have the patient initial at the top of each page and send all pages of the consent.
4. A verification of blood tubes form signed by the patient, parent or guardian. The form should be signed at the time of the blood draw (optional).
5. The patient’s pedigree to include three generations, if possible.

IN THE EVENT THAT ALL PROPERLY COMPLETED FORMS DO NOT ACCOMPANY THE SPECIMEN, YOU WILL BE NOTIFIED, AND TESTING WILL BE HELD UNTIL PAPERWORK IS COMPLETE

Sample Requirements:
• Tumor sample
  - Fine needle aspirate of ocular tumor collected in HBSS (Hanks Solution) before plaque therapy, stored at 4°C and shipped on ice.
  - Paraffin embedded tumor: 5 x 20 micron sections (scrolls). Please ensure that the section contains >90% of the tumor cells. NOTE: paraffin tumor can yield an inconclusive result due to the quality of DNA. Specifically, paraffin tumors that have been preserved with picric acid or mercury-containing reagents yield very poor quality DNA.
• Blood sample
  - 2 EDTA tubes (lavender top) of blood - approximately 4 mL per tube
  - Newborn sample, obtain 2 EDTA tube (lavender top) of blood - approximately 1-2 mL per tube
• Label each specimen with the patient’s name, date sample was obtained, and patient’s date of birth
• We accept banked or recently extracted DNA; please include the concentration. Please call the laboratory to inquire about the amount needed for testing.

Shipping Sample:
Ship at room temperature via Federal Express or other overnight courier that guarantees AM delivery to arrive Monday-Friday. There is no one in the laboratory evenings and weekends to receive samples. If sample is drawn on a Friday, please refrigerate it until shipment on the following business day.

Shipping Address:
Genetic Diagnostic Laboratory
University of Pennsylvania
415 Anatomy-Chemistry Building
3620 Hamilton Walk
Philadelphia, PA 19104