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**Reporting Title:** BCR/ABL1, p190, Quant, Monitor  
**Performing Location:** Rochester

**Ordering Guidance:**

This test should not be used to screen for *BCR/ABL1* fusions at the time of diagnosis; order either BADX / *BCR/ABL1*, Qualitative, Diagnostic Assay, Varies; or BCRFX / *BCR/ABL1* Qualitative Diagnostic Assay with Reflex to *BCR/ABL1* p190 Quantitative Assay or *BCR/ABL1* p210 Quantitative Assay, Varies should be ordered for that purpose.

To monitor patients carrying *BCR/ABL1* fusion forms coding for the p210 protein, which includes most patients with chronic myeloid leukemia (CML); order BCRA B / *BCR/ABL*, p210, mRNA Detection, Reverse Transcription-PCR (RT-PCR), Quantitative, Monitoring Chronic Myeloid Leukemia (CML), Varies.

**Shipping Instructions:**

Refrigerate specimens must arrive within 5 days (120 hours) of collection, and ambient specimens must arrive within 3 days (72 hours) of collection. Collect and package specimen as close to shipping time as possible.

**Necessary Information:**

Pertinent clinical history including if the patient has a diagnosis of chronic myeloid leukemia or other *BCR/ABL1*-positive neoplasm information is required.

**Specimen Requirements:**

Submit only 1 of the following specimens:

**Preferred:**

**Specimen Type:** Whole blood

**Container/Tube:**

**Preferred:** Lavender top (EDTA)

**Acceptable:** Yellow top (ACD)

**Specimen Volume:** 10 mL

**Collection Instructions:**

1. Invert several times to mix blood.
2. Send whole blood specimen in original tube. **Do not aliquot.**
3. Label specimen as blood.

**Specimen Type:** Bone marrow

**Container/Tube:**

**Preferred:** Lavender top (EDTA)

**Acceptable:** Yellow top (ACD)

**Specimen Volume:** 4 mL

**Collection Instructions:**

1. Invert several times to mix bone marrow.
2. Send bone marrow specimen in original tube. **Do not aliquot.**
3. Label specimen as bone marrow.

# Test Definition: BA190

BCR/ABL1, p190, mRNA Detection, Reverse  
Transcription-PCR (RT-PCR), Quantitative,  
Monitoring Assay, Varies

Forms:

- 1. [Hematopathology Patient Information](#) (T676)
- 2. If not ordering electronically, complete, print, and send a [Hematopathology/Cytogenetics Test Request](#) (T726) with the specimen.

Specimen Type	Temperature	Time	Special Container
Varies	Ambient	72 hours	PURPLE OR PINK TOP/EDTA
	Refrigerated (preferred)	5 days	PURPLE OR PINK TOP/EDTA

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
BA190	MP002	Specimen Type	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
MP002	Specimen Type	Alphanumeric		31208-2
19765	Interpretation	Alphanumeric		69047-9
39470	BCR/ABL1 p190 Result	Alphanumeric		No LOINC Needed

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

Supplemental Report:

Supplemental

CPT Code Information:

81207

Reference Values:

The presence or absence of the *BCR/ABL1* messenger RNA fusion form producing the p190 fusion protein is reported. If positive, the level is reported as the ratio of *BCR/ABL1* (p190) transcript to *ABL1* transcript in the form of a percentage.