

Follow the general instructions below to prepare for bone marrow sample collection.

Pre-Collection:

- 1. Clearly identify the patient.
- 2. Label slide, tubes, and containers with 2 patient identifiers.
 - 2.1. Acceptable patient identifiers: patient's full name, date of birth, medical record number.
- 3. Assemble collection material and tubes.
- 4. Standard bone marrow collection:
 - 4.1. Initial non-heparinized syringe: 0.5 to 1 mL of bone marrow aspirate
 - 4.2. 2 lavender top (EDTA) tubes: 2-3mL each for molecular testing
 - 4.3. 2 green top (sodium heparin) tubes: 3mL each for flow cytometry/chromosome/FISH studies
 - 4.4. 1-2 containers filled with B-plus fixative
 - 4.5. 1 conical tube filled with RPMI for fresh biopsy if dry tap (optional at hospital sites).
 - 4.6. 1 non-additive red top tube: 0.5 mL of non-heparinized aspirate for clot
 - 4.7. 10 clean glass slides on work surface for collection. Have extra slides available for use if needed.
 - 4.7.1. ≈7 slides (bone marrow aspirate smears) and ≈3 slides (biopsy touch preps)
- 5. MRD (minimal residual disease testing):
 - 5.1. Collect an additional 1-2 mL of bone marrow aspirate as the first aspirate in sodium heparin or EDTA tube
 - 5.2. Continue collection as stated in 3.
- 6. Engraftment (chimerism) studies:
 - 6.1. Collect standard bone marrow collection and
 - 6.2. 2 mL of additional bone marrow aspirate in lavender top (EDTA) per cell type ordered.
- 7. Paperwork/tubes/containers must include biopsy site location (i.e. right iliac crest) & collection time.

Peripheral blood smears made from venipuncture specimen:

- 1. Collect 3mL peripheral blood sample via venipuncture into an EDTA.
- 2. Make 2 direct smears manually, adjusting as necessary for proper length and thickness.
- 3. Smears can be made by the processing site if the sample arrives within 16 hours of collection.

Collection: Follow steps below to obtain bone marrow core biopsy, clot, and aspirate specimens:

- 1. Syringes used for bone marrow slides, MRD testing, clot should not be rinsed with heparin.
 - 1.1. **Do not exceed 2mL** as this dilutes specimen and reduces quality of the specimen.
- 2. All other syringes can be pre-rinsed with liquid heparin to prevent clotting.
- 3. Expel some of the non-heparinized aspirate on a slide and check for spicules.
 - 3.1. If adequate spicules are present, continue.
 - 3.2. If the sample is inadequate, request redirect of needle for better spicule sample.
 - 3.3. Due to therapy or disease, some samples may not have good spicules.
 - 3.3.1. An additional core biopsy can be placed in RPMI for additional studies when aspirate is inadequate
- 4. Make slides immediately for the aspirate collected using non-heparinized syringe.
 - 4.1. Tip the slide so excess fluid drains away from spicules.
 - 4.2. Prepare slides evenly without crush artifact, of correct length and thickness.
 - 4.3. If slides are not prepared during collection, place aspirate syringe contents into EDTA tube.

Geisinger BONE MARROW REQUISITION

100 N. Academy Avenue	1000 E. Mountain Blvd	Patient Information (Please Print)	
Danville, PA 17822	Wilkes-Barre, PA 18711	Last First	
(800) 695-6491	(800) 695-6491	NameName	M.I.
Myra Wilkerson, M.D.	Michelle Pramick, M.D.		
Laboratory CLIA Director	Laboratory CLIA Director	Address	
Requesting Location			
-			
Location Code			
Requesting Provider		DOB: Male Female	Unknown
Diagnosis Code(s)			
1		MRN: Ordering Provider:	
2			
3		Collector:	
3.		- Conector .	
	Day Data	Special Instructions: All specimens to arrive within stability limits or sp	ecial courier needed
Coll. Date:	Rcv Date:	opecial instructions. An specimens to arrive within stability limits or sp	ecial courier freeded.
Coll. Time:	Rec Time:		
Tech Code:			
DATIENT HISTORY			
PATIENT HISTORY			
-			
History of Bone Marrow	Transplant: No	Allogenic Auto	
	y:No Medication	s	
History of Chemotherap			
	s must be labelled with 2 identifiers		
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