MAYO CLINIC LABORATORIES

Test Definition: GCTF

Germ Cell Tumor (GCT), Isochromosome 12p, FISH, Tissue

Overview

Useful For

Supporting the diagnosis of germ cell tumors when used conjunction with an anatomic pathology consultation

Reflex Tests

Test Id	Reporting Name	Available Separately	Always Performed
_I099	Interphases, 25-99	No, (Bill Only)	No
_I300	Interphases, >=100	No, (Bill Only)	No
_IL25	Interphases, <25	No, (Bill Only)	No
_PADD	Probe, +1	No, (Bill Only)	No
_PB02	Probe, +2	No, (Bill Only)	No
_PB03	Probe, +3	No, (Bill Only)	No
_PBCT	Probe, +2	No, (Bill Only)	No

Testing Algorithm

This test includes a charge for the probe application, analysis, and professional interpretation of results for one probe set (2 individual fluorescence in situ hybridization probes). No analysis charges will be incurred if an insufficient number of representative cells are available for analysis.

Appropriate ancillary probes may be performed at consultant discretion to render comprehensive assessment. Any additional probes will have the results included within the final report and will be performed at an additional charge.

Method Name

Fluorescence In Situ Hybridization (FISH)

NY State Available

Yes

Specimen

Specimen Type

Tissue

Ordering Guidance

This test does not include a pathology consultation. If a pathology consultation is requested, order PATHC / Pathology Consultation, and appropriate testing will be added at the discretion of the pathologist and performed at an additional charge.

Multiple oncology (cancer) gene panels are also available. For more information see Hematology and Oncology Test Selection Guide.

Shipping Instructions

Advise Express Mail or equivalent if not on courier service.

Necessary Information

1. A pathology report is required for testing to be performed. If not provided, appropriate testing and/or interpretation may be compromised or delayed. Acceptable pathology reports include working drafts, preliminary pathology, or surgical pathology reports.

2. The following information must be included in the report provided.

-Patient name

-Block number - **must be on all blocks, slides, and paperwork**

-Date of collection

-Tissue source

3. A reason for testing must be provided. If this information is not provided, an appropriate indication for testing may be entered by Mayo Clinic Laboratories.

Specimen Required

Submit only 1 of the following specimens:

Preferred:

Specimen Type: Tissue block (fresh tissue is **not acceptable**)

Collection Instructions:

1. Submit a formalin-fixed, paraffin-embedded tumor tissue block.
2. Blocks prepared with alternative fixation methods (eg, Prefer, Bouin's) will be attempted but are less favorable for successful results. Provide fixation method used.

Additional Information:

1. Paraffin-embedded specimens can be from any anatomic location (skin, soft tissue, lymph node, etc).
2. Decalcified paraffin-embedded specimens will have testing attempted; however, the success rate is approximately 50%. **Testing may be canceled** if sufficient tumor tissue is not present.
3. **Submitted fresh tissue specimens will be canceled upon receipt**. If only fresh tissue is available, embed in paraffin prior to sending.

Acceptable:

Specimen Type: Tissue slides

Slides: 1 Hematoxylin and eosin-stained and 4 unstained

Collection Instructions: Submit 1 slide stained with hematoxylin and eosin

Additional Information: Broken or cracked unstained slides will be rejected. Stained slides that were broken and repaired (ie, double mounted) at the client site will not be rejected, as, in most cases, they can still be reviewed under the microscope. However, due to the double mounting, digital scanning cannot be performed.

Forms

If not ordering electronically, complete, print, and send an Oncology Test Request (T729) with the specimen.

Specimen Minimum Volume

Slides: 1 Hematoxylin and eosin stained and 2 unstained

Reject Due To

Broken or cracked unstained slides	Reject
Broken or cracked stained slides that cannot be repaired	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Tissue	Ambient (preferred)		
	Refrigerated		

Clinical & Interpretive

Clinical Information

Germ cell tumors (GCT) comprise a heterogeneous group of solid neoplasms that arise in midline locations including the gonads, retroperitoneum, mediastinum, and central nervous system. GCT are categorized based upon their histologic differentiation and can be separated into 2 classes. Seminomatous GCT include seminoma of the testis, dysgerminoma of the ovaries, and germinoma of the brain. Nonseminomatous GCT include yolk sac tumor, embryonal carcinoma, choriocarcinoma, immature teratoma, and mixed forms. Due to the wide spectrum of histologic features observed in these tumors, distinction from non-GCT can be difficult. GCT are often very responsive to chemotherapy and have a better outcome relative to histologically similar malignancies. Thus, distinguishing GCT from non-GCT is critical to providing the appropriate treatment for the patient. Gain of the short arm of chromosome 12, most commonly as an isochromosome 12p [i(12p)], is a highly nonrandom chromosomal marker seen in a significant percentage of GCT. While i(12p) is not 100% specific for GCT, the literature indicates it has diagnostic and possible therapeutic relevance for patients with these tumors. Testing of i(12p) should be concomitant with histologic evaluation, and positive results may support the diagnosis of GCT.

Reference Values

An interpretive report will be provided.

Interpretation

Testing will be clinically interpreted as positive, negative, or equivocal.

A neoplastic clone is detected when the percent of cells with an abnormality exceeds the normal cutoff for the isochromosome 12p fluorescence in situ hybridization probe set.

A positive result is consistent with an isochromosome 12p. The significance of this finding is dependent on the clinical and pathologic features.

A negative result suggests an isochromosome 12p is not present but does not exclude the diagnosis of germ cell tumors.

Cautions

This test is not approved by the US Food and Drug Administration and it is best used as an adjunct to existing clinical and pathologic information.

This fluorescence in situ hybridization (FISH) assay does not rule out other chromosome abnormalities.

Fixatives other than formalin (eg, Prefer, Bouin's) may not be successful for FISH assays. Non-formalin fixed specimens will not be rejected.

Paraffin-embedded tissues that have been decalcified may not be successful for FISH analysis. The success rate of FISH studies on decalcified tissue is approximately 50%, but FISH will be attempted if sufficient tumor is present for analysis.

Fluorescence in situ hybridization studies will be attempted if sufficient tumor is present for analysis. The pathologist reviewing the hematoxylin and eosin-stained slide may find it necessary to cancel testing if insufficient tissue/tumor is available for testing.

If no FISH signals are observed post-hybridization, the case will be released indicating a lack of FISH results.

Broken or cracked unstained slides are not compatible with the instrumentation used in our performing laboratories and will be rejected. Additional material may be requested.

Attempts will be made to repair broken or cracked stained slides; however, if they are unable to be repaired (ie, shattered in transit), they will be rejected and discarded due to safety concerns.

Clinical Reference

1. Wehle D, Yonescu R, Long PP, Gala N, Epstein J, Griffin CA. Fluorescence in situ hybridization of 12p in germ cell tumors using a bacterial artificial chromosome clone 12p probe on paraffin-embedded tissue: clinical test validation. Cancer Genet Cytogenet. 2008;183(2):99-104
2. Poulos C, Cheng L, Zhang S, Gersell DJ, Ulbright TM. Analysis of ovarian teratomas for isochromosome 12p: evidence supporting a dual histogenetic pathway for teratomatous elements. Mod Pathol. 2006;19(6):766-771
3. Chaganti RS, Houldsworth J. Genetics and biology of adult human male germ cell tumors. Cancer Res. 2000;60(6):1475-1482
4. Freitag CE, Sukov WR, Bryce AH, et al. Assessment of isochromosome 12p and 12p abnormalities in germ cell tumors using fluorescence in situ hybridization, single-nucleotide polymorphism arrays, and next-generation sequencing/mate-pair sequencing. Hum Pathol. 2021;112:20-34

Performance

Method Description
This test is performed using a commercially available chromosome 12 centromere probe (D12Z3) and a laboratory-developed probe targeted to 12p11.21. Formalin-fixed, paraffin-embedded tissues are cut at 5 microns and mounted on positively charged glass slides. The selection of tissue and the identification of target areas on the hematoxylin and eosin (H and E)-stained slide are performed by a pathologist. Using the H and E-stained slide as a reference, target areas are etched with a diamond-tipped engraving tool on the back of the unstained slide to be assayed. The probe set is hybridized to the appropriate target areas, and 2 technologists independently analyze 50 interphase nuclei (100 total) with the results expressed as the percent of abnormal nuclei.(Unpublished Mayo method)

PDF Report
No

Day(s) Performed
Monday through Friday

Report Available
7 to 10 days

Specimen Retention Time
Slides and hematoxylin and eosin used for analysis are retained by the laboratory in accordance with regulatory requirements. Client provided paraffin blocks and extra unstained slides (if provided) will be returned after testing is complete.

Performing Laboratory Location
Mayo Clinic Laboratories - Rochester Main Campus

Fees & Codes

Fees
- Authorized users can sign in to Test Prices for detailed fee information.
- Clients without access to Test Prices can contact Customer Service 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact Customer Service.

Test Classification
This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

CPT Code Information
88271x2, 88291-DNA probe, each (first probe set), Interpretation and report
88271x2-DNA probe, each; each additional probe set (if appropriate)

88271x1-DNA probe, each; coverage for sets containing 3 probes (if appropriate)
88271x2-DNA probe, each; coverage for sets containing 4 probes (if appropriate)
88271x3-DNA probe, each; coverage for sets containing 5 probes (if appropriate)
88274 w/modifier 52-Interphase in situ hybridization, <25 cells, each probe set (if appropriate)
88274-Interphase in situ hybridization, 25 to 99 cells, each probe set (if appropriate)

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
GCTF	i(12p), Germ Cell Tumor, FISH, Ts	In Process

Result ID	Test Result Name	Result LOINC® Value
52051	Result Summary	50397-9
52053	Interpretation	69965-2
52052	Result	62356-1
CG726	Reason For Referral	42349-1
CG725	Specimen	31208-2
52054	Source	31208-2
52055	Tissue ID	80398-1
52056	Method	85069-3
54571	Additional Information	48767-8
52057	Released By	18771-6
53844	Disclaimer	62364-5