



Test Definition: NUT1F

NUTM1 (15q14) Rearrangement, FISH, Tissue

Reporting Title: NUTM1 (15q14), FISH, Ts

Performing Location: Mayo Clinic Laboratories - Rochester Main Campus

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.

Specimen Requirements:

Submit only 1 of the following specimens:

Specimen Type: Tissue

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

Specimen Type: Slides

Specimen Volume: 4 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	Type	Reportable
NUT1F	CG997	Reason for Referral	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
92323	Result Summary	Alphanumeric		50397-9
92324	Interpretation	Alphanumeric		69965-2
92325	Result	Alphanumeric		62356-1
CG997	Reason For Referral	Alphanumeric		42349-1
92326	Specimen	Alphanumeric		31208-2
92327	Source	Alphanumeric		31208-2
92328	Tissue ID	Alphanumeric		80398-1

92329	Method	Alphanumeric		85069-3
92330	Additional Information	Alphanumeric		48767-8
92331	Disclaimer	Alphanumeric		62364-5
92339	Released By	Alphanumeric		18771-6

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

Supplemental Report:

No

CPT Code Information:

88271 x 2, 88291-DNA probe, each (first probe set), Interpretation and report

88271 x 2-DNA probe, each; each additional probe set (if appropriate)

88271 x 1-DNA probe, each; coverage for sets containing 3 probes (if appropriate)

88271 x 2-DNA probe, each; coverage for sets containing 4 probes (if appropriate)

88271 x 3-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)

88275-Interphase in situ hybridization, 100 to 300 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.