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**Reporting Title:** HER2, Misc. Tumor, FISH, Tissue**Performing Location** Rochester**Ordering Guidance:**

This test is only for primary or metastatic tumors other than breast, urothelial, or gastroesophageal.

-For breast tumors, order H2BR / *HER2* Amplification Associated with Breast Cancer, FISH, Tissue.

-For urothelial tumors, order H2UR / *HER2* Amplification Associated with Urothelial Carcinoma, FISH, Tissue.

-For gastroesophageal tumors, order H2GE / *HER2* Amplification Associated with Gastroesophageal Cancer, FISH, Tissue.

**Shipping Instructions:**

Advise Express Mail or equivalent if not on courier service.

**Necessary Information:**

1. **A pathology report is required in order for testing to be performed.** Acceptable pathology reports include working drafts, preliminary pathology or surgical pathology reports.

2. **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.

3. The pathology report must include type of fixation used as well as the time of fixation (recommended: >6 hours and <72 hours).

**Specimen Requirements:**

**Submit only 1 of the following specimens:**

**Specimen Type:** Tissue

**Preferred:** Tissue block

**Collection Instructions:** Submit a formalin-fixed, paraffin-embedded (FFPE) tumor tissue block. Blocks prepared with alternative fixation methods may be acceptable; provide fixation method used.

**Acceptable:** Slides

**Collection Instructions:** Four consecutive, unstained, 5 micron-thick sections placed on positively charged slides, and 1 hematoxylin and eosin-stained slide.

**Forms:**

If not ordering electronically, complete, print, and send a [Oncology Test Request](#) (T729) with the specimen.

Specimen Type	Temperature	Time	Special Container
Tissue	Ambient (preferred)	0 hours	
	Refrigerated	0 hours	

**Ask at Order Entry (AOE) Questions:**

Test ID	Question ID	Description	Type	Reportable
H2MT	GC032	Reason for Referral	Plain Text	Yes

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC
603096	Result Summary	Alphanumeric		50397-9
603097	Interpretation	Alphanumeric		69965-2
603098	Result	Alphanumeric		62356-1
GC032	Reason for Referral	Alphanumeric		42349-1
603099	Specimen	Alphanumeric		31208-2
603100	Source	Alphanumeric		85298-8
603101	Tissue ID	Alphanumeric		80398-1
603102	Fixative	Alphanumeric		8100-0
603103	Method	Alphanumeric		85069-3
603104	Additional Information	Alphanumeric		48767-8
603105	Disclaimer	Alphanumeric		62364-5
603106	Released By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

88377

**Reference Values:**

An interpretative report will be provided.