Announcement of new case of neuroblastoma and

Laboratory Shipment Form for Neuroblastoma

* *Form must be sent as soon as you identify a patient with suspected neuroblastoma to* *dfme.recherche\_clinique.hop@chuv.ch**,* *maja.beck-popovic@chuv.ch**, and raffaele.renella@chuv.ch*
* *Shipment must be announced by sending an email to* *dmcp.laboratoire.hop@chuv.ch*

|  |  |
| --- | --- |
| **PATIENT**Last name: Cliquez ou appuyez ici pour entrer du texte.First name: Cliquez ou appuyez ici pour entrer du texte.DOB : Cliquez ou appuyez ici pour entrer une date.(dd/mm/yyyy)Gender : [ ]  male [ ]  femaleAddress :Line 1: Cliquez ou appuyez ici pour entrer du texte. Line 2: Cliquez ou appuyez ici pour entrer du texte.Insurance:Cliquez ou appuyez ici pour entrer du texte. | **REQUESTING PHYSICIAN**Last name: Cliquez ou appuyez ici pour entrer du texte.First name: Cliquez ou appuyez ici pour entrer du texte.Address :Line 1: Cliquez ou appuyez ici pour entrer du texte. Line 2: Cliquez ou appuyez ici pour entrer du texte.Phone: Cliquez ou appuyez ici pour entrer du texte.Email: Cliquez ou appuyez ici pour entrer du texte. |

**PATIENT CLINICAL INFORMATION AT DIAGNOSIS** (tick all that apply)

* **Age at diagnosis:** [ ] ≤ 12 mo [ ]  > 12 mo - ≤ 18 mo [ ]  > 18 mo
* **Signs or symptoms:** [ ]  Yes, **which one(s):** Cliquez ou appuyez ici pour entrer du texte.

 **If yes**, are they life-threatening symptoms (LTS)? [ ]  Yes [ ]  No

 [ ]  No symptoms

* **Site of primary tumo**r: Cliquez ou appuyez ici pour entrer du texte.
* **Metastasis:** [ ]  Yes, **which one(s):** Cliquez ou appuyez ici pour entrer du texte.

 [ ]  No [ ]  Not yet evaluated

* **Bone marrow infiltration:**  [ ]  Yes [ ]  No [ ]  Not yet evaluated
* **Disease staging (if known):** [ ] L1 [ ]  L2 [ ]  M [ ]  Ms

**STUDY PROTOCOL** (if applicable, tick all that apply)

[ ]  HR-NBL2 Date of initial diagnosis: Cliquez ou appuyez ici pour entrer une date.

 [ ]  Metanephrines (research project) Study code (if applicable): Cliquez ou appuyez ici pour entrer du texte.

 [ ]  BEACON2

 [ ]  Treatment according to LINES On treatment: [ ]  yes [ ]  no

 [ ]  Other

 Day1 of treatment: Cliquez ou appuyez ici pour entrer une date.

 Therapy timepoint:

 [ ]  At diagnosis

 [ ]  On treatment, Time point: Cliquez ou appuyez ici pour entrer du texte.

 [ ]  At relapse

**BIOBANKING CONSENTS** (if applicable, tick all that apply)

[ ]  General consent for research (according to local institution)

[ ]  SPHO biobank consent

[ ]  BIOPORTAL biobank consent

**DATE OF SAMPLING** (tick all that apply)

* **Planned date of tumor biopsy (=Diagnosis date):** Cliquez ou appuyez ici pour entrer une date.
* Specify: [ ]  Primary tumor [ ]  Metastasis
* Localisation: Cliquez ou appuyez ici pour entrer du texte.
* **Planned date of bone marrow aspiration/biopsy:** Cliquez ou appuyez ici pour entrer une date.
* Please take both sites (left and right). If it’s not possible, choose one site, and specify:

[ ]  left [ ]  right

**Please analyze tumor histopathology and bone marrow smears, according to your local practices (do not send us any BM smears)**

**Please complete the table from page 4 to 11, according to treatment time point**

**Comments**

**SHIPMENT ADDRESSES**

If possible, please send all the requested material at the appropriate temperature to the specific contact (IPA, HOP, Peptide & Catecholamine Laboratory, SIOPEN Immunology group) as rapidly as possible post collection with the present “Laboratory Shipment Form for Neuroblastoma” (<https://wp.unil.ch/lhop/diagnostics/>).

**Please always inform us by email prior to shipping (****dmcp.laboratoire.hop@chuv.ch)**

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| --- | --- |
| IPA / CHUV | **Dr. Carole Gengler** Centre Hospitalier Universitaire VaudoisInstitut Universitaire de Pathologie (IPA)Section de Pathologie cliniqueRue du Bugnon 25 CH-1011 Lausanne |
| HOP / CHUV | **Clinical Research Team HOP****E. Lemmel / S. Blanc / M. Flahaut**Centre Hospitalier Universitaire VaudoisService de pédiatrieUnité d’Hématologie-Oncologie Pédiatrique (HOP)BH11/614Rue du Bugnon 46CH-1011 Lausanne |
| Peptide & Catecholamine Lab / CHUV | **Dr Eugster Philippe**Centre Hospitalier Universitaire VaudoisPeptide & Catecholamine Laboratoire Hôpital Nestlé, 6ème étage, Laboratoire 6019Avenue Pierre Decker 5CH-1011 Lausanne |
| SIOPEN Immunology group / Germany | **Prof. Dr. med. Holger Lode** University of Greifswald Children’s Hospital Sauerbruchstrasse 1 17475 Greifswald Germany**Please use Form 2c adapted from the lab manual** |

**SPOG SITE:** ……………………………………………………….**DATE:** ……………………………

**PHYSICIAN, NAME and SIGNATURE:** ………………………………………………………………

***CENTRAL LAB USE ONLY (to be filled manually)***

Sample received on date: \_\_\_\_ /\_\_\_\_ /\_\_\_\_ (dd/mm/yyyy) and time: \_\_\_\_ : \_\_\_\_ (HH:MM)

Samples received as listed above?

 [ ]  Yes

[ ]  No, comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Samples received intact?

 [ ]  Yes

[ ]  No, comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LAB SHIPMENT FORM FOR NBL PATIENTS**

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| **All NBL patients or all NBL patients** |
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| [ ]  ***Study entry/Diagnosis (E1 for HR-NBL2 patients and all other non-trial patients at diagnosis)*** |
|  | **Transport conditions** | **Cytogenetics****SNParray****NGS-ALK (HR2)** | **Histology,****FISH NMYC** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** | **Metanephrines** | **FCGR/KIR polymorphism, pharmaco-genomics** | **Send to…****(refer to page 3)** |
| [ ]  Primary tumor | -80°C | **Fresh/frozen** |  |  |  |  |  | IPA |
| [ ]  Primary tumor | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM trephines(left and right)[[1]](#footnote-1) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right)1 | **+4°C****within 24h** |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX[[2]](#footnote-2) (left)0.5ml PAX2 (right) |  |  | HOP |
| [ ]  Peripheral blood1 | **+4°C****within 24h** |  |  | 4-5ml EDTA | 2ml PAX2 |  |  | HOP |
| ☐ Peripheral blood1 | **+4°C****within 24h** |  |  |  |  |  | 2x2ml EDTA[[3]](#footnote-3) | SIOPEN Immunology |
| [ ]  Peripheral blood1 | **-80°C** |  |  |  |  | 2.6ml Li-He[[4]](#footnote-4) |  | Peptide & Catecholamine |
| [ ]  Urine1 | **-80°C** |  |  |  |  | 2.5ml Spot4 with pH 3.8-5.2 |  | Peptide & Catecholamine |

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| **HR-NBL2 study** |
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| [ ]  ***Mid-induction, COJEC day 40 or GPOH after 1rst  N6 course (E2 for HR-NBL2)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX[[5]](#footnote-5) (left)0.5ml PAX5 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX5 |  |  | HOP |
|  |
| [ ]  ***End of induction (E3 for HR-NBL2)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** | **Metanephrines** | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX5 (left)0.5ml PAX5 (right) |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX5 |  | HOP |
| [ ]  Peripheral blood | -80°C |  |  |  |  | 2.6ml Li-He[[6]](#footnote-6) | Peptide & Catecholamine |
| [ ]  Urine | -80°C |  |  |  |  | 2.5ml Spot6 with pH 3.8-5.2 | Peptide & Catecholamine |
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| **HR-NBL2 study** |
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| [ ]  ***Post TEMIRI (E3a for HR-NBL2, not applicable for all patients)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
|  |  |  |  |  |  |  |  |  |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX[[7]](#footnote-7) (left)0.5ml PAX7 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX7 |  |  | HOP |
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| [ ]  ***Post SURGERY (E4 for HR-NBL2)*** |
|  | **Transport conditions** |  |  | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX7 |  |  | HOP |
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| **HR-NBL2 study** |
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| [ ]  ***Post Thio (E5 for HR-NBL, not applicable for all patients)*** |
|  | **Transport conditions** |  |  | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX8 |  |  | HOP |

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| [ ]  ***Post BuMel, pre RTX (E6 for HR-NBL2)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX8 (left)0.5ml PAX8 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX[[8]](#footnote-8) |  |  | HOP |

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| **HR-NBL2 study** |
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| [ ]  ***Pre-maintenance (E7 for HR-NBL2)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  | **HACA (at each cycle of Dinutuximab beta: day 1 and day 10)** | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX[[9]](#footnote-9) (left)0.5ml PAX9 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX9 |  |  | HOP |
| [ ]  Peripheral blood | RTwithin 24h |  |  |  |  |  | 2-3ml serum tube[[10]](#footnote-10) | HOP |

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| **HR-NBL2 study** |
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| [ ]  ***Mid-maintenance after 2nd cycle of Dinutuximab beta and 13-cis-RA (E8 for HR-NBL2)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  | **HACA (at each cycle of Dinutuximab beta: day 1 and day 10)** | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX[[11]](#footnote-11) (left)0.5ml PAX11 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX11 |  |  | HOP |
| [x]  Peripheral blood | RTwithin 24h |  |  |  |  |  | 2-3ml serum tube[[12]](#footnote-12) | HOP |
|  |
| [ ]  ***End of treatment, EoT (E9 for HR-NBL2)*** |
|  | **Transport conditions** |  | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX11 (left)0.5ml PAX11 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX11 |  |  | HOP |
| [ ]  Peripheral blood | RTwithin 24h |  |  |  |  |  |  | HOP |

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| **HR-NBL2 study** |
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| [ ]  ***Follow-up 6 months after EoT (E11 for HR-NBL2)*** |
|  | **Transport conditions** |  |  | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX13 |  |  | HOP |
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| [ ]  ***Relapse (E10 for HR-NBL2)*** |
|  | **Transport conditions** | **Cytogenetics****(SNParray and NGS-ALK)** | **Histology** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  | **Send to****(refer to page 3)** |
| [ ]  Primary tumor | -80°C | Fresh/frozen |  |  |  |  |  | IPA |
| [ ]  Primary tumor | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM trephines(left and right) | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  |  |  |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | 0.5ml PAX13 (left)0.5ml PAX13 (right) |  |  | HOP |
| [ ]  Peripheral blood | +4°Cwithin 24h |  |  | 4-5ml EDTA | 2ml PAX13 |  |  | HOP |
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13According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples.

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| **HR-NBL2 study** |
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| [ ]  ***PBSCH for HR-NBL2 (At time of harvest)*** |
|  | **Transport conditions** | **GD2-IHC (only for BM), plasma preparation, cell isolation** | **RTqPCR** |  |  **Send to** **(refer to page 3)** |
| [ ]  PBSCH | +4°Cwithin 24h | 1.5ml EDTA | 0.5ml PAX14 |  | HOP |

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| **Only for non-trial patients (Please specify treatment status on page 2)** |
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|  | **Transport conditions** | **Cytogenetics****(SNParray and NGS-ALK)** | **Histology (review)** | **GD2-IHC (only for BM)** |  **Send to** **(refer to page 3)** |
| [ ]  Tumor material  | -80°C | Fresh/frozen |  |  | IPA |
| [ ]  Tumor material | RT |  | FFPE-block or 10 unstained FFPE-slides (2-3 m) |  | IPA |
| [ ]  BM aspirations (left and right) | +4°Cwithin 24h |  |  | 5ml EDTA (left)5ml EDTA (right) | HOP |
| [ ]  PBSCH | +4°Cwithin 24h |  |  | 1.5ml EDTA | HOP |
|  |  |  |  |  |  |
| **Bioportal registry (only for non-trial patients)** |
|  |
| [ ]  ***Peripheral blood*** |
|  | **Transport conditions** | **T1** | **T2** | **T3** |  **Send to** **(refer to page 3)** |
| 10 ml EDTA | +4°Cwithin 24h | [ ]  Study entry (=at diagnosis) | [ ]  During treatment (=after the first dose of trial or non-trial regimen) | [ ]  At the end of treatment (=after the last cycle of treatment) | HOP |

14According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples.

**GLOSSARY**

BM Bone Marrow

EDTA EthyleneDiamineTetraAcetic acid

EoT End of Treatment

FFPE Formalin-Fixed Paraffin-Embedded

GD2 DisialoGanglioside

HACA Human Anti-Chimeric Antibodies

HOP Unité d’Hématologie-Oncologie Pédiatrique

IHC ImmunoHistoChemistry

IPA Institut Universitaire de Pathologie

LHOP Laboratoire d’Hématologie-Oncologie Pédiatrique

Li-He Lithium-Heparin

LOG Laboratoire d'OncoGénomique

PB Peripheral Blood

PBSCH Peripheral Blood Stem Cells Harvest

RT Room Temperature

RTqPCR Quantitative Reverse Transcription Polymerase Chain Reaction

1. These samples should be taken only in case of high suspicion of high risk NBL. [↑](#footnote-ref-1)
2. According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples. [↑](#footnote-ref-2)
3. The pharmacogenomics studies (2 ml EDTA-blood) are part of planned future studies and decision to participate is up to each SPOG site, provided informed consent has been given. [↑](#footnote-ref-3)
4. Prepare plasma and urine according to the specific lab manual for Metanephrine study and store at -80°C until sending via Swiss Post (Swiss-Express «Innight»). The center in Lausanne will then send the urine of all patients from all Swiss centers to The Netherlands for analysis of urinary catecholamines and metabolites. [↑](#footnote-ref-4)
5. According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples. [↑](#footnote-ref-5)
6. Prepare plasma and urine according to the specific lab manual for Metanephrine study and store at -80°C until sending via Swiss Post (Swiss-Express «Innight»). The center in Lausanne will then send the urine of all patients from all Swiss centers to The Netherlands for analysis of urinary catecholamines and metabolites. [↑](#footnote-ref-6)
7. According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples. [↑](#footnote-ref-7)
8. According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples. [↑](#footnote-ref-8)
9. According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples. [↑](#footnote-ref-9)
10. It’s possible to prepare serum samples according to the lab manual and then send all the serum samples at -80°C on dry ice to HOP in one shipment at the end of treatment. If it’s not possible to keep samples at -80°C on your site, send the peripheral blood in serum tube at RT within 24 hours to HOP each time you did sampling. [↑](#footnote-ref-10)
11. According to the PAX tubes processing (PreAnalytix, Qiagen/BD company), it is recommended to store the PAX collected samples (BM or PB) upright at room temperature (18−25˚C) for a min of 2 hours to max 72 hours before transferring them in the freezer at −80˚C. For that reason, keep the PAX tubes upright at room temperature (18−25˚C) for a minimum of 2 hours and then send them at +4°C to the Biology Reference Laboratories with the BM- or PB-EDTA samples. [↑](#footnote-ref-11)
12. It’s possible to prepare serum samples according to the lab manual and then send all the serum samples at -80°C on dry ice to HOP in one shipment at the end of treatment. If it’s not possible to keep samples at -80°C on your site, send the peripheral blood in serum tube at RT within 24 hours to HOP each time you did sampling. [↑](#footnote-ref-12)