

Reporting Title: Chromosomes, Skin Biopsy

Performing Location: Mayo Clinic Laboratories - Rochester Main Campus

Shipping Instructions:

Advise Express Mail or equivalent if not on courier service.

Necessary Information:

Provide a reason for testing with each specimen. The laboratory will not reject testing if this information is not provided, but appropriate testing and interpretation may be compromised or delayed.

Specimen Requirements:

Specimen Type: Skin biopsy

Container/Tube: Sterile container with sterile RPMI transport media, Ringer's solution, or normal saline-RPMI transport media (T095-Petri dish is not needed for this test).

Specimen Volume: 4 mm diameter

Collection Instructions:

1. Wash biopsy site with an antiseptic soap.
2. Thoroughly rinse area with sterile water.
3. Do not use alcohol or iodine preparations.
4. A local anesthetic may be used.
5. Biopsy specimens are best taken by punch biopsy to include full thickness of dermis.

Forms:

New York Clients-Informed consent is required. Document on the request form or electronic order that a copy is on file.

The following documents are available:

[-Informed Consent for Genetic Testing \(T576\)](#)

[-Informed Consent for Genetic Testing-Spanish \(T826\)](#)

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

Ask at Order Entry (AOE) Questions:

| Test ID | Question ID | Description | Type | Reportable |
|---------|-------------|---------------------|------------|------------|
| CHRTI | CG768 | Reason for Referral | Plain Text | Yes |

Result Codes:

| Result ID | Reporting Name | Type | Unit | LOINC® |
|-----------|---------------------|--------------|------|---------|
| 52311 | Result Summary | Alphanumeric | | 50397-9 |
| 52313 | Interpretation | Alphanumeric | | 69965-2 |
| 52312 | Result | Alphanumeric | | 82939-0 |
| CG768 | Reason for Referral | Alphanumeric | | 42349-1 |

| | | | | |
|-------|------------------------|--------------|--|---------|
| 52314 | Specimen | Alphanumeric | | 31208-2 |
| 52315 | Source | Alphanumeric | | 31208-2 |
| 52317 | Method | Alphanumeric | | 85069-3 |
| 52316 | Banding Method | Alphanumeric | | 62359-5 |
| 54642 | Additional Information | Alphanumeric | | 48767-8 |
| 52318 | Released By | Alphanumeric | | 18771-6 |

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

- 88233, 88291- Tissue culture for skin/biopsy, Interpretation and report
- 88262 w/modifier 52-Chromosome analysis less than 15 cells(if appropriate)
- 88262-Chromosome analysis with 15 to 120 cells (if appropriate)
- 88262, 88285-Chromosome analysis with greater than 20 cells (if appropriate)
- 88280-Chromosome analysis, greater than 2 karyotypes (if appropriate)
- 88283-Additional specialized banding technique (if appropriate)

Reflex Tests:

| Test Id | Reporting Name | CPT Units | CPT Code | Always Performed | Available Separately |
|---------|-------------------|-----------|----------|------------------|----------------------|
| _M15A | Metaphases, 1-14 | 1 | 88262 | No | No, (Bill Only) |
| _M19 | Metaphases, 15-20 | 1 | 88262 | No | No, (Bill Only) |
| _MG19 | Metaphases, >20 | 1 | 88262 | No | No, (Bill Only) |
| _KTG2 | Karyotypes, >2 | 1 | 88280 | No | No, (Bill Only) |
| _STAC | Ag-Nor/CBL Stain | 1 | 88283 | No | No, (Bill Only) |

Reference Values:

An interpretative report will be provided.