



PCPDS

PATIENT NAME TESTINGRNV, PCPDS-ABNORMAL				ORDER NUMBER K222000080
PATIENT ID SA00141738	DATE OF BIRTH 11/15/1978	AGE 42 Y	SEX Male	REQUESTED BY CLIENT CLIENT
COLLECTED 1/21/2021, 8:57 AM	RECEIVED 1/22/2021, 10:06 AM	REPORTED 1/28/2021, 7:50 AM		
The collected, received, and reported dates and times on the report are in the time zone of the performing location.				CLIENT ORDER NUMBER SA00141738
7028846 MCL RochesterCampus Rochester MN 55901				CLIENT MRN SA00141738

RESULT SUMMARY

Abnormal

INTERPRETATION

The result is abnormal and indicates a plasma cell clone with CCND1/IGH fusion, usually representing a t(11;14). In plasma cell myeloma, smoldering myeloma and monoclonal gammopathy of undetermined significance (MGUS), this finding represents a standard risk cytogenetic abnormality (Kumar S., et al., Nat Rev Clin Onc 15:409-421, 2018; Rajkumar, et al., Blood 125:3069-3075, 2015; Lakshman, et al., Leukemia 32:1811-1815, 2018). In amyloidosis, the prognostic significance may be influenced by treatment (Muchtar, et al., Leukemia 31:1562- 1569, 2017).

The overall risk assessment should be done in the context of other risk factors.

If not previously performed at diagnosis, the Mayo Stratification for Myeloma and Risk Adapted Therapy algorithm (mSMART 3.0, www.msmart.org/mm-treatment-guidelines) incorporating both FISH and monotypic plasma cell S-phase results can be performed on a new sample. If interested in this testing, call 800-533- 1710.

RESULT TABLE

Abnormality Name	Result	# Abn	Total Cells
14q32(IGH sep)	Abnormal	50	50
t(11;14) CCND1-XT/IGH-XT fusion	Abnormal	50	50
-17p13.1(TP53x1,D17Z1x2)	Normal	0	50
-17(TP53,D17Z1)x1	Normal	0	50
+1q22(TP73x2,1q22x3)	Normal	0	50

RESULT

nuc ish(CCND1-XT,IGH-XT)x3(CCND1-XT con IGH-XTx2)

REASON FOR REFERRAL

multiple myeloma/MM

SPECIMEN

Bone Marrow

SOURCE



PCPDS

PATIENT NAME TESTINGRNV, PCPDS-ABNORMAL				ORDER NUMBER K222000080
PATIENT ID SA00141738	DATE OF BIRTH 11/15/1978	AGE 42 Y	SEX Male	REQUESTED BY CLIENT CLIENT
COLLECTED 1/21/2021, 8:57 AM	RECEIVED 1/22/2021, 10:06 AM	REPORTED 1/28/2021, 7:50 AM		
The collected, received, and reported dates and times on the report are in the time zone of the performing location.				CLIENT ORDER NUMBER SA00141738
7028846 MCL RochesterCampus Rochester MN 55901				CLIENT MRN SA00141738
Left posterior iliac crest				

METHOD

Locus and probes [Strategy;#Nuclei;class]

1p36.3(TP73),1q22 [COPY#;50;LDT]
 11q13(CCND1-XT),14q32(IGH-XT) [DFISH;50;ASR]
 14q32(3'IGH,5'IGH) [BAP;50;LDT]
 17p13.1(TP53),17CEN(D17Z1) [COPY#;50;ASR]

Probe strategies include:
 DFISH=dual color, double fusion;
 BAP=break-apart probe;
 COPY#=region gain and loss.
 Scoring Method: Manual

DISCLAIMER

Applicable to Analyte Specific Reagent (ASR) and Laboratory Developed Tests (LDT). 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 U.S. Food and Drug Administration. This FISH test does not rule out other chromosome abnormalities.

RELEASED BY

Linda B. Baughn, Ph.D.

Code : MCR Laboratory : Mayo Clinic Laboratories - Rochester Main Campus Address : 200 FIRST STREET SW
 Lab Director : WILLIAM G MORICE, II MD, PhD CLIA Certificate : 24D0404292 ROCHESTER MN 55905