

# Myelodysplastic Syndrome (MDS), Specified FISH, Varies

Test ID: MDSMF

## Useful for:

Detecting a neoplastic clone associated with the common chromosome abnormalities seen in patients with myelodysplastic syndromes or other myeloid malignancies using client specified probes

Evaluating specimens in which standard cytogenetic analysis is unsuccessful

## **Testing Algorithm:**

This test includes a charge for the probe application, analysis, and professional interpretation of results for 1 probe set (2 individual fluorescence in situ hybridization probes). Additional charges will be incurred for all additional probe sets performed.

If the patient is being treated for known abnormalities, indicate the abnormality and which probes should be used.

When specified, any of the following probes will be performed:

inv(3) or t(3;3), RPN1/MECOM t(1;3)(p36;q21), PRDM16/RPN1 t(3;21)(q26.2;q22), MECOM/RUNX1 -5/5q-, D5S630/EGR1 -7/7q-, D7S486/D7Z1 +8, D8Z2/MYC 17p-, TP53/D17Z1 -20/20q-, D20S108/20qter

## **Reflex Tests:**

Test ID	Reporting Name	Available Separately	Always Performed
MDSMB	Probe, Each Additional (MDSMF)	No (Bill Only)	No

#### Methods:

Fluorescence In Situ Hybridization (FISH)

## **Reference Values:**

An interpretive report will be provided.

# **Specimen Requirements:**

Preferred Specimen Type: Bone marrow

Preferred Container/Tube: Yellow top (ACD)

Acceptable Container/Tube: Green top (heparin) or lavender top (EDTA)

Specimen Volume: 2-3 mL

Minimum Volume: 1 mL

#### **Collection Instructions:**

- 1. It is preferable to send the first aspirate from the bone marrow collection.
- 2. Invert several times to mix bone marrow.

Acceptable Specimen Type: Blood

Preferred Container/Tube: Yellow top (ACD)

Acceptable Container/Tube: Green top (heparin) or lavender top (EDTA)

Specimen Volume: 6 mL

Minimum Volume: 2 mL

#### **Collection Instructions:**

1. Invert several times to mix blood.

### Note:

1. A list of probes requested for analysis is required. Probes available for this test are listed in the Testing Algorithm section.

2. A reason for testing should be submitted with each specimen. The laboratory will not reject testing if this information is not provided, but appropriate testing and interpretation may be compromised or delayed. If this information is not provided, an appropriate indication for testing may be entered by Mayo Clinic Laboratories.

3. A pathology and/or flow cytometry report may be requested by the laboratory to optimize testing and aid in interpretation of results.

#### **Specimen Stability Information:**

Specimen Type	Temperature	Time
Varies	Ambient (preferred)	
	Refrigerated	

## **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.

Bone marrow is the preferred specimen type for this fluorescence in situ hybridization (FISH) test. If bone marrow is not available, a blood specimen may be used if there are neoplastic cells in the blood specimen (as verified by a hematopathologist).

# **CPT Code:**

88271 x2, 88275 x1, 88291 x1- FISH Probe, Analysis, Interpretation; 1 probe set

88271 x2, 88275 x1 – FISH Probe, Analysis; each additional probe set (if appropriate)

Day(s) Performed: Monday through Friday Report Available: 7 to 10 days