



Sender Address:

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Date:

Pathology Material for IBCSG Trial 27-02 / BIG 1-02

Patient initials
 Randomization number
 Born on
 Operated on
 Center code and Center name

The protocol requires submission of the following:

- 1 copy of the pathology report from the primary tumor
- 1 copy of the pathology report from the recurrent tumor
- 1 completely filled in pathology-form (Form P)
- 1 copy of the completely filled in hormone receptor form

Primary Tumor Slide Pathology Number..... Block Pathology Number.....	Recurrent Tumor Slide Pathology Number..... Block Pathology Number.....
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Although the blocks and slides are not to be submitted immediately, please do prepare the material and store it in your laboratory until IBCSG needs it, or if you prefer send it to us now.

For clear tracking, please **fill in above the exact pathology numbers that you use for identification in your laboratory**. It is also extremely important the pathology report, pathology form, and all slides and blocks are marked with the IBCSG randomization number.

Do you need to have the provided paraffin blocks returned after central review? **yes** **no**

If the above is marked 'yes', how long (years from now) will you store the blocks in your files? _____ **years**

Are you willing to let IBCSG have the material after the maximal storing time at your laboratory? **yes** **no**

Thank you very much for sending the documentation to this address:

IBCSG Central Pathology Office
 European Institute of Oncology, EIO
 Division of Pathology
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 20141 Milano, Italy