ISRCTN No: ISRCTN61145589

LABORATORY MANUAL

MRC SUPREMO (BIG2-04)

TRANS-SUPREMO & CARDIAC SUB-STUDIES

ISRCTN61145589

Version 4, 02/03/2011









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CONTACT INFORMATION

ISRCTN No: ISRCTN61145589

TRANS-SUPREMO

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TELEPHONE

Laboratory Office: +44 (0) 131-777-3570 John Bartlett: +44 (0) 131-777-3584

FAX

+44 (0) 131-777-3520

BNP SAMPLES

Endocrine Cancer Group, Edinburgh Cancer Research Centre, Western General Hospital, Crewe Road South, Edinburgh, EH4 2XR UK

When contacting, please include the following information:

- Your name, email address and telephone number
- Your centre details including centre name/ID number
- Patient trial number (if applicable)







INTRODUCTION

ISRCTN No: ISRCTN61145589

TRIAL SUMMARY

MRC-SUPREMO is a MRC randomised phase III trial assessing the role of chest wall irradiation in women with intermediate risk of breast cancer following mastectomy, axillary surgery and appropriate systemic therapy. Patients will be randomly allocated to either receive chest wall irradiation or allocated to a control group.

The study will recruit 1600 patients

CARDIAC SUB-STUDY SUMMARY

Recent studies of radiation toxicity in the treatment of breast cancer show that the effects on normal tissues can constitute a significant problem and particularly increased cardiac mortality may offset any potential survival benefit. There are no data on lesser degrees of late cardiac damage, but it seems likely that non fatal ischaemic heart disease may also be induced. An excess of cardiac deaths starts to manifest itself at about 7 years post radiotherapy and increase year on year thereafter. Thus, reported values are dependent on length of follow-up. The cardiac sub-study will use proteomic analysis of circulating markers to identify patients with cardiac damage. Additional studies relating to the detection of markers of relapse or proteomic markers of outcome will also be performed.

A 30 ml blood sample will be taken from all patients who consent, at baseline, following chemotherapy, following radiotherapy, 1, 5 and 10 years, and at disease recurrence (local and/or distant relapse)

TRANSLATIONAL SCIENCE SUB-STUDY SUMMARY

Within the context of the SUPREMO trial there exists a unique opportunity to expand our knowledge of the molecular mechanisms underlying the relapse of breast cancer and resistance to radiation therapy.

Standard prognostic factors do not define the 60-80% of patients in whom radiotherapy might be safely omitted. The aim of the present study is to identify molecular signatures and validate methods by which such patients can be identified in the clinic using the SUPREMO trial as a test system.

A 25ml blood sample will be taken from all patients who consent, at baseline and at disease recurrence (local and/or distant relapse)

Tissue blocks will be requested, following randomisation, from pathology departments. Blocks will be used for the extraction of small diameter cores of tissue for the production of tissue micro-arrays and will be returned after processing has been completed.

This manual contains general information about sample handling procedures as well as the storage and shipping of specimens and the use of the relevant forms.

PLEASE READ THIS LABORATORY MANUAL CAREFULLY TO ENSURE PROPER HANDLING OF THE SPECIMENS THANK YOU







GENERAL INSTRUCTIONS

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Patients can be approached for inclusion to Trans-Supremo and/or the Cardiac substudies. A separate consent **must** be obtained for participation in these sub-studies.

Patient tissue samples will also be used for the pathology audit as per the main trial protocol. A separate consent is **not** required for this as the patient has given consent to take part in the main trial. This consent covers any auditing that may be undertaken during the trial, under which the Pathology Audit is covered.

For the purposes of this laboratory manual it is assumed that a patient consenting to the Cardiac sub-study will also consent to the Trans-Supremo sub-study, however, please ensure the correct procedures are followed depending on the consent given:

Consent Given For:	Relevant pages in document
Cardiac and Trans-Supremo sub-studies	6-14
Cardiac sub-study only	6-14 for BNP sample only
Trans-Supremo only	16-22
Trans-Supremo for tissue donation only	24

No additional consent required	Relevant pages in document
Pathology Audit (part of the main trial)	27





INSTRUCTIONS

FOR BLOOD SAMPLE

PROCESSING

FOR THE

CARDIAC SUB-STUDY

(& TRANS-SUPREMO)







SUPPLIES FOR THE CARDIAC SUB-STUDY

Each site will be supplied with kits containing the following items;

Laboratory Requisition Form (1 x NCR)

Tubes and coloured caps for processed specimens (5 x green) plus labels and sample bag for freezing



ISRCTN No: ISRCTN61145589

Pasteur pipettes (x 2, including 1 spare)



Rigid, protective container, packaging and stamped addressed jiffy envelope for <u>immediate</u> dispatch of BNP sample



Blood sample flow chart for Cardiac sub-study– see page 9

When you have **2 blood sample kits remaining**, please **photocopy** the Blood Sample Kit Request Form (Appendix 1), **complete** and **fax** to Endocrine Cancer Group, Edinburgh, UK (+44 (0) 131 777 3520).

5 kits will be despatched immediately. Please do not email requests to the clinical trials office as this may result in a delay in the kits being sent to you.

The following equipment is required but not provided;

- Venepuncture kit
- Plain tube with separator gel; 10 ml (SST Vacutainer or S-Monovette Serum or equivalent)
- EDTA tubes; 4 x 5 ml or equivalent
- Centrifuge
- Freezer; -80°C (or if not available, -20°C)







USE OF LABORATORY REQUISITION FORMS

Please complete a Laboratory Requisition Form, in **black ball-point pen**, for each blood sample taken, i.e. at first visit and at subsequent follow-up visits, including disease recurrence (local and/or distant relapse)

Appendix 2 shows an example of the "Laboratory Requisition Form".

Please note that to ensure unique identification by the data matrix label system to be applied by the central laboratory no copying or combined use of the form is allowed!

Please write the numbers and letters clearly and provide complete and accurate information.

Fill in a Laboratory Requisition Form with the following information:

- 1. Patient 7 digit trial number = 3 digit centre number and 4 digit trial number, e.g. B07 999X
- 2. Patient's initials = 3 letters; first-middle-last, if only 2 leave middle blank
- 3. Patient's date of birth = DD/ M/M YY e.g. 09/05/65
- 4. Sample information = whether first visit; second visit; 5 year follow-up, etc. If recording details of local or distant recurrence please include details of the site of recurrence below.
- 5. Date of sampling = DD/MM/YY e.g. 23/02/04)
- 6. Time of sampling = HH:MM e.g. 14:45 NB USE 24 HOUR CLOCK
- 7. Time sample centrifuged = HH:MM e.g. 15:15 NB USE 24 HOUR CLOCK
- 8. Time of freezing = HH:MM e.g. 16:30 NB USE 24 HOUR CLOCK
- 9. Sign and date the 'Informed Consent Checked' box to indicate to the laboratory staff that the patient has given informed consent to participate in the biological sub-study this section is to be completed by the person filling out the form, *not* the patient.

Please do not include copies of the consent form with the sample as the central laboratory must not receive any paperwork with the patient's full name

Please note that the Laboratory Requisition Form is supplied in a "No Carbon Required" (NCR) format.

The **top copy (white)** is to be put into the pocket in the **FROZEN sample** bag and placed in the freezer at -80°C (or -20°C, if not available). This is to be despatched on request with the sample to the Endocrine Cancer Group, Edinburgh.

The **second copy (yellow)** is to be put into the pocket of the **BNP sample** bag and **DESPATCHED IMMEDIATELY** using the stamped addressed jiffy envelope provided. Samples should be sent to the Endocrine Cancer Group.

The bottom copy (blue) is to be retained for your records.

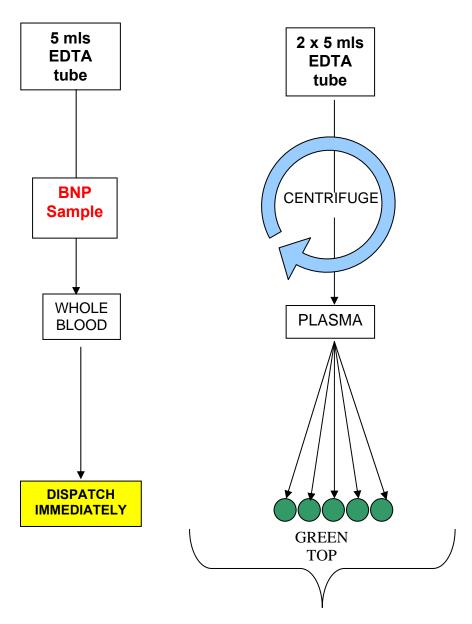


NCRN



BLOOD SAMPLE FLOW CHART: CARDIAC SUB-STUDY

A 15 ml blood sample should be taken at the following time points: first visit (baseline), following chemotherapy, following radiotherapy, 1, 5 and 10 years and at disease recurrence, (local and/or distant relapse). The samples should be processed as follows:-



PIPETTE 0.8 - 1ml INTO EACH TUBE APPLY AN ADHESIVE LABEL (PROVIDED) TO EACH TUBE PLACE USED AND UNUSED TUBES IN BAG PROVIDED PLACE LAB REQUISITION FORM INTO SLEEVE FREEZE AT -80°C (OR -20°C, IF NOT AVAILABLE)

Endocrine Cancer Group: email transsupremo@ed.ac.uk or tel +44 (0) 131 777 3570 Cancer Clinical Trials Team: email nss.isdsupremo@nhs.net or tel +44 (0) 131 275 7058







BLOOD SAMPLE INSTRUCTIONS: CARDIAC SUB-STUDY

The samples need to be separated within 1 hour of sampling and frozen immediately after processing (up to a maximum of 30 minutes).

- A 15ml blood sample to be taken at baseline (first visit), following chemotherapy, following radiotherapy, 1, 5 and 10 years and at disease recurrence, (local and/or distant relapse) - Collect 15 ml of blood in 3 x 5 ml plastic EDTA tubes.
- Complete the 5 small labels provided with the patient trial number, patient initials and the date these will be used to label the small cryovials.
- Complete Laboratory Requisition Form as described on page 8.

BNP SAMPLING:

- Using a ballpoint or marker pen label one of the 5 ml plastic EDTA tubes with the patient trial number, initials and DOB. Put the tube into the rigid container provided. Make sure this container is closed properly and place into the plastic bag with the absorbent pad.
- Place this sample, with the yellow copy of the Laboratory Requisition Form, into the stamped, addressed jiffy bag provided and despatch immediately.
 This sample must arrive within 48 hours. (This packaging complies with Royal Mail postal regulations).

PLASMA SAMPLING:

Centrifuge 2 of the EDTA tubes at 1300g (approximately 2,500 rpm) for 15 minutes. Using the pipette provided, transfer 0.8 ml of plasma into each of the 5 green-topped cryovials*. Take care not to disturb the cells with the pipette. Apply small labels.

(* If insufficient sample is obtained, please indicate on the Laboratory Requisition Form the number of cryovials containing samples.)

- Put the filled and any empty, unused cryovials into the small zip topped sample bag provided.
- Fold and place top copy (white) into the pocket in the rear of the sample bag.
- The **bottom copy (blue)** of the Laboratory Requisition Form Is to be **retained** for your own records
- Place the samples into the freezer at -80°C (-20°C is acceptable for up to 6 months if you do not have access to a -80°C freezer)
- Larger centres will be contacted once per year to arrange collection of frozen samples by courier; however centres that are recruiting faster or those with a







-20°C freezer are encouraged to contact us sooner if the available storage space is filling up.

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- Smaller centres should contact us directly to arrange a courier collection when they have collected 5 or more patient samples (i.e. 5 or more packs of 15 tubes).
- All transport packaging and dry ice will be provided.
- On arrival at the central laboratory the frozen samples will be stored at -80°C until analysis.

SAMPLING PRIORITIES

- We appreciate that it can sometimes be difficult to collect several blood samples from cancer patients. If this is the case please prioritise the blood samples as follows:
 - 1. BNP whole blood (5 ml EDTA)
 - 2. Plasma (2 x 5 ml EDTA)
- For each of the individual sample types please put 0.8 ml into each of the cryovials provided. If not enough sample is obtained, it is better to put a larger volume into fewer cryovials than to put a smaller volume in more cryovials i.e. put 0.8 ml into 2 cryovials rather than 0.3 ml into 5 cryovials.
- Complete the form with the number of samples filled in the appropriate boxes
- Place all filled and unfilled tubes into the sample bag.





COURIER COLLECTIONS OF FROZEN SAMPLES

Centres will be contacted by the Endocrine Cancer Group to arrange collection of the frozen samples by courier.

If samples need to be collected before this time then please contact Tammy Piper or John Bartlett (tel: +44 (0) 131 777 3570 or email transsupremo@ed.ac.uk) to arrange collection. Please do not contact the Clinical Trials Team as this may result in a delay in processing your request.

Please be aware that sample collections will not be arranged for Thursdays or Fridays as samples cannot be delivered to the Endocrine Cancer Group, Edinburgh over the weekend.

In order to arrange the courier collections please provide the laboratory with the following information:

- How many samples need to be collected
- The name and direct telephone number of the main contact at the centre to liaise with the courier company
- The exact address of where the samples are to be collected from.

The courier company (Davies International) will liaise with the centre directly to arrange uplift of samples.

The following procedure will be used:

- A large polystyrene box will be delivered containing a bag of dry ice and a copy of the instructions to be followed.
- The polystyrene box lid will be taped shut, cut the tape and remove the lid.
- Remove the bag of dry ice from the box.
- Place all the frozen samples into the Bio Bag provided, in their sealed specimen bags, and add sufficient absorbent material (cotton wool or tissue paper, etc) to absorb all potential leakage were the samples to thaw.
- Exclude as much air as possible from the Bio Bag before sealing to make it as compact as possible
- Use some of the dry ice to line the bottom of the polystyrene box, place the Bio Bag on top and then cover with the rest of the dry ice. Replace the lid and seal with tape.
- Close the velcro flaps, swap the address labels in the plastic pocket so the address in Edinburgh is visible and leave the box for collection by the courier from the previously agreed location.
- Contact the courier as soon as the samples are ready for collection Tel: 01869 250350.
- Please note that dry ice should not be handled without gloves.





ALTERNATIVE BNP SAMPLE PROTOCOL (Friday Clinics)

The blood sample taken for BNP analysis must be despatched in the padded envelope provided **immediately** to ensure it arrives at the laboratory within 48 hours. However, please **do not** post samples on a Friday as samples will not be delivered to the laboratory over the weekend.

This protocol has been designed for those centres which routinely hold clinics on Fridays. If your centre holds clinics between Monday and Thursday you should continue to follow the procedures on pages 9-12.

Centres must inform the Endocrine Cancer Group that they run clinics on a Friday to ensure we provide you the additional supplies required to perform the alternative sampling procedures. Centres should also inform the Clinical Trials Team.

ALTERNATIVE BNP PROCEDURE

- Instead of despatching the BNP sample immediately in the post please complete the following steps:
- Centrifuge the 5ml EDTA tube (whole blood BNP sample) at 1300g (approximately 2,500 rpm) for 15 minutes. Using the pipette provided, transfer 0.8 ml of plasma into each of the 5 non-coloured cryovials. Take care not to disturb the cells with the pipette. Apply small labels.
- Freeze the 5 x non-coloured BNP sample tubes over the weekend (-20°C is suitable for this)
- On the following Monday morning, remove the 5 x non-coloured cryovials from the freezer and place into the rigid container provided. Make sure this container is closed properly and place into the plastic bag with the absorbent pad. Place the samples, with the **yellow copy** of the Laboratory Requisition Form, into the stamped, addressed jiffy bag provided and despatch. (This packaging complies with Royal Mail postal regulations).
- The sample will defrost in the post ready to be processed on arrival at the laboratory. It is **not** necessary to ship these samples on dry-ice.
- If you would like further information or have any questions regarding this procedure please contact Tammy Piper: +44 (0) 131 777 3570, or email: transsupremo@ed.ac.uk).

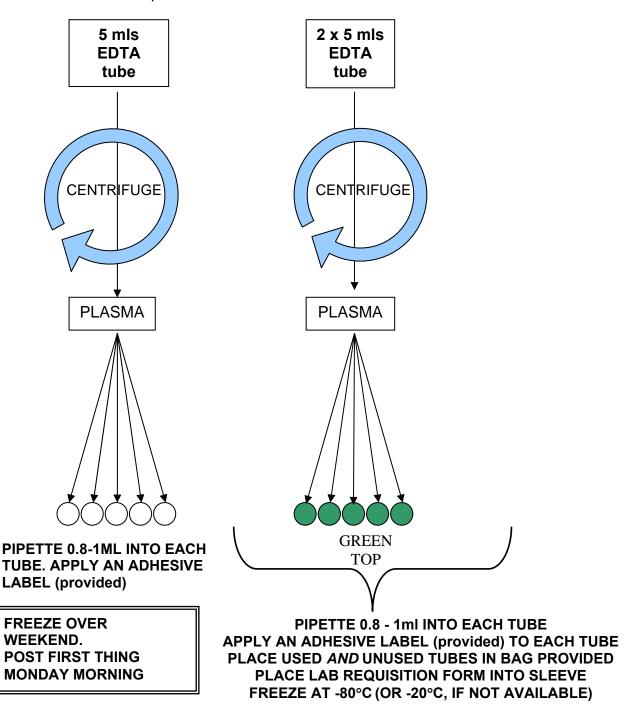




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ALTERNATIVE BNP SAMPLE FLOW CHART: CARDIAC STUDY

A 15ml blood sample should be taken and handled as follows:-



Endocrine Cancer Group: email transsupremo@ed.ac.uk or tel +44 (0) 131 777 3570 Cancer Clinical Trials Team: email nss.isdsupremo@nhs.net or tel +44 (0) 131 275 7058





NOTES





INSTRUCTIONS FOR BLOOD SAMPLE PROCESSING FOR

TRANS-SUPREMO





SUPPLIES FOR TRANS-SUPREMO

Each site will be supplied with kits containing the following items:

Laboratory Requisition Form (1 x NCR)



Tubes and coloured caps for processed specimens (5 x green; 5 x red; 5 x blue) plus labels and sample bag for freezing



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Pasteur pipettes (x 4, including 1 spare)



Blood sample flow chart for Trans-Supremo – see page 19

When you have **2 blood sample kits remaining**, please **photocopy** the Blood Sample Kit Request Form (Appendix 1), **complete** and **fax** to Endocrine Cancer Group, Edinburgh, UK (+44 (0) 131 777 3520).

5 kits will be despatched immediately. <u>Please do not email requests to the clinical trials office as this may result in a delay in the kits being sent to you.</u>

The following equipment is required but not provided:

- Venepuncture kit
- Plain tube with separator gel; 10 ml (SST Vacutainer or S-Monovette Serum or equivalent)
- EDTA tubes; 3 x 5 ml or equivalent
- Centrifuge
- Freezer; -80°C (or if not available, -20°C)





USE OF LABORATORY REQUISITION FORMS

Please complete a Laboratory Requisition Form, in **black ball-point pen**, for each blood sample taken, i.e. at first visit and at disease recurrence (local and/or distant relapse).

Appendix 2 shows an example of the "Laboratory Requisition Form".

Please note that to ensure unique identification by the data matrix label system to be applied by the laboratory no copying or combined use of the form is allowed!

Please write the numbers and letters clearly and provide complete and accurate information.

Fill in a Laboratory Requisition Form with the following information:

- 1. Patient 7 digit trial number = 3 digit centre number and 4 digit trial number, e.g. B07 999X
- 2. Patient's initials = 3 letters; first-middle-last, if only 2 leave middle blank
- 3. Patient's date of birth = DD/MM/YY e.g. 09/05/65
- 4. Sample information = whether first visit or recurrence. If recording details of local or distant recurrence please include details of the site of recurrence.
- 5. Date of sampling = DD/MM/YY e.g. 23/02/04)
- 6. Time of sampling = HH:MM e.g. 14:45 **NB USE 24 HOUR CLOCK**
- 7. Time sample centrifuged = HH:MM e.g. 15:15 **NB USE 24 HOUR CLOCK**
- 8. Time of freezing = HH:MM e.g. 16:30 NB USE 24 HOUR CLOCK
- 9. Sign and date the 'Informed Consent Checked' box to indicate to the laboratory staff that the patient has given informed consent to participate in the biological sub-study this section is to be completed by the person filling out the form, *not* the patient.

Please do not include copies of the consent form with the sample as the central laboratory must not receive any paperwork with the patient's full name

Please note that the Laboratory Requisition Form is supplied in a "No Carbon Required" (NCR) format.

The **top copy (white)** is to be put into the pocket in the **FROZEN sample** bag and placed in the freezer at -80°C (or -20°C, if not available). This is to be despatched on request with the sample to the Endocrine Cancer Group, Edinburgh.

The **bottom copy** (**blue**) is to be **retained** for your records.

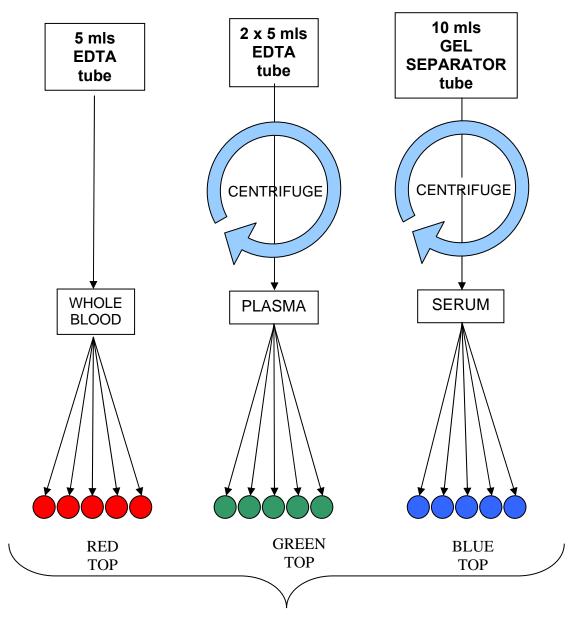
The **second copy (yellow)** is an additional copy and can be sent with the samples or retained for your records.





BLOOD SAMPLE FLOW CHART: TRANS-SUPREMO

A 25 ml blood sample should be taken at the following time points: first visit (baseline) and at disease recurrence (local and/or distant relapse). The samples should be processed as follows:-



PIPETTE 0.8 - 1ml INTO EACH TUBE
APPLY AN ADHESIVE LABEL (provided) TO EACH TUBE
PLACE USED AND UNUSED TUBES IN BAG PROVIDED
PLACE LAB REQUISITION FORM INTO SLEEVE
FREEZE AT -80°C (OR -20°C, IF NOT AVAILABLE)

Endocrine Cancer Group: email transsupremo@ed.ac.uk or tel +44 (0) 131 777 3585 Cancer Clinical Trials Team: email nss.isdsupremo@nhs.net or tel +44 (0) 131 275 7058





BLOOD SAMPLE INSTRUCTIONS: TRANS-SUPREMO

The samples need to be separated within 1 hour and frozen immediately after processing (up to a maximum of 30 minutes).

- A 25 ml blood sample to be taken at baseline (first visit) and at disease recurrence, (local and/or distant relapse) - Collect 10 ml of blood in a plain tube with separator gel and 15 ml of blood in 3 x 5 ml plastic EDTA tubes.
- Complete the 15 small labels provided with the patient trial number, patient initials and the date – these will be used to label the small cryovials.
- Complete Laboratory Requisition Form as described on page 8.

WHOLE BLOOD SAMPLING:

- Do not centrifuge one of the EDTA tubes (whole blood sample).
- Using the pipette provided, transfer 0.8 ml of whole blood into each of the 5 red-topped cryovials* and apply small labels.

PLASMA SAMPLING:

- Centrifuge the 2 remaining EDTA tubes at 1300g (approximately 2,500 rpm) for 15 minutes.
- Using the pipette provided, transfer 0.8 ml of plasma into each of the 5 green-topped cryovials*. Take care not to disturb the cells with the pipette. Apply small labels.

SERUM SAMPLING:

- Allow blood in the plain tube with gel separator to clot for 30 minutes at room temperature. Centrifuge at 1300g (approximately 2,500 rpm) for 15 minutes.
- Using the pipette provided, transfer **0.8 ml** of **serum** from the gel separator tube into each of the **5 blue-topped** cryovials* and apply small labels.

(* If insufficient sample is obtained, please indicate on the Laboratory Requisition Form the number of cryovials containing samples.)

- Put the filled and any empty, unused cryovials into the small zip topped sample bag provided.
- Fold and place top copy (white) into the pocket in the rear of the sample bag.
- The bottom copy (blue) of the Laboratory Requisition Form is to be retained for your own records.
- The second copy (yellow) is an additional copy and can be sent with the samples or retained for your records.
- Place samples into your freezer at -80°C (-20°C acceptable for up to 6 months if you do not have access to -80°C).







 Larger centres will be contacted once per year to arrange collection of frozen samples by courier; however centres that are recruiting faster or those with a -20°C freezer are encouraged to contact us sooner if the available storage space is filling up.

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- Smaller centres should contact us directly to arrange a courier collection when they have collected 5 or more patient samples (i.e. 5 or more packs of 15 tubes).
- All transport packaging and dry ice will be provided.
- On arrival at the central laboratory the frozen samples will be stored at -80°C until analysis.

SAMPLING PRIORITIES

- We appreciate that it can sometimes be difficult to collect several blood samples from cancer patients. If this is the case please prioritise the blood samples as follows:
 - 1. Serum (10 ml gel separator)
 - 2. Plasma (2 x 5 ml EDTA)
 - 3. Whole blood (1 x 5 ml EDTA)
- For each of the individual sample types please put 0.8 ml into each of the cryovials provided. If not enough sample is obtained, it is better to put a larger volume into fewer cryovials than to put a smaller volume in more cryovials i.e. put 0.8 ml into 2 cryovials rather than 0.3 ml into 5 cryovials.
- Complete the form with the number of samples filled in the appropriate boxes
- Place all filled and unfilled tubes into the sample bag.





COURIER COLLECTIONS OF FROZEN SAMPLES

Centres will be contacted by the Endocrine Cancer Group to arrange collection of the frozen samples by courier.

If samples need to be collected before this time then please contact Tammy Piper or John Bartlett (tel: +44 (0) 131 777 3570 or email transsupremo@ed.ac.uk) to arrange collection. Please **do not** contact the Clinical Trials Team as this may result in a delay in processing your request.

Please be aware that sample collections will not be arranged for Thursdays or Fridays as samples cannot be delivered to the Endocrine Cancer Group, Edinburgh over the weekend.

In order to arrange the courier collections please provide the laboratory with the following information:

- How many samples need to be collected
- The name and direct telephone number of the main contact at the centre to liaise with the courier company
- The exact address of where the samples are to be collected from.

The courier company (Davies International) will liaise with the centre directly to arrange uplift of samples.

The following procedure will be used:

- A large polystyrene box will be delivered containing a bag of dry ice and a copy of the instructions to be followed.
- The polystyrene box lid will be taped shut, cut the tape and remove the lid.
- Remove the bag of dry ice from the box.
- Place all the frozen samples into the Bio Bag provided, in their sealed specimen bags, and add sufficient absorbent material (cotton wool or tissue paper, etc) to absorb all potential leakage were the samples to thaw.
- Exclude as much air as possible from the Bio Bag before sealing to make it as compact as possible
- Use some of the dry ice to line the bottom of the polystyrene box, place the Bio Bag on top and then cover with the rest of the dry ice. Replace the lid and seal with tape.
- Close the velcro flaps, swap the address labels in the plastic pocket so the address in Edinburgh is visible and leave the box for collection by the courier from the previously agreed location.
- Contact the courier as soon as the samples are ready for collection Tel: 01869 250350.
- Please note that dry ice should not be handled without gloves.





NOTES





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INSTRUCTIONS

FOR

TISSUE BLOCK

PROCESSING

FOR

TRANS-SUPREMO





INSTRUCTIONS FOR TISSUE BLOCK PROCESSING

 Written consent is required from patients who wish to donate tissue for research.

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- Tissue blocks will be requested for all patients who consent to the Trans-Supremo sub-study, at baseline and again at times of local and/or distant recurrence or at first diagnosis of contra-lateral breast cancer, if available.
- Small 0.6 mm cores will be extracted from the blocks for tissue micro-array construction.
- Patient randomisation confirmation details and a lab kit will be supplied for each block requested consisting of;
 - Pathology Request Form (Appendix 3)
 - Small sample bag
 - o Addressed, padded envelope
- Complete the Pathology Request Form with all the information indicated.
- Please note that to ensure unique identification by the data matrix label system to be applied by the laboratory no copying or combined use of the form is allowed!
- Sign and date, 'Informed Consent Checked' box to indicate to the laboratory staff that the patient has given informed consent for their tissue to be used for the biological sub-study – this section is to be completed by the person filling out the form, not the patient.
 - Please do not include copies of the consent form with the sample as the central laboratory must not receive any paperwork with the patient's full name
- After completion of the Pathology Request form, please fold and place top copy (white) into the pocket in the rear of the sample bag. The bottom copy (blue) is to be retained for your records.
- Please send <u>one</u> representative tumour block from the mastectomy or wide local excision for each patient. Please do not send needle or core biopsies.
- Return the block and form in the addressed, padded envelope...
- Blocks will be stored in a secure facility and all data will be held in a confidential manner. Blocks will be returned to the source pathology department upon completion of processing. Should you require the block back sooner, then please contact Tammy Piper and the block will be returned within 48 hours where possible.

If you experience any difficulties or have any questions, please contact the Endocrine Cancer Group.





NOTES





INSTRUCTIONS FOR THE PATHOLOGY AUDIT





INSTRUCTIONS FOR THE PATHOLOGY AUDIT

 All patients who have consented to the main MRC Supremo trial will have a tissue block requested for participation in the quality assurance pathology audit.

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 A separate consent is not required as the audit is part of the main trial which the patient has already consented to.

Note 1: Blocks sent for Trans-Supremo patients are automatically included in the pathology audit so a separate request for these samples will not be made.

- A kit will be supplied for each block requested consisting of;
 - Pathology Request Form (Appendix 4) clearly labelled with 'PATHOLOGY AUDIT'
 - Small sample bag
 - Addressed, padded envelope
- Complete the Pathology Request Form with all the information indicated.
 - The 'Informed Consent Checked' box will be scored through as separate consent is not required for the pathology audit. Please do not write anything in this box – this is used solely to indicate consent given for Trans-Supremo
- After completion of the Pathology Request form, please fold and place top copy (white) into the pocket in the rear of the sample bag. The bottom copy (blue) is to be retained for your records.
- Please send <u>one</u> representative tumour block for each patient
- Return the block and form in the addressed, padded envelope.
- Blocks will be stored in a secure facility and all data will be held in a confidential manner.
- Sections will be taken from the tissue block and stained with haematoxylin and eosin at the central laboratory using standardised methods. These slides will be circulated to 3 trial pathologists for blinded review. They will assess the type of tumour, grade and presence of lymphovascular invasion.

<u>Note 2:</u> These blocks will be returned to the department of origin as soon as the pathology audit has been performed and the results have been received for the sample.





ALTERNATIVE INSTRUCTIONS FOR THE PATHOLOGY AUDIT

- If the pathology department refuses to send blocks for the audit we will accept two H&E slides they have prepared locally.
- If you experience any difficulties or need any advice please contact the Endocrine Cancer Group





NOTES





Appendix 1

BLOOD SAMPLE KIT REQUEST FAX

TO ORDER 5 KITS:

When you have **2 blood sample kits remaining**, please photocopy this form, complete and fax to:-

	FAO: Ta	ammy Piper, John Bart	lett	
	Fax no:	+44 (0) 131 777 3520		
(PI	LEASE PR	INT DETAILS)		
Со	ntact name)	Date	
Εm	nail addres	S		
Се	entre numb	er		
Но	spital			
Ad	dress			
	For Labo	ratory Use: - Kits despatche	ed	
	Commen	S		
	Signature		Date	

If you experience any difficulties or have any questions, please contact the Endocrine Cancer Group by emailing transsupremo@ed.ac.uk; or telephoning +44 (0) 131 777 3570.





Appendix 2

Affix Data matrix label (barcode)

ISRCTN No: ISRCTN61145589

LABORATORY REQUISITION FORM (EXAMPLE)

		(===)
PATIENT TRIAL NUMBER		Informed Consent (Trans- Supremo) checked: Name
PATIENT INITIALS		Sign
(First:Middle:Last)		Date
PATIENT DATE OF BIRTH (DD/MM/YY)		
SAMPLE INFORMATION (Please tick $\sqrt{}$)	/ D.T.	Doct Co. the
First visit (screening) Post ch	nemo/prek i	Post K o)the apy
1 yr visit 5 yr visit 10 yr visit		Site
DATE OF SAMPLING (DD/MM/YY)		
TIME SAMPLE TAKEN (HH:MM)		N° of 0.8ml samples stored:- SERUM
TIME CENTRIFUC (HH:MM)		PLASMA
TIME SAMP' CB ZEN (HH:MM)		WHOLE BLOOD
	NAME OF STUD	DY NURSE / TECHNICIAN:
White copy with frozen samples	(Capital letters)	
Yellow copy with BNP sample		
Blue copy to file	Sign	Date End©crin
NCRN		Enavirin



Affix Data matrix label (barcode)

ISRCTN No: ISRCTN61145589

Appendix 3 PATHOLOGY REQUEST FORM (EXAMPLE)

FAO: Research nurse (Name)	Informed Consent (Trans- Supremo) checked: Name	
Pathologist (Name)	Sign	
Centre ID	Date	
Please forward paraffin block(s) relating to the patient below, to the Endocrine Cancer Group, Edinburgh. Blocks must be from the surgical resection and not core biopsies.		
PATIENT TRIAL NUMBER		
PATIENT INITIALS (First:Middle:Last)		
PATIENT DATE OF BIRTH (DD/MM/YY)		
Full Pathology number (invasive primary tumour)		
Block despatched to Endocrine Cancer Group Pathology Number:	UK .	
Type of sample/origin:		
Primary Local relapse Dist relapse	Contralateral breast cancer	
Comments:		
Name of person complete (Capital letters)		
Signature	Date	
Block returned to athology Dept:-	White copy with block	
Signature Date	Blue copy to file	
T T	Cunter 1911	



Appendix 4

PATHOLOGY AUDIT

PATHOLOGY REQUEST FORM (EXAMPLE)

FAO: Research nurse (Name)	Informed Consent (Trans Supremo) checked: Name
Pathologist (Name)	— Sign
Centre Name/ ID	Date
Please forward one representative paraffin embedded tu patient below, to the Endocrine Cancer Group, Edinburgh. surgical resection and NOT core/needle biopsies.	
PATIENT TRIAL NUMBER	
PATIENT INITIALS (First:Middle:Last)	
PATIENT DATE OF BIRTH (DD/MM/YY)	
Full Pathology number (invasive primary tumour)	
Block despatched to Endocrine Cancer Go, Edn urgh UK Pathology Number:	
Type of sample/origin:	
Primary Local relapse C	Contralateral breast cancer
Comments:	
Name of person complete form: (Capital letters)	
Signature	ate
Block returned to Pathology Dept:-	White copy with block / slides
Signature Date	Blue copy to file