

MOLECULAR DIAGNOSIS CENTRE				Mandatory Information Name: _____ NRIC: _____ Gender: _____ Date of Birth: _____ Account Number: _____
Svc Code Prefix	WARD	BED	CLINIC	Please paste label upright and within the box
103				
Relevant Clinical Information: (Diagnosis/History/Transplant date)				
Specimen taken: _____ Specimen type: <input type="checkbox"/> CSF <input type="checkbox"/> Bronchial lavage <input type="checkbox"/> Throat / nasal swab Date: _____ Ordered by: _____ <input type="checkbox"/> Blood <input type="checkbox"/> Urine <input type="checkbox"/> Chorionic villi <input type="checkbox"/> Fresh tissue / PET Time: _____ am / pm Consultant: _____ <input type="checkbox"/> Bone Marrow (BM) <input type="checkbox"/> Sputum <input type="checkbox"/> Amniotic fluid <input type="checkbox"/> Others: _____				
INFECTIOUS DISEASES			ONCOLOGY	
3012	<input type="checkbox"/> HBVP1 <input checked="" type="checkbox"/> <input type="checkbox"/>	Hepatitis B Virus (HBV) DNA PCR, Quantitative	5032	<input type="checkbox"/> 922 <input checked="" type="checkbox"/> <input type="checkbox"/> Quantitative <i>BCR-ABL1</i> mRNA Detection (Please specify): p190 / p210
3017	<input type="checkbox"/> HCVP1 <input checked="" type="checkbox"/> <input type="checkbox"/>	Hepatitis C Virus (HCV) RNA PCR, Quantitative	5070	<input type="checkbox"/> CML <input checked="" type="checkbox"/> <input type="checkbox"/> <i>ABL1 Kinase Domain</i> Mutation Screen
3018	<input type="checkbox"/> HCVG <input checked="" type="checkbox"/> <input type="checkbox"/>	Hepatitis C Virus (HCV) Genotype	5061	<input type="checkbox"/> AMLP <input checked="" type="checkbox"/> <input type="checkbox"/> Acute Myeloid Leukemia (AML) Panel inv16, t(8;21), t(15;17), t(9;22)
3027	<input type="checkbox"/> HEVP <input checked="" type="checkbox"/> <input type="checkbox"/>	Hepatitis E Virus (HEV) RNA PCR, Quantitative	5062	<input type="checkbox"/> ALLP1 <input checked="" type="checkbox"/> <input type="checkbox"/> Acute Lymphoblastic Leukemia (ALL) Panel t(12;21), t(1;19), t(4;11), t(9;22)
3057	<input type="checkbox"/> HIVL1 <input checked="" type="checkbox"/> <input type="checkbox"/>	HIV-1 RNA PCR, Quantitative	5067	<input type="checkbox"/> SOFT <input checked="" type="checkbox"/> <input type="checkbox"/> Single Oncogene Fusion (Please specify): _____
3068	<input type="checkbox"/> HIVGR <input checked="" type="checkbox"/> <input type="checkbox"/>	HIV-1 Reverse Transcriptase & Protease & Integrase Genotypic Resistance	5402	<input type="checkbox"/> FLNP <input checked="" type="checkbox"/> <input type="checkbox"/> <i>FLT3-NPM1</i> Mutational Panel
3818	<input type="checkbox"/> NATD <input checked="" type="checkbox"/> <input type="checkbox"/>	Nucleic Acid Test for HIV, HCV & HBV	5403	<input type="checkbox"/> FNCK <input checked="" type="checkbox"/> <input type="checkbox"/> <i>FLT3-NPM1-KIT</i> Mutational Panel
3106	<input type="checkbox"/> CTNGP <input checked="" type="checkbox"/> Sw <input type="checkbox"/> U <input type="checkbox"/>	<i>Chlamydia trachomatis</i> & <i>Neisseria gonorrhoeae</i> (CTNG) DNA PCR	5404	<input type="checkbox"/> FNCE <input checked="" type="checkbox"/> <input type="checkbox"/> <i>FLT3-NPM1-CEBPA</i> Mutational Panel
3114	<input type="checkbox"/> H1618 <input checked="" type="checkbox"/> Sw <input type="checkbox"/>	High-Risk Human Papillomavirus (HPV) 16/18 DNA PCR	5405	<input type="checkbox"/> CEBP <input checked="" type="checkbox"/> <input type="checkbox"/> <i>CEBPA</i> Mutation Detection
3600	<input type="checkbox"/> HSVP <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	Herpes Simplex Virus (HSV) 1 & 2 DNA PCR	0134	<input type="checkbox"/> CKITM <input checked="" type="checkbox"/> <input type="checkbox"/> <i>KIT</i> Mutation Detection
3109	<input type="checkbox"/> VZD <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	Varicella Zoster Virus (VZV) DNA PCR	0136	<input type="checkbox"/> JAK2M <input checked="" type="checkbox"/> <input type="checkbox"/> <i>JAK2 V617F</i> Mutation Detection
3804	<input type="checkbox"/> EBVP <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Epstein-Barr Virus (EBV) DNA PCR, Quantitative	5074	<input type="checkbox"/> J1213 <input checked="" type="checkbox"/> <input type="checkbox"/> <i>JAK2 Exons 12 & 13</i> Mutation Detection
3105	<input type="checkbox"/> CMVP <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Cytomegalovirus (CMV) DNA PCR, Quantitative	5075	<input type="checkbox"/> MPLM <input checked="" type="checkbox"/> <input type="checkbox"/> <i>MPL Exon 10</i> Mutation Detection
3802	<input type="checkbox"/> HHV6 <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Herpesvirus 6 (HHV-6) DNA PCR, Quantitative	5089	<input type="checkbox"/> CALR <input checked="" type="checkbox"/> <input type="checkbox"/> <i>Calreticulin, CALR Exon 9</i> Mutation Detection
3814	<input type="checkbox"/> HHV8P <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Herpesvirus 8 (HHV-8) DNA PCR, Quantitative	5090	<input type="checkbox"/> JAKC <input checked="" type="checkbox"/> <input type="checkbox"/> <i>JAK2-CALR</i> Mutational Analysis
3805	<input type="checkbox"/> CMVD <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Cytomegalovirus (CMV) UL54 & UL97 Genotypic Resistance	5091	<input type="checkbox"/> JAKCM <input checked="" type="checkbox"/> <input type="checkbox"/> <i>JAK2-MPL-CALR</i> Mutational Analysis
3809	<input type="checkbox"/> ADP <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Adenovirus (ADV) DNA PCR	5086	<input type="checkbox"/> MYD88 <input checked="" type="checkbox"/> <input type="checkbox"/> <i>MYD88 L265P</i> Mutation Detection
3813	<input type="checkbox"/> EVPCR <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Enterovirus RNA PCR	5037	<input type="checkbox"/> TCG <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/> T-Cell Receptor Gene Rearrangement- γ Chain
3815	<input type="checkbox"/> PB19P <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Parvovirus B19 DNA PCR	5041	<input type="checkbox"/> IGH <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/> Immunoglobulin Heavy Chain Gene Rearrangement
0137	<input type="checkbox"/> BKVD <input checked="" type="checkbox"/> <input type="checkbox"/> U <input type="checkbox"/>	BK Virus (BKV) DNA PCR, Quantitative	5068	<input type="checkbox"/> KRSM <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/> <i>KRAS</i> Mutations Detection
3028	<input type="checkbox"/> JCPD <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	John Cunningham (JC) Virus DNA PCR	5071	<input type="checkbox"/> BRFM <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/> <i>BRAF</i> Mutation Detection
3831	<input type="checkbox"/> DCPCR <input checked="" type="checkbox"/> <input type="checkbox"/>	Dengue Virus & Chikungunya Virus RNA PCR	0133	<input type="checkbox"/> EGFRM <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/> Epidermal Growth Factor Receptor (<i>EGFR</i>) mutation
3825	<input type="checkbox"/> ZIKAP <input checked="" type="checkbox"/> <input type="checkbox"/> U <input type="checkbox"/>	Zika Virus RNA PCR	5092	<input type="checkbox"/> EGFP <input checked="" type="checkbox"/> <input type="checkbox"/> Epidermal Growth Factor Receptor (<i>EGFR</i>) Plasma Test
3026	<input type="checkbox"/> RESMX <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	Respiratory Pathogens DNA & RNA PCR	5073	<input type="checkbox"/> MGMT <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/> <i>MGMT</i> methylation by MS-PCR
3022	<input type="checkbox"/> H5NRT <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	Influenza A Virus H5N1 RNA PCR	5700	<input type="checkbox"/> BME <input checked="" type="checkbox"/> <input type="checkbox"/> Chimerism Studies
3029	<input type="checkbox"/> NCVF <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	Middle East Respiratory Syndrome Coronavirus (MERS-CoV) RNA PCR	5702	<input type="checkbox"/> LSCA <input checked="" type="checkbox"/> <input type="checkbox"/> Lineage-specific Chimerism Analysis
3031	<input type="checkbox"/> NC19 <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	SARS-CoV-2 RNA PCR		
3827	<input type="checkbox"/> MEPC <input checked="" type="checkbox"/> CSF <input type="checkbox"/>	Meningitis & Encephalitis DNA & RNA PCR, CSF		
3101	<input type="checkbox"/> MPSP1 <input checked="" type="checkbox"/> <input type="checkbox"/>	Plasmodium (Malaria) DNA PCR Genus		
3102	<input type="checkbox"/> MPSS1 <input checked="" type="checkbox"/> <input type="checkbox"/>	Plasmodium (Malaria) DNA PCR Species		
3806	<input type="checkbox"/> BPPCR <input checked="" type="checkbox"/> Sw <input type="checkbox"/> O <input type="checkbox"/>	<i>Bordetella pertussis/parapertussis</i> DNA PCR		
3803	<input type="checkbox"/> ASPP <input checked="" type="checkbox"/> <input type="checkbox"/> O <input type="checkbox"/>	Aspergillus species DNA PCR		
3824	<input type="checkbox"/> DRMP <input checked="" type="checkbox"/> Nail <input type="checkbox"/>	Dermatophyte DNA PCR		

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MUTATIONAL ANALYSIS				NEXT-GENERATION SEQUENCING PANEL											
0142 <input type="checkbox"/> ATHAL <input type="checkbox"/> Alpha Thalassemia Genotyping 0143 <input type="checkbox"/> BTHAL <input type="checkbox"/> Beta Thalassemia Genotyping 0114 <input type="checkbox"/> GENE A <input type="checkbox"/> Gene-mapping (α-Thalassemia, prenatal) 0118 <input type="checkbox"/> GENE B <input type="checkbox"/> Gene-mapping (β-Thalassemia, prenatal) 0140 <input type="checkbox"/> PWASM <input type="checkbox"/> Prader-Willi/Angelman Syndrome (MS-PCR) 5011 <input type="checkbox"/> YCHD <input type="checkbox"/> Y-Chromosome Deletions 5028 <input type="checkbox"/> FASL <input type="checkbox"/> Factor V Leiden Thrombophilia 5029 <input type="checkbox"/> MTHFR <input type="checkbox"/> Methylenetetrahydrofolate reductase (<i>MTHFR</i>) Variant 5030 <input type="checkbox"/> PTGT <input type="checkbox"/> Prothrombin 20210G>A Thrombophilia 5035 <input type="checkbox"/> HFE <input type="checkbox"/> Haemochromatosis (<i>HFE</i>) Mutation Detection 5055 <input type="checkbox"/> B27P <input type="checkbox"/> <i>HLA-B*27</i> typing, PCR 5083 <input type="checkbox"/> HB152 <input type="checkbox"/> <i>HLA-B*1502</i> Genotype, Carbamazepine hypersensitivity 5056 <input type="checkbox"/> LHON <input type="checkbox"/> Leber's Hereditary Optic Neuropathy (LHON)	5094 <input type="checkbox"/> MPNNG <input type="checkbox"/> Myeloid Neoplasm NGS Panel for Myeloproliferative Neoplasm (MPN) 5095 <input type="checkbox"/> AMLNG <input type="checkbox"/> Myeloid Neoplasia NGS Panel for Acute Myeloid Leukemia (AML)														
<p>Useful information:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 20px; height: 15px; background-color: purple; border: 1px solid black;"></td> <td>EDTA-anticoagulant blood tube</td> </tr> <tr> <td style="width: 20px; height: 15px; background-color: red; border: 1px solid black;"></td> <td>Plain blood tube, can substitute with yellow top blood tube</td> </tr> <tr> <td style="width: 20px; height: 15px; text-align: center; border: 1px solid black;">U</td> <td>Urine</td> </tr> <tr> <td style="width: 20px; height: 15px; text-align: center; border: 1px solid black;">Sw</td> <td>Swab - Endocervical swabs for CTNGP and H1618 Swab - Respiratory tract swabs such as nasal, throat, nasopharyngeal</td> </tr> <tr> <td style="width: 20px; height: 15px; text-align: center; border: 1px solid black;">O</td> <td>Others - include sputum, BAL, ETT aspirate, tissue biopsy, body fluid, etc. Please call MDC at 67724384 or 67724175 for details</td> </tr> </table>							EDTA-anticoagulant blood tube		Plain blood tube, can substitute with yellow top blood tube	U	Urine	Sw	Swab - Endocervical swabs for CTNGP and H1618 Swab - Respiratory tract swabs such as nasal, throat, nasopharyngeal	O	Others - include sputum, BAL, ETT aspirate, tissue biopsy, body fluid, etc. Please call MDC at 67724384 or 67724175 for details
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Remarks / Special Instructions / Special Requests: <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div>															
Please visit our website for detailed information: http://nuhsingapore.testcatalog.org/															