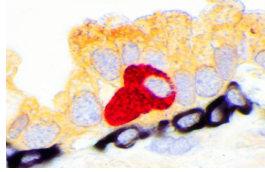


**Pathology Laboratories Berlin**  
**Specialized in Prostate Pathology**

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**Pathology Orders for:**

Patient Name	Date	Specimen (biopsy or RP)
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**Patient Contact Information:**

Last Name	First Name	Birth date	Spouse's Name	Telephone	Fax	
Email address	Street Address		Suite/Apt	City or Province	State	Zip code

The following prognostic and predictive markers should be performed, if applicable. Please check off.

Immunostain Study	Requested: <input checked="" type="checkbox"/>	Patient Results	Favorable Result Definition
AMACR			High expression (2+, 3+)
AR			Homogeneous expression (1+, 2+)
AZGP1			High expression (2+, 3+)
Basal cell markers			No intraductal spread
BCL-2			Negative (0%)
ChromograninA (CGA)			Negative
COX-2			Low expression ( $\leq 1+$ )
D2-40/ CD34			No lympho- vascular invasion
Disseminated tumor cells			No evidence of occult metastases
DNA Ploidy			Diploid
FAS			Low expression ( $\leq 1+$ )
HER1 (EGF-R)			< 10%
HER2/neu			< 10%
HSP-27			Negative
MIB-1			< 10%, better <5%
MUC-1			Negative (0%)
PAP/ PSA			High expression (2+, 3+)

<b>p27</b>			<b>&gt;45%</b>
<b>p53</b>			<b>Negative (0%) up to &lt;20%</b>
<b>Somatostatin- R</b>			<b>Positive</b>
<b>Thymosin beta-15</b>			<b>≤1+</b>

<b>Patient Signature</b>	<b>Date</b>