

Overview

Useful For

Supporting the diagnosis of inflammatory myofibroblastic tumors when used conjunction with an anatomic pathology consultation

Reflex Tests

| Test Id | Reporting Name | Available Separately | Always Performed |
|---------|--------------------|----------------------|------------------|
| _PBCT | Probe, +2 | No, (Bill Only) | No |
| _PADD | Probe, +1 | No, (Bill Only) | No |
| _PB02 | Probe, +2 | No, (Bill Only) | No |
| _PB03 | Probe, +3 | No, (Bill Only) | No |
| _IL25 | Interphases, <25 | No, (Bill Only) | No |
| _I099 | Interphases, 25-99 | No, (Bill Only) | No |
| _I300 | Interphases, >=100 | No, (Bill Only) | No |

Testing Algorithm

This test includes a charge for the probe application, analysis, and professional interpretation of results for one probe set (2 individual fluorescence in situ hybridization probes). No analysis charges will be incurred if an insufficient number of representative cells are available for analysis.

Appropriate ancillary probes may be performed at consultant discretion to render comprehensive assessment. Any additional probes will have the results included within the final report and will be performed at an additional charge.

Method Name

Fluorescence In Situ Hybridization (FISH)

NY State Available

Yes

Specimen

Specimen Type

Tissue

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 next-generation sequencing to resolve atypical or unbalanced fluorescence in situ hybridization results of this gene region is available, order SARCP / Sarcoma Targeted Gene Fusion/Rearrangement Panel, Next-Generation Sequencing, Tumor.

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 Required

Submit only 1 of the following specimens:

Preferred

Specimen Type: Tissue block

Collection Instructions: Submit a formalin-fixed, paraffin-embedded (FFPE) 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 Minimum Volume

Slides: 1 Hematoxylin and eosin stained and 2 unstained

Reject Due To

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

Specimen Stability Information

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

Clinical & Interpretive**Clinical Information**

Inflammatory myofibroblastic tumor (IMT) is a distinctive lesion composed of myofibroblastic spindle cells accompanied by an inflammatory infiltrate which occur primarily in the soft tissue but may arise in any anatomical site including lung, soft tissue, retroperitoneum, and bladder.

A subset of IMT are characterized by rearrangements involving the *ALK* gene at 2p23. Studies support that identification of *ALK* gene rearrangement is useful to differentiate IMTs from other spindle cell neoplasms of soft tissue and viscera.

Reference Values

An interpretive report will be provided.

Interpretation

ALK will be clinically interpreted as positive or negative.

A neoplastic clone is detected when the percent of cells with an abnormality exceeds the normal cutoff for the *ALK* probe set.

A positive result is consistent with rearrangement of the *ALK* gene and likely reflects *ALK* fusion with a partner gene. The significance of this finding is dependent on the clinical and pathologic features.

A negative result suggests an *ALK* gene rearrangement is not present but does not completely exclude the presence of an *ALK* gene rearrangement and does not exclude the diagnosis of inflammatory myofibroblastic tumors.

Cautions

This test is not approved by the US Food and Drug Administration and it is best used as an adjunct to existing clinical and pathologic information.

This fluorescence in situ hybridization (FISH) assay does not rule out other chromosome abnormalities.

Fixatives other than formalin (eg, Prefer, Bouin's) may not be successful for FISH assays. Non-formalin fixed specimens will not be rejected.

Paraffin-embedded tissues that have been decalcified may not be successful for FISH analysis. The success rate of FISH studies on decalcified tissue is approximately 50%, but FISH will be attempted if sufficient tumor is present for analysis.

FISH studies will be attempted if sufficient tumor is present for analysis. The pathologist reviewing the hematoxylin and eosin-stained slide may find it necessary to cancel testing if insufficient tissue/tumor is available for testing.

If no FISH signals are observed post-hybridization, the case will be released indicating a lack of FISH results.

Clinical Reference

1. Sukov WR, Cheville JC, Carlson AW, et al. Utility of ALK-1 protein expression and ALK rearrangements in distinguishing inflammatory myofibroblastic tumor from malignant spindle cell lesions of the urinary bladder. *Mod Pathol*. 2007;20(5):592-603
2. Tsuzuki T, Magi-Galluzzi C, Epstein JI. ALK-1 expression in inflammatory myofibroblastic tumor of the urinary bladder. *Am J Surg Pathol*. 2004;28(12):1609-1614
3. WHO Classification of Tumours Editorial Board. *Soft Tissue and Bone Tumours*. 5th ed. IARC; 2020. WHO Classification of Tumours Series. Vol. 3, 109-111

Performance

Method Description

The test is performed using a commercially available *ALK* dual-color break-apart strategy probe (BAP). Formalin-fixed, paraffin-embedded tissues are cut at 5 microns and mounted on positively charged glass slides. The selection of tissue and the identification of target areas on the hematoxylin and eosin (H and E)-stained slide is performed by a pathologist. Using the H and E-stained slide as a reference, target areas are etched with a diamond-tipped etcher on the back of the unstained slide to be assayed. The probe set is hybridized to the appropriate target areas and 2 technologists each analyze 50 interphase nuclei (100 total) with the results expressed as the percent of abnormal nuclei.(Unpublished Mayo method)\

PDF Report

No

Day(s) Performed

Monday through Sunday

Report Available

7 to 10 days

Specimen Retention Time

Slides and H&E used for analysis are retained by the laboratory in accordance with regulatory requirements. Client provided paraffin blocks and extra unstained slides (if provided) will be returned after testing is complete.

Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Main Campus

Fees & 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 account representative. For assistance, contact [Customer Service](#).

Test Classification

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

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)

LOINC® Information

| Test ID | Test Order Name | Order LOINC® Value |
|---------|----------------------------|--------------------|
| IMTF | ALK, (2p23), IMT, FISH, Ts | 78205-2 |

| Result ID | Test Result Name | Result LOINC® Value |
|-----------|------------------------|---------------------|
| 52171 | Result Summary | 50397-9 |
| 52173 | Interpretation | 69965-2 |
| 54587 | Result | 62356-1 |
| CG747 | Reason for Referral | 42349-1 |
| 52174 | Specimen | 31208-2 |
| 52175 | Source | 31208-2 |
| 52176 | Tissue ID | 80398-1 |
| 52177 | Method | 85069-3 |
| 55029 | Additional Information | 48767-8 |
| 52178 | Released By | 18771-6 |
| 53828 | Disclaimer | 62364-5 |