

Overview

Useful For

Aiding in subtyping intraductal papillary mucinous neoplasms (IPMN).

Testing Algorithm

[For the initial technical component only immunohistochemical \(IHC\) stain performed, the appropriate bill-only test ID will be reflexed and charged \(IHTOI\). For each additional technical component only IHC stain performed, an additional bill-only test ID will be reflexed and charged \(IHTOA\).](#)

Reflex Tests

Test Id	Reporting Name	Available Separately	Always Performed
IHTOA	IHC Additional, Tech Only	No	No
IHTOI	IHC Initial, Tech Only	No	No

Method Name

Immunohistochemistry (IHC)

NY State Available

Yes

Specimen

Specimen Type

TECHONLY

Ordering Guidance

This test includes only technical performance of the stain (no pathologist interpretation is performed). If diagnostic consultation by a pathologist is required, order PATHC / Pathology Consultation.

Shipping Instructions

Attach the green pathology address label and the pink Immunostains Technical Only label included in the kit to the outside of the transport container.

Specimen Required

Supplies: Immunostain Technical Only Envelope (T693)

Specimen Type: Tissue

Container/Tube: Immunostains Technical Only Envelope

Preferred: 2 Unstained positively charged glass slide (25- x 75- x 1-mm) per test ordered; sections 4-microns thick.

Acceptable: Formalin-fixed, paraffin-embedded (FFPE) tissue block

Digital Image Access

1. Information on accessing digital images of immunohistochemical (IHC) stains and the manual requisition form can be accessed through this website: www.mayocliniclabs.com/test-info/ihc/index.html

2. Clients ordering stains using a manual requisition form will not have access to digital images.
3. Clients wishing to access digital images must place the order for IHC stains electronically. Information regarding digital imaging can be accessed through this website: www.mayocliniclabs.com/test-info/ihc/faq.html

Forms

If not ordering electronically, complete, print, and send an [Immunohistochemical \(IHC\)/In Situ Hybridization \(ISH\) Stains Request](#) (T763) with the specimen.

Reject Due To

- Wet/frozen tissue Reject
- Cytology smears
- Nonformalin fixed tissue
- Nonparaffin embedded tissue
- Noncharged slides
- ProbeOn slides

Specimen Stability Information

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

Clinical & Interpretive

Clinical Information

Mucin 2 (MUC2) is a 520 kDa glycoprotein belonging to the family of secretory mucins. MUC2 is expressed in the cytoplasm of goblet cells. An immunopanel consisting of MUC1, MUC2, MUC5AC, and MUC6 is useful in subtyping intraductal papillary mucinous neoplasms (IPMN).

Interpretation

This test does not include pathologist interpretation, only technical performance of the stain. If interpretation is required, order PATHC / Pathology Consultation for a full diagnostic evaluation or second opinion of the case. The positive and negative controls are verified as showing appropriate immunoreactivity. If a control tissue is not included on the slide, a scanned image of the relevant quality control tissue is available upon request, call 855-516-8404. Interpretation of this test should be performed in the context of the patient's clinical history and other diagnostic tests by a qualified pathologist.

Cautions

Age of a cut paraffin section can affect immunoreactivity. Stability thresholds vary widely among published literature and are antigen dependent. Best practice is for paraffin sections to be cut within 6 weeks.

Clinical Reference

1. Lau S, Weiss L, Chu P: Differential expression of MUC1, MUC2, and MUC5AC in carcinomas of various sites. *Am J Clin Pathol.* 2004;122:61-69. doi: 10.1309/9R66-73QE-C06D-86Y4
2. Pezhouh M, Park J: Gastric pyloric gland adenoma. *Arch Pathol Lab Med.* 2015;139:823-826. doi: 10.5858/arpa.2013-0613-RS

3. Kwak H, Liu X, Allende D, Pai RK, Hart J, Xiao SY: Interobserver variability in intraductal papillary mucinous neoplasm subtypes and application of their mucin immunoprofiles. *Mod Pathol*. 2016;29:977-984. doi: 10.1038/modpathol.2016.93
4. Kim D, Shin N, Kim G, et al: Mucin expression in gastric cancer. Reappraisal of Its Clinicopathologic and Prognostic Significance. *Arch Pathol Lab Med*. 2013;137:1047-1053. doi.org/10.5858/arpa.2012-0193-OA
5. Castellano-Megias V, Ibarrola-de Andres C, Lopez-Alonso G, Colina-Ruizdelgado F: Pathological features and diagnosis of intraductal papillary mucinous neoplasm of the pancreas. *World J Gastrointest Oncol*. 2014;6(9):311-324. doi: 10.4251/wjgo.v6.i9.311
6. Horinouchi M, Nagata K, Nakamura A, et al: Expression of different glycoforms of membrane mucin (MUC1) and secretory mucin (MUC2, MUC5AC and MUC6) in pancreatic neoplasms. *Acta Histochem Cytochem*. 2003;36(5):443-453. doi:10.1267/ahc.36.443

Performance

Method Description

Immunohistochemistry on sections of paraffin-embedded tissue.(Cartun RW, Taylor CR, Dabbs DJ: Techniques of immunohistochemistry: Principles, pitfalls, and standardization. In: Dabbs DJ, ed. *Diagnostic Immunohistochemistry*. 5th ed. Elsevier; 2019:1-46)

PDF Report

No

Specimen Retention Time

Until staining is complete

Performing Laboratory Location

Rochester

Fees & Codes

Test Classification

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

88342-TC, primary

88341-TC, if additional IHC