
Overview

Useful For

Detection of human papillomavirus from low-risk genotypes (6, 11)

Method Name

In Situ Hybridization

NY State Available

Yes

Specimen

Specimen Type

Special

Shipping Instructions

Attach the green pathology address label included in the kit to the outside of the transport container.

Necessary Information

A pathology/diagnostic report and a brief history are required.

Specimen Required

Supplies: Pathology Packaging Kit (T554)

Specimen Type: Formalin-fixed, paraffin-embedded tissue block

Specimen Volume: Entire block

Specimen Type: Slides

Slides: 5 unstained glass, positively charged slides with 5 (+ or - 1) microns formalin-fixed, paraffin-embedded tissue

Forms

If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:

[-Oncology Test Request \(T729\)](#)

[-Immunohistochemical \(IHC\)/In Situ Hybridization \(ISH\) Stains Request \(T763\)](#)

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
Special	Ambient (preferred)		
	Refrigerated		

Clinical & Interpretive**Clinical Information**

Human papillomavirus infections with low-risk genotypes (6, 11) can cause benign hyperplasia such as condylomas and papillomas.

Reference Values

[Results are reported as positive or negative for types 6 and 11.](#)

Interpretation

This test, when not accompanied by a pathology consultation request, will be answered as either positive or negative. If additional interpretation or analysis is needed, request PATHC / Pathology Consultation along with this test.

Cautions

Age of a cut paraffin section can affect staining quality. Stability thresholds vary widely among published literature. Best practice is for paraffin sections to be cut within 6 weeks.

Clinical Reference

1. Kelesidis T, Aish L, Steller MA, et al: Human papillomavirus (HPV) detection using in situ hybridization in histologic samples: correlations with cytologic changes and polymerase chain reaction HPV detection. Am J Clin Pathol. 2011 Jul;136(1):119-127. doi: 10.1309/AJCP03HUQYZMWATP
2. Lee WT, Tubbs RR, Teker AM, et al: Use of in situ hybridization to detect human papillomavirus in head and neck squamous cell carcinoma patients without a history of alcohol or tobacco use. Arch Pathol Lab Med. 2008 Oct;132(10):1653-1656. doi: 10.5858/2008-132-1653-UOISHT

3. Birner P, Bachtary B, Dreier B, et al: Signal-amplified colorimetric in situ hybridization for assessment of human papillomavirus infection in cervical lesions. Mod Pathol. 2001 Jul;14(7):702-709. doi: 10.1038/modpathol.3880375

Performance

Method Description

In situ hybridization on sections of paraffin-embedded tissue.(Unpublished Mayo method)

PDF Report

No

Specimen Retention Time

Until staining is complete.

Performing Laboratory Location

Rochester

Fees & Codes

Test Classification

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

CPT Code Information

88365-Primary

88364-If additional in situ hybridization

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
HPVLR	HPV Low-Risk ISH	In Process

Result ID	Reporting Name	LOINC®
71204	Interpretation	50595-8
71205	Participated in the Interpretation	No LOINC Needed

71206	Report electronically signed by	19139-5
71208	Material Received	81178-6
71595	Disclaimer	62364-5
72113	Case Number	80398-1