

JAK2 Testing

Including Mutation Analysis in Myeloproliferative Neoplasms



Sample requirements

4.5 ml peripheral blood in EDTA

Incomplete forms will result in delay of sample analysis, and possible rejection of samples.

Patient information		Referring clinician	
Surname		Name (print clearly)	
Forename		Hospital	
DOB	Male / Female		
NHS No		Contact Tel	
Postcode		Email	
Sample information			
Date sample taken			
Pathology Sample Ref			

Clinical diagnosis

Possible Essential Thrombocythaemia (ET) or Primary Myelofibrosis (PM) - (JAK2/MPL/CALR)	<input type="checkbox"/>	<i>Please select which test is required</i>
Possible Polycythaemia Vera (PV) - (V617F Only)	<input type="checkbox"/>	<i>No selection will result in NO test being performed</i>
Exon 12 (PV – if negative for V617F)	<input type="checkbox"/>	

Samples will be tested for the presence of JAK2 V617F (c.1849G>T)

Haematology tests only (if required a further EDTA blood sample is needed)

Erythropoietin	<input type="checkbox"/>
Variant Haemoglobinopathy	<input type="checkbox"/>

Samples should be sent to:

Haematology Laboratory, 1st floor Leech Building, Medical School, Royal Victoria Infirmary, Queen Victoria Road, Newcastle upon Tyne NE1 4LP

Test result enquiries: 0191 282 4766

Shipping Instructions:

All samples should be appropriately packaged and labelled and sent via Courier or Royal Mail 1st Class Special Delivery.

Enquiries to:

NewGene, Sample Reception, Biomedicine West Wing, International Centre for Life, Newcastle upon Tyne, NE1 4EP

Enquires: 0191 242 1923 / Email: enquiries@newgene.org.uk (Opening hours: 8:30am – 5:00pm, Monday to Friday)



For NewGene use only

Sample ref:		Sample type	
-------------	--	-------------	--