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**Reporting Title:** MET (7q31), FISH, Ts**Performing Location:** Rochester**Ordering Guidance:**

This test does not include a pathology consultation. If a pathology consultation is requested, order PATHC / Pathology Consultation, and appropriate testing will be added at the discretion of the pathologist and performed at an additional charge.

Multiple oncology (cancer) gene panels are also available. For more information see [Hematology, Oncology, and Hereditary Test Selection Guide](#)

**Additional Testing Requirements:**

Confirmation testing by Microarray testing to resolve atypical fluorescence in situ hybridization results is available, order CMAPT / Chromosomal Microarray, Tumor, Formalin-Fixed Paraffin-Embedded

**Shipping Instructions:**

Advise Express Mail or equivalent if not on courier service.

**Necessary Information:**

**1. A pathology report is required for testing to be performed.** If not provided, appropriate testing and/or interpretation may be compromised or delayed. Acceptable pathology reports include working drafts, preliminary pathology, or surgical pathology reports.

**2. The following information must be included in the report provided.?**

1. Patient name
2. Block number - must be on all blocks, slides, and paperwork?
3. Date of collection
4. Tissue Source

**3. 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:**

**Preferred**

**Specimen Type:** Tissue block

**Collection Instructions:** Submit a formalin-fixed, paraffin-embedded tumor tissue block. Blocks prepared with alternative fixation methods will be attempted but are less favorable for successful results by FISH testing; provide fixation method used.

**Additional Information:**

1. Paraffin-embedded specimens can be from any anatomic location (skin, soft tissue, lymph node, etc).
2. Bone specimens that have been decalcified will be attempted for testing, but the success rate is approximately 50%.

**Acceptable?**

**Specimen Type:** Tissue slides

**Slides:** 1 Hematoxylin and eosin stained and 4 unstained

**Collection Instructions:** Submit 4 consecutive unstained, positively charged, unbaked slides with 5 micron-thick sections of the tumor tissue and 1 slide stained with hematoxylin and eosin.

**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         | Type       | Reportable |
|---------|-------------|---------------------|------------|------------|
| METF    | CG938       | Reason for Referral | Plain Text | Yes        |

Result Codes:

| Result ID | Reporting Name         | Type         | Unit | LOINC®  |
|-----------|------------------------|--------------|------|---------|
| 55203     | Result Summary         | Alphanumeric |      | 50397-9 |
| 55204     | Interpretation         | Alphanumeric |      | 69965-2 |
| 55206     | Result                 | Alphanumeric |      | 62356-1 |
| CG938     | Reason for Referral    | Alphanumeric |      | 42349-1 |
| 55207     | Specimen               | Alphanumeric |      | 31208-2 |
| 55208     | Source                 | Alphanumeric |      | 31208-2 |
| 55209     | Tissue ID              | Alphanumeric |      | 80398-1 |
| 55210     | Method                 | Alphanumeric |      | 85069-3 |
| 55211     | Additional Information | Alphanumeric |      | 48767-8 |
| 55212     | Disclaimer             | Alphanumeric |      | 62364-5 |
| 55224     | Released By            | Alphanumeric |      | 18771-6 |

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) |
| _I099 | Interphases, 25-99 | 1 | 88274 | No | No, (Bill Only) |
| _I300 | Interphases, >=100 | 1 | 88275 | No | No, (Bill Only) |

Reference Values:

An interpretive report will be provided.