

HOTLINE: Effective August 16, 2021

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**New Test**      **3003800**      ***JAK2 (V617F) Mutation by ddPCR, Qualitative with Reflex to CALR (Calreticulin) Exon 9 Mutation Analysis by PCR with Reflex to MPL Mutation Detection***      **ETPMF RFX**



Additional Technical Information

**Methodology:** Droplet Digital Polymerase Chain Reaction/Capillary Electrophoresis  
**Performed:** DNA Isolation: Sun-Sat  
Assay: Varies  
**Reported:** 3-15 days

**Specimen Required:** Collect: Whole blood or bone marrow: Lavender (EDTA), preferred. Also acceptable: Green (sodium heparin)  
Specimen Preparation: **Whole Blood:** Do not freeze. Transport 5 mL whole blood. (Min: 1 mL)  
**Bone Marrow:** Do not freeze. Transport 3 mL bone marrow. (Min: 1 mL)  
Storage/Transport Temperature: Refrigerated.  
Unacceptable Conditions: Plasma, serum, FFPE tissue blocks/slides, or fresh or frozen tissue, DNA extracted by a non-CLIA lab.  
Specimens collected in anticoagulants other than EDTA or sodium heparin. Clotted or grossly hemolyzed specimens.  
Stability (collection to initiation of testing): Refrigerated: 7 days; Frozen: Unacceptable

**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.

**Note:** If *JAK2* QUAL is reported as "Not Detected" then *CALR* Exon 9 Mutation Analysis by PCR will be added. If *CALR* is reported as "Not Detected," then *MPL* Mutation Detection will be added. Additional charges apply.

**CPT Code(s):** 81270; if reflexed add 81219; if reflexed again add 81338

New York DOH Approved.

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