

Test Definition: USPF

USP6 (17p13), Aneurysmal Bone Cyst and Nodular Fasciitis, FISH, Tissue

Reporting Title: USP6 (17p13), FISH, Ts

Performing Location: Mayo Clinic Laboratories - Rochester Main Campus

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.

Specimen Requirements:

Submit only 1 of the following specimens:

Specimen Type: Tissue **Preferred:** Tissue block

Container/Tube: Formalin-fixed, paraffin-embedded tumor tissue block

Collection Instructions: Blocks prepared with alternative fixation methods may be acceptable; provide fixation method

used

Acceptable: Slides

Specimen Volume: 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 an Oncology Test Request (T729) with the specimen.

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

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Туре	Reportable
USPF	CG952	Reason for Referral	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Туре	Unit	LOINC®
54705	Result Summary	Alphanumeric		50397-9
54708	Interpretation	Alphanumeric		69965-2
54707	Result	Alphanumeric		62356-1
54920	Specimen	Alphanumeric		31208-2
54710	Source	Alphanumeric		31208-2
54711	Tissue ID	Alphanumeric		80398-1



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54712	Released By	Alphanumeric	18771-6
55134	Method	Alphanumeric	85069-3
55135	Additional Information	Alphanumeric	48767-8
CG952	Reason for Referral	Alphanumeric	42349-1
53395	Disclaimer	Alphanumeric	62364-5

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

Supplemental Report:

No

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)

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
_PBCT	Probe, +2	1	88271	No	No, (Bill Only)
_PADD	Probe, +1	1	88271	No	No, (Bill Only)
_PB02	Probe, +2	1	88271	No	No, (Bill Only)
_PB03	Probe, +3	1	88271	No	No, (Bill Only)
_IL25	Interphases, <25	1	88274	No	No, (Bill Only)
_1099	Interphases, 25-99	1	88274	No	No, (Bill Only)
_1300	Interphases, >=100	1	88275	No	No, (Bill Only)

Reference Values:

An interpretive report will be provided.