

## New Tests Now Available

Test Name	Method	CPT Code (Reference only; CPTs may vary)	Date Available	Test details (see web for additional details/options)
Granzyme B	IHC	88342	3/18/14	Schedule: M-F TAT: 1-2 business days
CD200	IHC	88342	2/14/14	FFPE tissue block (see web for more options)
SOX11	IHC	88342	1/16/14	
Chromosome Analysis: Hematologic/neoplastic	Cytogenetics	88237, 88264, 88280, 88291 (add'l codes may apply, 88285, 88280)	3/3/14	Schedule: M-Sat TAT: 5-7 days Specimen requirements: Refer to web
Chromosome Analysis: Solid tissue	Cytogenetics	88239, 88264, 88280, 88291 (add'l codes may apply, 88285, 88280)	3/3/14	Schedule: M-Sat TAT: 10-14 days Specimen requirements: Refer to web
EGFR IVD	PCR	81235; 88381	1/24/14	Schedule: M-F TAT: 3-4 business days FFPE tissue
FUS (16q11) translocations	FISH	88367x2	2/14/14	Schedule: M-F TAT: 3-4 business days
MET (7q31.2)/CC7	FISH	88367x2	2/5/14	FFPE tissue block (see web for more options)
RET (10q11.21) Breakapart	FISH	88367x2	2/5/14	

## Tests Coming Q2

Test Name	Method	CPT Code (Reference only; CPTs may vary)	Test details
CD103	IHC	88342	Schedule: M-F / TAT: 1-2 business days
CD19	IHC	88342	FFPE tissue block (see web for more options)
1q21 + 1p21	FISH	88367x2	Schedule: M-F / TAT: 3-4 business days Peripheral blood: Preferred - 3 ml in sodium heparin (green top) / Acceptable - 3 ml in EDTA (purple top) - OR - Bone marrow aspirate: Preferred - 1-2 ml in sodium heparin (green top) / Acceptable - 1-2 ml in EDTA (purple top) - OR - Tissue: Finely minced tissue in RPMI transport media
CD49d	Flow cytometry	88184 or 88185	Schedule: M-Sat / TAT: 1-2 business days This test run in the context of flow panels and cannot be ordered individually. Specimen: Peripheral blood, bone marrow aspirate, tissue or body fluids (see web for additional detail)
PML-RARAa	RT-PCR	81315 -OR- 81316	Schedule: TBD / TAT: TBD Peripheral blood: Preferred: 5 ml in EDTA (purple top) / Acceptable: 5 ml in sodium heparin (green top) - OR - Bone marrow aspirate: Preferred: 1-2 ml in EDTA (purple top) / Acceptable: 1-2 ml in sodium heparin (green top)

## New Panel Offerings

Test Name	Method	Date Available	CPT Code (s) Reference only; CPTs may vary
MPD FISH Panel, test options include: 13q14.3_D13S319; 13q34_LAMP; 20q12; CEP8; CEP9	FISH	2/6/14	88367x5
NSCLC (updated), test options include: EGFR IVD PCR; ALK FISH; ROS1 FISH; RET FISH; MET FISH; BRAF PCR	FISH	2/5/14	Determined by tests ordered

## Test Name Changes

Prior Name	New Name	Effective Date
Cytokeratin 5	Keratin 5	12/30/13
Cytokeratin 7	Keratin 7	12/30/13
Cytokeratin 8, low molecular weight (35βH11)	Keratin 8, low molecular weight (35βH11)	12/30/13
Cytokeratin 17	Keratin 17	12/30/13
Cytokeratin 19	Keratin 19	12/30/13
Cytokeratin 20	Keratin 20	12/30/13
Cytokeratins (AE1/AE3)	Keratins (AE1/AE3)	12/30/13
Cytokeratins, high molecular weight (34βE12)	Keratins, high molecular weight (34βE12)	12/30/13
Cytokeratins (OSCAR)	Keratins (OSCAR)	12/30/13

## Antibody Clone Changes

None

## Retired Tests

None

## CPT Coding Changes

PhenoPath has incorporated the IHC G codes for billing Medicare directly (G0461, G0462), in order to comply with the new Medicare NCCI edits. This change does not impact direct client billing.

## IHC Tech Only Menu Changes

- The following IHC tests are now offered as tech only: Brachyury, Caspase 3, Granzyme B, LEF1, LMO2, Ki-67 (clone MIB-1)
- The following IHC tests are no longer offered as tech only due to the complexity of interpretation: IgG4
- On-slide controls are now offered for most tests. Tissue block or cell block required. Separate control slide provided for a small handful of tests.

## QA Corner

PhenoPath has incorporated all the new ASCO-CAP guidelines for HER2 testing in breast cancer. PhenoPath's 2013 HER2 IHC-FISH concordance rates of 97.8% (positive) and 99.5% (negative) in breast are well above the ASCO-CAP-recommended concordance rate of 95%. To learn more, refer to our newsletter (Phenomena 17.1) or our new breast cancer flier (contact lab@phenopath.com to request your copy).

## Specimen Requirement Changes

Test Name	Method	Revised specimen requirements	Effective Date
Myeloperoxidase	Special Stain	Peripheral blood: Preferred - 3 ml in sodium heparin (green top) / Acceptable - 3 ml in EDTA (purple top) - OR - Bone marrow aspirate: Preferred - 1-2 ml in sodium heparin (green top) / Acceptable - 1-2 ml in EDTA (purple top) - OR - Cytocentrifuge preparations of cell suspensions	3/20/14
Oil Red O	Special Stain	Frozen or fresh tissue	3/6/14

