HOTLINE: Effective February 16, 2021

New Test **3002714** **Acute Myeloid Leukemia Mutation Panel by Next Generation Sequencing** **AML NGS**

Additional Technical Information

Methodology: Massively Parallel Sequencing
Performed: Varies
Reported: 12-14 days

Specimen Required: Collect: Lavender (EDTA), Green (sodium heparin) Bone Marrow (EDTA) or Bone Marrow (sodium heparin), Fresh-frozen tissue.
Specimen Preparation: **Whole Blood and Bone Marrow:** Transport 3 mL whole blood. (Min: 1.5 mL)
Fresh-frozen Tissue: Transport 5 mg fresh-frozen tissue. (Min: 5 mg)
Separate specimens must be submitted when multiple tests are ordered
Storage/Transport Temperature: **Whole Blood or Bone Marrow**: Refrigerated.
Fresh-frozen Tissue: Frozen.
Unacceptable Conditions: Serum, plasma, grossly hemolyzed specimens, buccal brush or swab, FFPE tissue
Stability (collection to initiation of testing): **Whole Blood or Bone Marrow:** Ambient: 72 hours; Refrigerated: 1 week; Frozen: Unacceptable
Fresh-frozen Tissue: Ambient: Unacceptable; Refrigerated: Unacceptable; Frozen: 1 month

Reference Interval: By report

Interpretive Data:
Refer to report.

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.

Counseling and informed consent are recommended for genetic testing. Consent forms are available online.

Note: Genes tested: *ANKRD26, ASXL1, CEBPA, DDX41, DNMT3A, ETV6, FLT3, GATA2, IDH1, IDH2, KIT, KRAS, NPM1*, NRAS, RUNX1, TP53, WT1*
* One or more exons are not covered by sequencing for the indicated gene; see Additional Technical Information.

CPT Code(s): 81450

New York DOH Approved.

HOTLINE NOTE: Refer to the Test Mix Addendum for interface build information.