
Reporting Title: Leukemia Lymphoma Phenotype, Tissue**Performing Location:** Mayo Clinic Laboratories - Rochester Main Campus**Ordering Guidance:**

Order LCMS / Leukemia/Lymphoma Immunophenotyping, Flow Cytometry, Varies if the specimen is a fresh (less than 4 days post-collection), unfixed, non-embedded bone marrow core biopsy, bone or bone lesion. This is an equivalent source for bone marrow aspirate **only in the event of a dry tap** during the bone marrow harvesting procedure. Indicate "dry tap" in performing lab notes or paperwork when submitting this specimen type.

This test is **not intended** for product of conception (POC) specimens. For POC specimens see CMAPC / Chromosomal Microarray, Autopsy, Products of Conception, or Stillbirth.

Shipping Instructions:**Specimen must arrive within 4 days of collection.****Necessary Information:****The following information is required:**

1. Pertinent clinical history, including reason for testing or clinical indication/morphologic suspicion
2. Provide the following:
 - Tissue type
 - Location
 - Pathology/diagnostic report, including the client surgical pathology case number

Specimen Requirements:**Submit 1 of the following specimens:****Preferred****Specimen Type:** Tissue**Supplies:** Hank's Solution (T132)**Container/Tube:** Sterile container with 15 mL of tissue culture medium (eg, Hank's balanced salt solution, RPMI, or equivalent)**Specimen Volume:** 5 mm(3) or larger biopsy**Collection Instructions:**

1. Place tissue into a sterile container with 15 mL of tissue culture medium (eg, Hank's balanced salt solution, RPMI, or equivalent).
2. Send intact specimen (**do not mince**)
3. Specimen **cannot** be fixed.

Specimen Stability Information: Ambient 4 days/Refrigerated 4 days**Acceptable****Specimen Type:** Fine needle aspirate (FNA)**Supplies:** Hank's Solution (T132)**Container/Tube:** Sterile container with 15 mL of tissue culture medium (eg, Hank's balanced salt solution, RPMI, or equivalent)**Specimen Volume:** Entire collection

Collection Instructions:

1. Collect FNA and transfer entire collection into a sterile container with 15 mL of tissue culture medium (eg, Hank's balanced salt solution, RPMI, or equivalent).
2. Send intact specimen (**do not mince**)
3. Specimen **cannot** be fixed.

Specimen Stability Information: Ambient 4 days/Refrigerated 4 days

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
Tissue	Refrigerated (preferred)		
	Ambient		

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
19562	Accession Number	Alphanumeric		57723-9
19569	Material:	Alphanumeric		81178-6
19568	Specimen:	Alphanumeric		31208-2
19574	Final Diagnosis:	Alphanumeric		34574-4
19563	Referring Pathologist/Physician	Alphanumeric		46608-6
19564	Ref Path/Phys Address	Alphanumeric		74221-3
19565	Place of Death:	Alphanumeric		21987-3
19566	Date and Time of Death:	Alphanumeric		81956-5
19567	Date of Autopsy:	Alphanumeric		75711-2
19570	Tissue Discription:	Alphanumeric		22634-0
19572	Clinical History:	Alphanumeric		22636-5
19576	Revision Description:	Alphanumeric		81317-0
19577	Signing Pathologist:	Alphanumeric		19139-5
19578	Special Procedures:	Alphanumeric		30954-2
19579	SP Signing Pathologist:	Alphanumeric		19139-5
19580	*Previous Report Follows*	Alphanumeric		22639-9
19581	Addendum:	Alphanumeric		35265-8
19582	Addendum Comment:	Alphanumeric		22638-1
19583	Addendum Pathologist:	Alphanumeric		19139-5
19571	Microscopic Description	Alphanumeric		22635-7
19573	Final Diagnosis:	Alphanumeric		34574-4
19575	Special Studies	Alphanumeric		30954-2
CK139	LLPT Result	Alphanumeric		No LOINC Needed

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

Supplemental Report:

No

CPT Code Information:

88184-Flow cytometry; first cell surface, cytoplasmic or nuclear marker x 1

88185-Flow cytometry; additional cell surface, cytoplasmic or nuclear marker (each)

88187-Flow Cytometry Interpretation, 2 to 8 Markers (if appropriate)

88188-Flow Cytometry Interpretation, 9 to 15 Markers (if appropriate)

88189-Flow Cytometry Interpretation, 16 or More Markers (if appropriate)

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
FCINT	Flow Cytometry Interp, 2-8 Markers	1	88187	No	No, (Bill Only)
FCIMS	Flow Cytometry Interp, 9-15 Markers	1	88188	No	No, (Bill Only)
FCINS	Flow Cytometry Interp,16 or greater	1	88189	No	No, (Bill Only)

Reference Values:

An interpretive report will be provided.