





KiTZ Clinical Trial Unit (ZIPO)

Co-Director: Prof. Dr. Stefan

Hematology, Immunology and Pulmonology (Director: Prof. Dr. A. Kulozik, PhD)

University Medical Center for Children and Adolescents

Department of Pediatric Oncology,

and Brain Tumors Director: Prof. Dr. Olaf Witt

Pfister

То Hopp Children's Cancer Center at NCT Heidelberg (KiTZ) KiTZ Clinical Trial Unit (ZIPO) and Brain Tumors University Medical Center for Children and Adolescents Sabine Brokmeier Im Neuenheimer Feld 430 D-69120 Heidelberg Germany

Request form PTT2.0

D.C.			Version 180514
Patient: Name:	First Name:	DOB:	D. F. C.
Diagnosis (current episod	le): _		Pediatric Targeted Therapy
Localization of tumor (cur	rent episode): _		
Provided material: Number of FFPE blocks:	diagnosis: localisation:	ID-number(s):	KiTZ Clinical Trial Unit (ZIPO) Clinical Cooperation Unit Pediatric Oncology Prof. Dr. O. Witt, PD Dr. T. Milde, Dr. F. Selt, Dr. C. van Tilburg, Dr. J. Ecker, S. Brokmeier Tel: +49 6221 56 35082 Email: sabine.brokmeier@med.uni-heidelberg.de
Please always include (- FFPE-block with corresp - 1x HE-stained slide of th - 3ml EDTA blood - Signed informed conser - recent medical report	oonding pathology ne FFPE block nt form for PTT2.0	report	Pediatric Neurooncology Prof. Dr. S. Pfister, Dr. D. Jones, PD Dr. H. Witt Dept. of Neuropathology Prof. Dr. A. v. Deimling, PD Dr. F. Sahm, Prof. Dr. A. Korshunov,
Please indicate where to		(stamp / address of treating physician)	Hopp Children's Cancer Center at the NCT Heidelberg (KiTZ) Heidelberg University Hospital & German Cancer Research Center (DKFZ) Heidelberg
Please indicate where to	o send the invoic	<u>e:</u>	
Please indicate where to send remaining material after the analyses are completed:			
(stamp / address of inquiring institution)			
The signee confirms that the information brochure "Information_GDPR " was received by and explained to the custodians of the patient.			
Datum / Lir	ntarechrift.	1	

_ Telefonnummer: _