HOTLINE: Effective August 15, 2022

New Test **3005454** **Chimerism, Posttransplant** **STR_POST**

Additional Technical Information

Methodology: Polymerase Chain Reaction/Fragment Analysis
Performed: Sun-Sat
Reported: 5-10 days

Specimen Required: Collect: Lavender (EDTA), pink (K2EDTA), or yellow (ACD solution A or B). **OR** bone marrow in lavender (EDTA).
Specimen Preparation: Transport 2 mL whole blood (Min: 1 mL) **OR** 1 mL bone marrow (Min: 1 mL).
Storage/Transport Temperature: Refrigerated. Also acceptable: Ambient.
Remarks: **Posttransplant results will be compared to pretransplant recipient and donor genotypes, therefore, donor and recipient specimens must be obtained and genotyped before the transplant event occurs.**
If cell sorting is required, refer to:
Chimerism, Posttransplant, Sorted Cells (T Cells) (3005393) or
Chimerism, Posttransplant, Sorted Cells (B Cells) (3005401) or
Chimerism, Posttransplant, Sorted Cells (CD33+ Cells) (3005409) or
Chimerism, Posttransplant, Sorted Cells (Granulocytes) (3005417) or
Chimerism, Posttransplant, Sorted Cells (Monocytes) (3005425) or
Chimerism, Posttransplant, Sorted Cells (CD34+ Cells) (3005433) or
Chimerism, Posttransplant, Sorted Cells (56+ Cells) (3005441)
Stability (collection to initiation of testing): Room temperature: 1 week; Refrigerated: 1 month; Frozen: Unacceptable

Interpretive Data:
Background Information: Chimerism, Posttransplant
Indication: Monitoring for bone marrow transplant patients; correlation with clinical status and consideration of the interval between bone marrow transplantation and testing is necessary for proper interpretation of results.
Methodology: PCR followed by capillary electrophoresis. Specimens are analyzed using 15 autosomal markers (D8S1179, D21S11, D7S820, CSF1PO, D3S1358, THO1, D13S317, D16S539, D2S1338, D19S433, vWa, TPOX, D18S51, D5S818, and FGA) and one gender marker (amelogenin).
Limit of Detection: 2 percent of minor cell population.
Limitations: Diagnostic errors can occur due to rare sequence variations.

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: Type Donor: Donor cells only.
Type Recipient: Recipient cells only.
Mixed: Donor and recipient cells present. Semiquantitative results of percentage of donor and recipient cells will be reported.

CPT Code(s): 81267

New York DOH Approved.

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