


1. PATIENT INFORMATION

Patient Last Name

Patient First Name

Lifelabs:

Place Accession sticker here

 - -
 F M

Date of Birth (DD-MM-YY)

Biological Sex

Patient Email

Patient Telephone

Patient Address/City/Postal Code

I understand the purposes, benefits and limitations of the Signatera residual disease test. I have had the opportunity to ask my healthcare provider about this test, including reliability of test results, risks, and alternatives prior to giving my informed consent. I acknowledge that LifeLabs will send the results to my ordering clinician and other health care providers involved in my care as requested. I understand that I must sign this consent form if I want testing performed, and that LifeLabs will retain a copy of this form in accordance with standard operational requirements. I acknowledge that my sample(s) and personal health information will be sent to LifeLabs in Ontario, and Natera in the USA, for the Signatera residual disease test.

Canada

Country

Patient Signature

Date (DD-MM-YY)

2. ORDERING CLINICIAN

Clinic or Organization

Provider Billing Number

Ordering Clinician

Natera® LIMS ID

Clinic Telephone

Clinic Fax

Clinic Email

Clinic Address

City

Province

Postal Code

Country

Clinician Signature

Date (DD-MM-YY)

Canada
 I hereby authorize the pathology laboratory listed below to release the patient's FFPE tissue to Natera and LifeLabs.

3. BILLING INFORMATION
PAYMENT CONFIRMED

Order ID

 Enter under AL628 (ON) OR A8972 (BC)

 Enter under AU433 (ON) OR A7210 (BC)

 Enter under PP – No payment required at PSC

 Bill to Natera (no payment required at PSC)

Prior Approval Number

Patient Health Card Number

4. SIGNATERA™ TEST ORDERING
Lifelabs' internal use only (test codes & mnemonics)

ON	BC
3351 Two 10mL Streck tubes PLUS One 6mL EDTA	SIG Two 10mL Streck tubes PLUS One 6mL EDTA
3348 Two 10mL Streck tubes	SIGSUB Two 10mL Streck tubes

**** Blood MUST be shipped at 6-37°C, immediately upon draw ****
NOTE: See Section 5 for Tissue Sample requirements
FOR HOSPITAL-DRAWN BLOOD ONLY: Send both initial and subsequent test blood samples via FedEx to: Lifelabs Genetics | 175 Galaxy Blvd., Suite 105 | Toronto, ON M9W 0C9 Use FedEx account 725287097

5. CLINICAL INFORMATION (Initial Order Only)
 Most recent progress/clinical note attached
 (Clinical note should be in English)

***Please note that at this time, Signatera can only be performed on solid tumour cancers.**
Cancer type to be tested: Colorectal Breast Lung Bladder Melanoma Other _____ Site _____ Subtype _____
 Stage: I II III IV Other _____ Status: Metastatic Recurrence/Relapse

Indication for testing:
 (select one)

 Residual disease monitoring
 Adjuvant: Post op treatment selection Immunotherapy – drug name Other
 Surveillance for recurrence Neoadjuvant

6. PATHOLOGY (Initial Order Only. MUST be completed by oncologist office at time of initial order.)
Sample Requirements: FFPE tissue is the required specimens along with INITIAL TEST (Blood) (3351/SIG)
INITIAL TEST Tissue Requirements: FFPE Tissue (LL TC 3349) Requires 6-10, 7-10 micron unstained slides (or comparable amount of tissue) OR a tissue block. Both require a contiguous H&E slide

Send tissue samples to: Lifelabs Genetics: 175 Galaxy Blvd., Suite 105 | Toronto, ON M9W 0C9

Questions? 1-844-363-4357, press 0 • FedEx account 725287097

All FFPE tissue block specimens will be returned to sending pathology lab via Lifelabs Genetics.

 Pathology report attached
 _____ - _____ - _____
 Tissue Collection Date (DD-MM-YY)

 Accession # / Block ID #
Please provide most abundant malignant tissue

Pathologist's Name/Contact

Pathology Department Name

Address

City

Province

Postal Code

Email

Telephone

Fax

7. DISPOSITION OR RETENTION OF SAMPLES

Laboratory (Reseller) represents and confirms that the patient has given informed consent in compliance with applicable law to Natera's following sample disposition or retention policy: PATIENT UNDERSTANDS AND CONSENTS THAT: (i) her/his sample will be sent to the United States for performance of the test; (ii) Natera may retain the patient's leftover, de-identified samples to use for medical and technology advancement, research & development, product validation and quality assurance, independently or in collaboration with third-party partners, either in or outside the United States; and (iii) patient and patient's heirs will not receive any payments, benefits, or rights to any resulting products or discoveries.

For more information about tissue requirements, please visit here:
www.natera.com/tissueguidelines

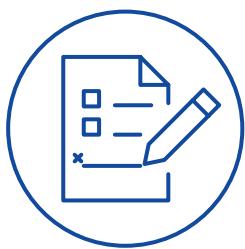

SCAN ME

Ordering Guide

AUTHORIZED DISTRIBUTOR



Signatera™
Residual disease test (MRD)



Step 1

Complete your requisition

Complete Part 1 of the requisition (above) including your signature and date. Ask your physician to complete Part 2-5.

Your physician will need to provide their information (part 2) each time you order either test. Please ensure that both you and your physician have signed the requisition form and keep a copy of the completed form.

For the Initial Test, your physician must select **Initial Test** in Part 3 of the requisition form, and they must complete Part 5 (Pathology lab information).

For the Subsequent Test, your physician must select **Subsequent Test** in Part 3 of the requisition form. Part 5 can be left blank (for Initial Test only).



Step 2

Purchase Signatera™

(Choose either the *Initial Test* OR *Subsequent Test*, not both).

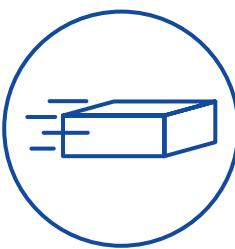
ON Residents: [Click here](#)

BC Residents: [Click here](#)

Rest of Canada

Contact our Genetics Helpline:
1-844-363-4357

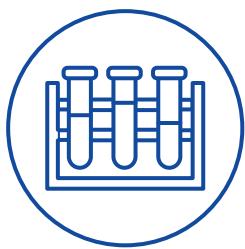
Online orders (ON and BC) will be emailed a partially completed requisition containing the full EC number as proof of payment. **Please bring this to your blood sample collection appointment in Step 4.**



Step 3

Receive your Signatera™ blood kit

Lifelabs will contact you within one (1) business day to arrange shipment of Signatera™ kit to your preferred mailing address. You will need to verify your purchase and that your requisition form has been completed and signed by you and your physician.



Step 4

Blood sample collection

Get your blood sample collected at either a LifeLabs Patient Service Centre (ON/BC) or a local sample collection site.

If done at LifeLabs, please [book an appointment](#) at your convenience.

Bring the following to your appointment:

1. Signed requisition form from Step 1
2. Partially completed requisition form containing the full EC number from Step 2 (ON & BC Only)
3. Signatera™ kit from Step 3



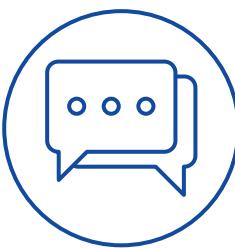
Step 5

Obtain results

Results from the Initial Test will be sent to your physician 4-6 weeks after the testing lab has received both tissue and blood kits.

Results from the Subsequent Test will be sent to your physician 7-10 days after the testing lab has received the blood kit.

Consult your physician to discuss results.



For any questions or concerns, contact our **Genetics Helpline** at **1-844-363-4357**