

## Overview

### Useful For

Determining overexpression of HER2 protein on formalin-fixed, paraffin-embedded tissue sections in ductal carcinoma in situ or solid/intracystic papillary carcinoma breast tissue

This FDA-approved test is most frequently used to evaluate HER2 overexpression in breast cancer

### Method Name

Ventana Pathway Immunoperoxidase Stain with Manual Quantitative Immunohistochemistry

### NY State Available

Yes

## Specimen

### Specimen Type

Special

### Advisory Information

This test is only for ductal carcinoma in situ or solid/intracystic papillary carcinoma breast tissue. For gastroesophageal cancer, order HERGM / HER2, Gastric/Esophageal, Semi-Quantitative Immunohistochemistry, Manual or HERGN / HER2, Gastric/Esophageal, Semi-Quantitative Immunohistochemistry, Manual, No Reflex.

### Shipping Instructions

Attach the green pathology address label included in the kit to the outside of the transport container.

### Necessary Information

**Include accompanying pathology report stating the final diagnosis.**

### Specimen Required

**Supplies:** Pathology Packaging Kit (T554)

### Specimen Type:

**Preferred:** A paraffin-embedded tissue block containing breast cancer tissue that has been fixed in 10% neutral buffered formalin within 1 hour from surgical collection time and for a total of 6 to 72 hours and shipped at ambient temperature

**Acceptable:** 2 unstained sections, containing breast carcinoma, on charged slides cut at 4 microns less than 1 month ago and shipped at ambient temperature. Tissue on the slides should have been fixed in 10% neutral buffered formalin within 1 hour from surgical collection time and for a total of 6 to 72 hours.

**Submission Container/Tube:** Pathology Packaging Kit (T554)

**Collection Instructions:** Submit paraffin-embedded tissue block from ductal carcinoma in situ or solid/intracystic papillary carcinoma breast carcinoma tissue.

**Additional Information:** Paraffin blocks will be returned with final report.

## Forms

If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:

[-Oncology Test Request \(T729\)](#)

[-Immunohistochemical \(IHC\)/In Situ Hybridization \(ISH\) Stains Request \(T763\)](#)

## Specimen Minimum Volume

Entire block

## Reject Due To

No specimen should be rejected.

## Specimen Stability Information

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

## Clinical and Interpretive

### Clinical Information

The *HER2* (official gene name *ERBB2*) proto-oncogene encodes a membrane receptor with tyrosine kinase activity and homology to the epidermal growth factor receptor.

Amplification and overexpression of the *HER2* gene in human breast, endometrial, ovarian, and other epithelial cancers have been associated with a shorter disease-free interval and shorter overall survival. Overexpression of HER2 protein is an indication for Herceptin therapy in patients with breast cancer.

### Reference Values

Reported as negative (0, 1+), equivocal (2+), and strongly positive (3+) according to the interpretation guidelines for the FDA-approved Ventana Pathway HER2 (4B5) antibody.

### Interpretation

Results are reported as negative (0, 1+), equivocal (2+), and strongly positive (3+) according to the interpretation guidelines for the FDA-approved Ventana Pathway HER2 (4B5) antibody.

### Cautions

The performance and quality of immunohistochemical stains in formalin-fixed, paraffin-embedded tissue depends critically on proper fixation.

### Clinical Reference

1. Riber-Hansen R, Vainer B, Steiniche T: Digital image analysis: a review of reproducibility, stability and basic requirements for optimal results. *Apmis* 2012 April;120(4):276-289

2. Gavrielides MA, Gallas BD, Lenz P, et al: Observer variability in the interpretation of HER2/neu

immunohistochemical expression with unaided and computer-aided digital microscopy. Arch Pathol Lab Med Feb;135(2):233-242

3. Cuadros M, Villegas R: Systematic review of HER2 breast cancer testing. Appl Immunohistochem Mol Morphol Jan 2009;17(1):1-7

4. Nassar A, Cohen C, Agersborg SS, et al: Trainable immunohistochemical HER2/neu image analysis: a multisite performance study using 260 breast tissue specimens. Arch Pathol Lab Med 2011 July;135(7):896-902

## Performance

### Method Description

Testing is performed using FDA-approved Ventana Pathway HER2 (4B5) rabbit monoclonal primary antibody and a proprietary detection system.(Package insert: PATHWAY anti-HER-2/neu [4B5] Rabbit Monoclonal Primary Antibody)

Scoring is performed according to American Society of Clinical Oncology (ASCO)/ College of American Pathologists (CAP) guidelines as follows:

Score of 3+ is defined as circumferential membrane staining that is complete, intense and in greater than 10% of invasive tumor cells;

Score of 2+ is defined as weak to moderate complete membrane staining observed and in greater than 10% of the invasive tumor cells; or circumferential membrane staining that is complete, intense and in less than or equal to 10% of invasive tumor cells;

Score of 1+ is defined as incomplete membrane staining that is faint or barely perceptible and in greater than 10% of the invasive tumor cells; or weak to moderate complete membrane staining observed and less than 10% of the invasive tumor cells;

Score of 0 is defined as no staining observed or membrane staining that is incomplete and is faint or barely perceptible and in less than or equal to 10% of the invasive tumor cells.(Wolff AC, Hammond ME, Hicks DG, et al. Human Epidermal Growth Factor Receptor 2 Testing in Breast Cancer: American Society of Clinical Oncology/College of American Pathologists Clinical Practice Guideline Focused Update. J Clin Oncol.2018 Jul 10;36(20):2105-2122 doi: 10.1200/JCO.2018.77.8738)

### PDF Report

No

### Day(s) and Time(s) Test Performed

Monday through Friday

### Analytic Time

4 days

### Maximum Laboratory Time

6 days

### Specimen Retention Time

Until 1 week after results are reported. Material made at Mayo Clinic may be retained at Mayo Clinic indefinitely.

**Performing Laboratory Location**

Rochester

**Fees and Codes**
**Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their Regional Manager. For assistance, contact [Customer Service](#).

**Test Classification**

This test has been cleared or approved by the U.S. Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

**CPT Code Information**

88360

**LOINC® Information**

Test ID	Test Order Name	Order LOINC Value
HERDN	HER BreastDCIS IHC Manual NO Reflex	In Process

Result ID	Test Result Name	Result LOINC Value
71499	Interpretation	50595-8
71500	Participated in the Interpretation	No LOINC Needed
71501	Report electronically signed by	19139-5
71502	Material Received	81178-6
MA027	Tumor classification	21918-8
71624	Disclaimer	62364-5
71838	Case Number	80398-1