

TEST CHANGE

Mismatch Repair by Immunohistochemistry with Reflex to BRAF Codon 600 Mutation and MLH1 Promoter Methylation

2002327, MSI REFLEX

Specimen Requirements:

Patient Preparation:

Collect: Tumor tissue.

Specimen Preparation: Tumor Tissue: Formalin fix (10 percent neutral buffered formalin is preferred) and paraffin embed tissue. If sending precut slides, do not oven bake. Transport tissue block or 15 unstained (3- to 5-micron thick sections), positively charged slides in a tissue transport kit (ARUP Supply #47808). Available online through eSupply using ARUP Connect(TM) or contact ARUP Client Services at (800) 522-2787. (Min: 10 slides). Protect paraffin block and/or slides from excessive heat.

Transport Temperature: Room temperature. Also acceptable: Refrigerated. Ship in cooled container during summer months.

Unacceptable Conditions: Paraffin block with less than 25 percent tumor tissue. Specimens fixed in any fixative other than 10 percent neutral buffered formalin. Decalcified specimens.

Remarks: Include surgical pathology report. Submit electronic request. If you do not have electronic ordering capability, use an ARUP requisition form complete with an ARUP client number. For additional technical details, please contact ARUP Client Services at (800) 522-2787. If multiple specimens (blocks or slides) are sent to ARUP, they must be accompanied by one of the following: an order comment indicating that the ARUP pathologist should choose the specimen most appropriate for testing (e.g., "Choose best block"), or individual orders for each sample submitted. A Pathologist Block Selection Fee (ARUP test code 3002076) will be added to orders that utilize the first option. If multiple specimens are sent to ARUP without a request for pathologist block/slide selection or individual orders, they will be held until clarification is provided.

Stability: Ambient: Indefinitely; Refrigerated: Indefinitely; Frozen: Unacceptable

Methodology: Qualitative Immunohistochemistry (IHC)/Qualitative Real-Time Polymerase Chain Reaction

Performed: Tue-Sat

Reported:	1-5 days
Note:	If MLH1 is abnormal for Mismatch Repair by IHC, then BRAF codon 600 will be added. If BRAF codon 600 is negative, MLH1 Promoter Methylation will be added. Additional charges apply.
CPT Codes:	88342; 88341 x3; if reflexed, add 81210; if further reflexed, add 81288
New York DOH Approval Status:	This test is New York DOH approved.
Interpretive Data:	Refer to report. Refer to the Colorectal Cancer or Lynch Syndrome topic at arupconsult.com . This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.
Reference Interval:	

HOTLINE NOTE: There is a reflexive pattern change associated with this test. One or more orderable or component has been added or removed to the reflexive pattern. Refer to the Hotline Test Mix for interface build information.