

# EAVES STEM CELL ASSAY REQUISITION

Addressograph:

**Eaves Stem Cell Assay Laboratory**  
**Terry Fox Laboratory, BC Cancer Agency**  
**675 W. 10th Avenue, Vancouver BC V5Z 1L3**  
**Phone: (604) 675-8000 x 7746**  
**Fax: (604) 675-8146**  
**Hours: Monday - Friday 9am - 5pm** (closed Weekends and Statutory Holidays)

Patient Name: \_\_\_\_\_ Sex:  Male  Female  
Date of Birth (mm/dd/yy): \_\_\_\_\_ Hospital: \_\_\_\_\_  
PHN: \_\_\_\_\_ Patient is:  Inpatient  Outpatient  
Diagnosis/Clinical History: \_\_\_\_\_

**If available please include copies of most recent reports:  
CBC, Bone Marrow (Aspirate and Biopsy) and Cytogenetics/DNA Analysis/Jak2**

Requesting Physician: \_\_\_\_\_ MSP #: \_\_\_\_\_ Tele #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Family Physician: \_\_\_\_\_ MSP #: \_\_\_\_\_ Tele #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Other Physician: \_\_\_\_\_ MSP #: \_\_\_\_\_ Tele #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**TEST(s) REQUESTED:** Please note that the clinical utility of these tests is not yet established and these tests should be considered research.

### COLONY FORMING CELL (CFC) ASSAY

- Peripheral Blood - 20 ml blood collected in Sodium Heparin, received within 24 hrs
- Bone Marrow - 2 ml marrow collected in Heparin, received within 24 hrs

### CHIMERISM POST TRANSPLANT ASSESSMENT

- Peripheral Blood - 20ml blood collected in Sodium Heparin, received before 3:30pm Mon-Thur only

### PB LYMPHOCYTE SORTING FOR GERMLINE TESTING

- Peripheral Blood - 20ml blood collected in Sodium Heparin, received before 3:30pm Mon-Thur only

***MORE DETAILED COLLECTION INSTRUCTIONS CAN BE FOUND ON REVERSE***

Specimen Collection Date (mm/dd/yy): \_\_\_\_\_ Specimen Collection Time: \_\_\_\_\_

Eaves Stem Cell Assay use only

Specimen Received: \_\_\_\_\_ Specimen(s) No: \_\_\_\_\_

Comments: \_\_\_\_\_

## INSTRUCTIONS FOR COLLECTION AND DELIVERY OF SPECIMENS FOR THE EAVES STEM CELL ASSAY LABORATORY

---

### COLONY FORMING CELL (CFC) ASSAY

**Peripheral Blood:** 20 to 30 ml peripheral blood collected in Sodium Heparin vacutainer tubes.

**Bone Marrow:** 1 to 3 ml bone marrow collected aseptically in Eaves Stem Cell Culture tubes containing 800 U/ml Heparin. *These tubes are obtained directly from the Eaves Stem Cell Assay lab.*

Ideally both a peripheral blood and bone marrow sample should be sent for complete assessment of the colony-forming hematopoietic stem cell compartment.

**Specimens must be labeled with** - the patient's name; another unique identifier such as DOB or PHN; type of specimen; date and time the sample was drawn.

Specimens have to be processed as quickly as possible the same day of collection, or stored at 4°C and received no longer than 24 hours after collection. Therefore, specimens should be sent immediately by courier or air. Specimens need to be kept cool with an ice pack but not frozen. Please advise the Eaves Stem Cell Assay Lab by phone or fax when a specimen has been sent.

Turn around time for a CFC Assay is 6 weeks, by which time a finalized report will have been faxed to the Physician(s).

---

### CHIMERISM POST TRANSPLANT ASSESSMENT or PB LYMPHOCYTE SORTING FOR GERMLINE TESTING

**Peripheral Blood:** 20 ml peripheral blood collected in Sodium Heparin vacutainer tubes.

**Samples must be drawn Monday to Thursdays only.**

Specimens have to be processed as quickly as possible the same day of collection, or stored at 4°C and received no longer than 24 hours after collection. Therefore, specimens should be sent immediately by courier or air. Specimens need to be kept cool with an ice pack but not frozen. Please advise the Eaves Stem Cell Assay Lab by phone or fax when a specimen has been sent.

---

**Specimens should be addressed to:** EAVES STEM CELL ASSAY LABORATORY  
Terry Fox Laboratory  
675 West 10th Avenue  
Vancouver, BC  
V5Z 1L3  
Phone: (604) 675-8000 x 7746  
Fax: (604) 675-8146

**For more information and concerns, please contact the Section Head at the phone number above.**

**Please visit our website <https://www.bccrc.ca/dept/tfl/dept/tfl/services/eaves-stem-cell-assay> for further information and copies of the Eaves Stem Cell Assay Requisition and Collection and Delivery Instructions.**