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Date:

Pathology Material for IBCSG Trial 30-04/ MA 27

Patient initials:.....
Randomization number:
Born on:.....
Operated on :
Pathology number:
Center code and Center name:

The protocol requires submission of the following:

- 1 paraffin block of the primary tumor
- copies of all pathology reports concerning the primary tumor
- Form: NCIC CTG Pathology Submission Report(PATH) . The form can be downloaded from the IBCSG website (password needed): www.ibcsg.org/restrict/trials/open/30-04/docs/Ma27PathSubForm-2005MAR09.pdf

Primary Tumor

Block Pathology Number.....

For the provided material, please **fill in above the exact pathology number that you use for identification in your laboratory**. It is also extremely important the pathology report, pathology Submission report form, and block are marked with the IBCSG randomization number.

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

IBCSG Central Pathology Office
European Institute of Oncology, EIO
Division of Pathology
Via Ripamonti 435
20141 Milano, Italy