

Client Information (required)

Client Name		
Client Account No.		
Client Phone	Client Order No.	
Address		
City	State	ZIP Code

Submitting Provider Information (required)

Submitting/Referring Provider Name <i>(Last, First)</i>	
Fill in only if Call Back is required.	
Phone (with area code)	Fax** (with area code)
Provider's National I.D. (NPI)	

**Fax number given must be from a fax machine that complies with applicable HIPAA regulation.

Pathology/Clinical Diagnosis (required)

Include pathology report.												
Include a reason for testing, suspected diagnosis, brief history, and pertinent laboratory results.												
<table style="width: 100%;"> <tr> <td>Bone Marrow Transplant</td> <td><input type="checkbox"/> Autologous</td> <td><input type="checkbox"/> Allogeneic</td> <td><input type="checkbox"/> Sex mis-match</td> </tr> <tr> <td>Disease Stage</td> <td><input type="checkbox"/> New diagnosis</td> <td><input type="checkbox"/> Relapse</td> <td><input type="checkbox"/> MRD</td> </tr> <tr> <td colspan="4">ICD-10 Diagnosis Code</td> </tr> </table>	Bone Marrow Transplant	<input type="checkbox"/> Autologous	<input type="checkbox"/> Allogeneic	<input type="checkbox"/> Sex mis-match	Disease Stage	<input type="checkbox"/> New diagnosis	<input type="checkbox"/> Relapse	<input type="checkbox"/> MRD	ICD-10 Diagnosis Code			
Bone Marrow Transplant	<input type="checkbox"/> Autologous	<input type="checkbox"/> Allogeneic	<input type="checkbox"/> Sex mis-match									
Disease Stage	<input type="checkbox"/> New diagnosis	<input type="checkbox"/> Relapse	<input type="checkbox"/> MRD									
ICD-10 Diagnosis Code												

*If patient is enrolled in the Children's Oncology Group, see Children's Oncology Group Test Request (MC0767-20) to order testing.

Ship specimens to:

Mayo Clinic Laboratories
3050 Superior Drive NW
Rochester, MN 55905

Customer Service: 800-533-1710

Visit www.MayoClinicLabs.com for the most up-to-date test and shipping information.

Patient Information (required)

Patient ID (Medical Record No.)	
Patient Name <i>(Last, First, Middle)</i>	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date <i>(mm-dd-yyyy)</i>
Collection Date <i>(mm-dd-yyyy)</i>	Time <input type="checkbox"/> am <input type="checkbox"/> pm

Specimens Provided (required)

<input type="checkbox"/> Blood <input type="checkbox"/> Bone marrow <input type="checkbox"/> Fixed cells <input type="checkbox"/> Cultured cells <input type="checkbox"/> DNA <input type="checkbox"/> Lymph node <input type="checkbox"/> Spleen	<input type="checkbox"/> Paraffin block No. sent: _____ Indicate source: <input type="checkbox"/> Slides No. sent: _____	<input type="checkbox"/> Tissue No. sent: _____ <input type="checkbox"/> Frozen <input type="checkbox"/> Fixed formalin <input type="checkbox"/> Wet tissue <input type="checkbox"/> Other fixative, type: <input type="checkbox"/> Other, anatomic site:
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CBC Results		
HGB _____	MCV _____	WBC _____
RBC _____	RDW _____	PLT _____

Pathologist Information (required)

Submitting/Referring Pathologist Name <i>(Last, First)</i>	
Phone (with area code)	Fax** (with area code)

**Fax number given must be from a fax machine that complies with applicable HIPAA regulation.

MCL Internal Use Only

Note: It is the client's responsibility to maintain documentation of the order.

Billing Information

- An itemized invoice will be sent each month.
- Payment terms are net 30 days.

Call the Business Office with billing related questions:
800-447-6424 (US and Canada)
507-266-5490 (outside the US)

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Hematopathology Consultation <input type="checkbox"/> PATHC Pathology Consultation (submit PB and bone marrow aspirate slides, block) <input type="checkbox"/> HPWET Hematopathology Consultation, MCL Embed (submit core biopsy, clot section, bone marrow aspirate and PB slides) <input type="checkbox"/> HPCUT Hematopathology Consultation, Client Embed (submit bone marrow liquid aspirate, PB and bone marrow slides and embedded core biopsy and clot section) Note: HPWET and HPCUT require MCL approval prior to ordering and submission of specimens. Call 800-533-1710 for approval.	
Hematologic Disorders Hold Service <input type="checkbox"/> HOLDC Hematologic Disorders, Chromosome Hold <input type="checkbox"/> HOLDF Hematologic Disorders, Fluorescence In Situ Hybridization (FISH) Hold <input type="checkbox"/> HLLFH Leukemia/Lymphoma Flow Hold*** <input type="checkbox"/> EXHD DNA Extract and Hold <input type="checkbox"/> EXHR DNA and RNA Extract and Hold	
Flow Cytometry Leukemia/Lymphoma Immunophenotyping <input type="checkbox"/> LCMS Blood/Bone Marrow*** <input type="checkbox"/> LLPT Tissue <input type="checkbox"/> LLTOF Technical Only <input type="checkbox"/> MYEFL Myelodysplastic Syndrome by Flow Cytometry, Bone Marrow <input type="checkbox"/> PLINK Paroxysmal Nocturnal Hemoglobinuria, PI-Linked Antigen, Blood <input type="checkbox"/> SZDIA Sezary Diagnostic Flow Cytometry, Blood <input type="checkbox"/> SZMON Sezary Monitoring Flow Cytometry, Blood <input type="checkbox"/> CEE20 CD20 Cell Expression Evaluation <input type="checkbox"/> CEE49 CD49d Cell Expression Evaluation <input type="checkbox"/> CEE52 CD52 Cell Expression Evaluation	
Chromosome Analysis <input type="checkbox"/> CHRBM Bone Marrow <input type="checkbox"/> CHRHB Hematologic Blood	
Next-Generation Sequencing (NGS) <input type="checkbox"/> NGSFX Reanalysis, AML 4 or 11 Gene Panel <input type="checkbox"/> NGPCM Plasma Cell Myeloma, NGS <input type="checkbox"/> NGAMT AML, 4 Gene, NGS <input type="checkbox"/> NGAML AML, 11 Gene, NGS <input type="checkbox"/> NGSHM Myeloid Neoplasms, NGS	
Chromosomal Microarray <input type="checkbox"/> CMAH Hematologic Disorders	

ACUTE MYELOID LEUKEMIA (AML)/ MYELODYSPLASTIC SYNDROME (MDS) Acute Myeloid Leukemia (AML) <input type="checkbox"/> CEBPA CEBPA Mutations, Gene Sequencing <input type="checkbox"/> FLT FLT3 Mutation Analysis <input type="checkbox"/> IDHQ IDH1 (R132) and IDH2 (R140 and R172) Quantitative Detection, Droplet Digital PCR <input type="checkbox"/> IN16Q CBFβ-MYH11 Inversion(16), Quantitative Detection and Minimal Disease Risk Monitoring, qRT-PCR <input type="checkbox"/> KITE KIT Mutation Exons 8-11 and 17, Hematologic Neoplasms, Sequencing <input type="checkbox"/> NGAML MayoComplete Acute Myeloid Leukemia, 11-Gene Panel <input type="checkbox"/> NGAMT MayoComplete Acute Myeloid Leukemia, Therapeutic Gene Mutation Panel (FLT3, IDH1, IDH2, TP53), Next-Generation Sequencing <input type="checkbox"/> NPM1Q Nucleophosmin (NPM1) Mutation Analysis <input type="checkbox"/> NGSHM MayoComplete Myeloid Neoplasms, Comprehensive OncoHeme Next-Generation Sequencing <input type="checkbox"/> PMLR PML/RARA Quantitative, PCR <input type="checkbox"/> T821Q RUNX1-RUNX1T1 Translocation (8;21), Minimal Residual Disease Monitoring, Quantitative <input type="checkbox"/> AMLAF Acute Myeloid Leukemia (AML), FISH, Adult <input type="checkbox"/> AMLPF Acute Myeloid Leukemia (AML), FISH, Pediatric <input type="checkbox"/> AMLMF Acute Myeloid Leukemia (AML), Specified FISH For AMLMF: must specify probe sets to be performed. <input type="checkbox"/> RUNX1T1/RUNX1 t(8;21)(q22;q22) <input type="checkbox"/> MECOM/RUNX1 t(3;21)(q26.2;q22) <input type="checkbox"/> PML/RARA t(15;17)(q24.1;q21.2) <input type="checkbox"/> RARA/BAP 17q21 rearrangement <input type="checkbox"/> MLL (KMT2A) BAP 11q23 rearrangement <input type="checkbox"/> AFF1/MLL t(4;11)(q21;q23) <input type="checkbox"/> MLLT4/MLL t(6;11)(q27;q23) <input type="checkbox"/> MLLT3/MLL t(9;11)(p22;q23) <input type="checkbox"/> MLLT10/MLL t(10;11)(p13;q23) <input type="checkbox"/> MLL/CREBBP t(11;16)(q23;p13.3) <input type="checkbox"/> MLL/MLLT1 t(11;19)(q23;p13.3) <input type="checkbox"/> MLL/ELL t(11;19)(q23;p13.1) <input type="checkbox"/> MYH11/CBFB inv(16)(p13q22) or t(16;16) <input type="checkbox"/> CBFB BAP 16q22 rearrangement <input type="checkbox"/> GLIS2/CBFA2T3 inv(16)	
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<input type="checkbox"/> NUP98 BAP 11p15.4 rearrangement <input type="checkbox"/> HOXA9/NUP98 t(7;11)(p15;p15.4) <input type="checkbox"/> ETV6 BAP 12p13 rearrangement <input type="checkbox"/> MNX1/ETV6 t(7;12)(q36;p13) <input type="checkbox"/> DEK/NUP214 t(6;9)(p23;q34) <input type="checkbox"/> RPN1/MECOM inv(3)(q21.3q26.2) or t(3;3) <input type="checkbox"/> PRDM16/RPN1 t(1;3)(p36.3;q21.3) <input type="checkbox"/> KAT6A/CREBBP t(8;16)(p11.2;p13.3) <input type="checkbox"/> RBM15/MKL1 t(1;22)(p13.3;q13.1) <input type="checkbox"/> D5S630/EGR1 -5/5q deletion <input type="checkbox"/> D7Z1/D7S486 -7/7q deletion <input type="checkbox"/> TP53/D17Z1 -17/17p deletion <input type="checkbox"/> BCR/ABL1 t(9;22)(q34;q11.2) <input type="checkbox"/> ABL1 BAP 9q34 rearrangement
Myelodysplasia Syndromes (MDS) <input type="checkbox"/> MDSDF Myelodysplastic Syndrome (MDS), Diagnostic FISH <input type="checkbox"/> MDSMF Myelodysplastic Syndrome (MDS), Specified FISH <input type="checkbox"/> MYEFL Myelodysplastic Syndrome by Flow Cytometry, Bone Marrow <input type="checkbox"/> PLINK PNH, PI-Linked Antigen, Blood <input type="checkbox"/> MSTF Myeloid Sarcoma, FISH, Tissue Must select probes listed below or entire panel. <input type="checkbox"/> RUNX1T1/RUNX1 t(8;21)(q22;q22) <input type="checkbox"/> BCR/ABL1 t(9;22)(q34;q11.2) <input type="checkbox"/> MLL (KMT2A) BAP 11q23 rearrangement <input type="checkbox"/> PML/RARA t(15;17)(q24.1;q21.2) <input type="checkbox"/> MYH11/CBFB inv(16)(p13q22) or t(16;16) <input type="checkbox"/> Perform entire panel

BONE MARROW TRANSPLANT <input type="checkbox"/> BALLM B-ALL Monitoring, MRD Detection, Bone Marrow <input type="checkbox"/> CHIDB Chimerism-Donor <input type="checkbox"/> CHRGB Chimerism-Recipient Germline (Pre) <input type="checkbox"/> CHIMU Chimerism Transplant No Cell Sort <input type="checkbox"/> CHIMS Chimerism Transplant Sorted Cells <input type="checkbox"/> CLLMD CLL Monitoring, MRD Detection <input type="checkbox"/> 1DIS HLA A-B-C Disease Association Typing Low Resolution, Blood <input type="checkbox"/> 2DIS HLA-DR-DQ Disease Association Typing Low Resolution, Blood	
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LYMPHOID DISORDERS

B Cell

BALLM B-ALL Monitoring, MRD Detection, Bone Marrow

Immunoglobulin Gene Rearrangement

BCGR Blood

BCGBM Bone Marrow

BCGRV Varies

MYD88 MYD88, L265P, Somatic Gene Mutation, DNA Allele-Specific PCR

CXLPL CXCR4 Mutation Analysis, Somatic, Lymphoplasmacytic Lymphoma/Waldenstrom Macroglobulinemia

LPLFX Lymphoplasmacytic Lymphoma/Waldenstrom Macroglobulinemia (LPL/WM), MYD88 L265P with Reflex to CXCR4

SVISC Viscosity, Serum

BLBLF B-Cell Lymphoblastic Leukemia/Lymphoma, FISH, Tissue

For BLBLF: **must** specify probe sets to be performed.

CDKN2A/D9Z1 +9/9p-BCR/ABL1

MLL (KMT2A) 11q23 rearrangement break-apart

TP53/D17Z1 -17/17p-

PBX1/TCF3 t(1;19)(q23;p13)

D4Z1/D10Z1/D17Z1 Hyperdiploidy, +4,+10,+17

ETV6/RUNX1 fusion and iAMP21 t(12;21)(p13;q22)

IGH break-apart 14q32 rearrangement

MYC break-apart 8q24.1 rearrangement

Perform entire panel

PHLDF Philadelphia Chromosome-like Acute Lymphoblastic Leukemia (Ph-like ALL), Diagnostic FISH

BALAF B-Cell Acute Lymphoblastic Leukemia/Lymphoma (ALL), FISH, Adult

BALPF B-Cell Acute Lymphoblastic Leukemia/Lymphoma (ALL), Pediatric, FISH

BALMF B-Cell Acute Lymphoblastic Leukemia/Lymphoma (ALL), Specified FISH

For BALMF: **must** specify probe sets to be performed.

ABL2 break-apart 1q25 rearrangement

PDGFRB break-apart 5q33 rearrangement

IKZF1/CEP7 7p-

JAK2 break-apart 9p24.1 rearrangement

CDKN2A/D9Z1 +9/9p-

BCR/ABL1 t(9;22)

ABL1 break-apart 9q34 rearrangement

MLL (KMT2A) 11q23 rearrangement break-apart

AFF1/MLL t(4;11)(q21;q23)

MLLT4(AFDN)/MLL t(6;11)(q27;q23)

MLLT3/MLL t(9;11)(p22;q23)

MLLT10/MLL t(10;11)(p13;q23)

MLL/ELL t(11;19)(q23;p13.1)

MLL/MLLT1 t(11;19)(q23;p13.3)

TP53/D17Z1 -17/17p-

PBX1/TCF3 t(1;19)(q23;p13)

D4Z1/D10Z1/D17Z1 +4,+10,+17, Hyperdiploidy

ETV6/RUNX1 & iAMP21 t(12;21)(p13;q22)

ETV6 break-apart 12p13 rearrangement

IGH break-apart 14q32 rearrangement

P2RY8 rearrangement t(Xp22.33;var) or t(Yp11.32;var)

CRLF2 rearrangement t(Xp22.33;var) or t(Yp11.32;var)

CRLF2/IGH t(X;14)(p22.33;q32) or t(Y;14)(p11.32;q32)

MYC break-apart 8q24.1 rearrangement

BLPMF B-Cell Lymphoma, Specified FISH

For BLPMF: **must** specify probe sets to be performed. If not specified, probes tested will be determined based on reason for testing.

MYC break-apart 8q24.1 rearrangement

IGK/MYC fusion t(2;8)(p12;q24.1)

MYC/IGH fusion t(8;14)(q24.1;q32)

MYC/IGL fusion t(8;22)(q24.1;q11.2)

BCL6 break-apart t(3q27;var) rearrangement

BCL2 break-apart t(18q21;var) rearrangement

CCND1/IGH fusion t(11;14)(q13;q32)

TP53/D17Z1 -17/17p-

D7Z1/7q32 7q-

BLYM B-Cell Lymphoma, FISH, Tissue

Must select lymphoma subtype.

Burkitt (Pediatric)

Must select probes listed below or entire panel.

MYC BAP 8q24.1 rearrangement

IGK/MYC t(2;8)(p12;q24.1)

MYC/IGH t(8;14)(q24.1;q32)

MYC/IGL t(8;22)(q24.1;q11.2)

BCL6 BAP 3q27 rearrangement

BCL2 BAP 18q21 rearrangement

Perform entire Burkitt panel

Diffuse Large B-Cell, Burkitt-Like "Double-Hit"

Must select probes listed below or entire panel.

MYC BAP 8q24.1 rearrangement

MYC/IGH t(8;14)(q24.1;q32)

reflex: IGK/MYC t(2;8)(p12;q24.1)

reflex: MYC/IGL t(8;22)(q24.1;q11.2)

reflex: BCL6 BAP 3q27 rearrangement

reflex: BCL2 BAP 18q21 rearrangement

Perform entire frontline "Double-Hit" panel

Follicular

Must select probes listed below or entire panel.

BCL2 BAP 18q21 rearrangement

BCL6 BAP 3q27 rearrangement

TNFRSF14/1q22 deletion of 1p36

Perform entire follicular panel

Mantle Cell

CCND1/IGH t(11;14)(q13;q32)

TP53/D17Z1 Blastoid subtype only: deletion of 17p

MYC BAP Blastoid subtype only: 8q24.1 rearrangement

Perform entire frontline Mantle Cell panel

Splenic Marginal Zone Lymphoma (SMZL)

Must select probes listed below or entire panel.

D7Z1/7q32 deletion 7q

TP53/D17Z1 deletion 17p

Perform entire SMZL panel

Mucosa-Associated Lymphoid Tissue (MALT/ENMZL) (BLYM only)

MALT1 BAP 18q21 rearrangement

Large B-Cell with IRF4 Rearrangement (BLYM only)

Must select probes listed below or entire panel.

IRF4 BAP 6p24.3 rearrangement

BCL2 BAP 18q21 rearrangement

BCL6 BAP 3q27 rearrangement

Perform entire Large B-Cell panel

Chronic Lymphocytic Leukemia (CLL)

CLLMD Chronic Lymphocytic Leukemia (CLL) Monitoring Minimal Residual Disease (MRD) Detection, Flow Cytometry

BCLL IGH Somatic Hypermutation Analysis, B-Cell (B-CLL)

P53CA Hematologic Neoplasms, TP53 Somatic Mutation, DNA Sequencing Exons 4-9

CLLDF Chronic Lymphocytic Leukemia, Diagnostic FISH

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<input type="checkbox"/> CLLMF	Chronic Lymphocytic Leukemia, Specified FISH
<input type="checkbox"/> SLL	Small Lymphocytic Lymphoma, FISH, Tissue
For CLLMF, must specify probe sets to be performed. For SLL, must select either individual probes listed below or entire panel	
<input type="checkbox"/> D6Z1/MYB	-6/6q deletion
<input type="checkbox"/> D11Z1/ATM	-11/11q deletion
<input type="checkbox"/> D12Z3/MDM2	+12
<input type="checkbox"/> D13S319/LAMP1	-13/13q deletion
<input type="checkbox"/> TP53/D17Z1	-17/17p deletion
<input type="checkbox"/> CCND1/IGH	t(11;14)(q13;q32)
<input type="checkbox"/> IGH/BCL3	t(14;19)(q32;q13)
<input type="checkbox"/> Perform entire panel	
<input type="checkbox"/> TLPDF	T-Cell Lymphoma, Diagnostic FISH
<input type="checkbox"/> TLPMF	T-Cell Lymphoma, Specified FISH
For TLPMF: must specify probe sets to be performed.	
<input type="checkbox"/> TCL1A BAP	14q32.1 rearrangement
<input type="checkbox"/> TRAD BAP	14q11.2 rearrangement
<input type="checkbox"/> D7Z1/D7S486	i(7q)
<input type="checkbox"/> D8Z2/MYC	+8
<input type="checkbox"/> TLYM	T-Cell Lymphoma, FISH, Tissue
Must select probes listed or entire panel.	
<input type="checkbox"/> TCL1A BAP	14q32 rearrangement
<input type="checkbox"/> TRAD	14q11.2 rearrangement
<input type="checkbox"/> D7Z1/D7S486	-7/iso(7q)
<input type="checkbox"/> D8Z2/MYC	+8
<input type="checkbox"/> ALK BAP	2p23 rearrangement
<input type="checkbox"/> TP63 BAP	3q28 rearrangement
<input type="checkbox"/> IRF4 (DUSP22) BAP	6p25.3 rearrangement
<input type="checkbox"/> Perform entire panel	
Congenital Infantile Leukemia	
<input type="checkbox"/> CILDF	Congenital Infantile Leukemia, Diagnostic FISH
<input type="checkbox"/> CILPF	Congenital Infantile Leukemia, FISH
<input type="checkbox"/> CILMF	Congenital Infantile Leukemia, Specified FISH
For CILMF: must specify probe sets to be performed.	
<input type="checkbox"/> MLL (KMT2A)	11q23 rearrangement
<input type="checkbox"/> AFF1/MLL	t(4;11)(q21;q23)
<input type="checkbox"/> MLLT4(AFDN)/MLL	t(6;11)(q27;q23)
<input type="checkbox"/> MLLT3/MLL	t(9;11)(p22;q23)
<input type="checkbox"/> MLLT10/MLL	t(10;11)(p12;q23)
<input type="checkbox"/> MLL/ELL	t(11;19)(q23;p13.1)
<input type="checkbox"/> MLL/MLLT1	t(11;19)(q23;p13.3)
<input type="checkbox"/> KAT6A/CREBBP	t(8;16)
<input type="checkbox"/> D8Z2/MYC	Trisomy 8

<input type="checkbox"/> RBM15/MKL1	t(1;22)+13/+21, 13q14, and 21q22
<input type="checkbox"/> MYH11/CBFB	inv(16)
<input type="checkbox"/> CBFB break-apart	16q22 rearrangement
<input type="checkbox"/> RUNX1T1/RUNX1	t(8;21)
<input type="checkbox"/> PML/RARA	t(15;17)
<input type="checkbox"/> RARA break-apart	17q21 rearrangement
<input type="checkbox"/> D5S630/EGR1	-5/5q-
<input type="checkbox"/> D7Z1/ D7S486	-7/7q-
<input type="checkbox"/> RPN1/MECOM	inv(3) or t(3;3)
<input type="checkbox"/> MECOM break-apart	3q26.2 rearrangement
<input type="checkbox"/> DEK/NUP214	t(6;9)
<input type="checkbox"/> ETV6 break-apart	12p13 rearrangement
<input type="checkbox"/> MNX1/ETV6	t(7;12)(q36;p13)
<input type="checkbox"/> GLIS2/CBFA2T3	inv(16)
<input type="checkbox"/> NUP98 break-apart	11p15.4 rearrangement
<input type="checkbox"/> HOXA9/NUP98	t(7;11)(p15;p15.4)
<input type="checkbox"/> CDKN2A/D9Z1	+9/9p-
<input type="checkbox"/> CDKN2A/D9Z1	t(9;22)
<input type="checkbox"/> ABL1 break-apart	9q34 rearrangement
<input type="checkbox"/> TP53/D17Z1	-17/17p-
<input type="checkbox"/> PBX1/TCF3	t(1;19)(q23;p13)
<input type="checkbox"/> D4Z1/D10Z1/D17Z1	Hyperdiploidy, +4,+10,+17:
<input type="checkbox"/> ETV6/RUNX1 fusion, iAMP21	t(12;21)(p13;q22)
<input type="checkbox"/> ETV6 break-apart	12p13 rearrangement
<input type="checkbox"/> IGH break-apart	14q32 rearrangement
<input type="checkbox"/> CRLF2 rearrangement	t(Xp22.33;var) or t(Yp11.32;var)
<input type="checkbox"/> CRLF2/IGH	t(X;14)(p22.33;q32) or t(Y;14)(p11.32;q32)
<input type="checkbox"/> P2RY8 rearrangement	t(Xp22.33;var) or t(Yp11.32;var)
<input type="checkbox"/> MYC break-apart	8q24.1 rearrangement
<input type="checkbox"/> ABL2 break-apart	1q25 rearrangement
<input type="checkbox"/> PDGFRB break-apart	5q33 rearrangement
<input type="checkbox"/> JAK2 break-apart	9p24.1 rearrangement
<input type="checkbox"/> ABL1 break-apart	9q34 rearrangement
<input type="checkbox"/> IKZF1/CEP7	7p-
<input type="checkbox"/> TLX3/BCL11B	t(5;14)
<input type="checkbox"/> TRB break-apart	7q34 rearrangement
<input type="checkbox"/> MYB/TRB fusion	t(6;7)
<input type="checkbox"/> TRB/TLX1	t(7;10)
<input type="checkbox"/> TRB/LMO1	t(7;11)
<input type="checkbox"/> TRB/LMO2	t(7;11)
<input type="checkbox"/> TRAD break-apart	14q11.2 rearrangement
<input type="checkbox"/> MYB/TRAD	t(8;14)
<input type="checkbox"/> TLX1/TRAD	t(10;14)

<input type="checkbox"/> LMO1/TRAD	t(11;14)
<input type="checkbox"/> LMO2/TRAD	t(11;14)
<input type="checkbox"/> MLLT10/PICALM	t(10;11)
<input type="checkbox"/> TAL1/STIL	1p33 rearrangement
T Cell	
T-Cell Receptor Gene Rearrangement	
<input type="checkbox"/> TCGR	PCR, Blood
<input type="checkbox"/> TCGBM	Bone Marrow***
<input type="checkbox"/> TCGRV	Varies
<input type="checkbox"/> SZDIA	Sezary Diagnostic Flow Cytometry, Blood
<input type="checkbox"/> SZMON	Sezary Monitoring Flow Cytometry, Blood
<input type="checkbox"/> TALAF	T-Cell Acute Lymphoblastic Leukemia/ Lymphoma (ALL), FISH, Adult
<input type="checkbox"/> TALPF	T-Cell Acute Lymphoblastic Leukemia/ Lymphoma (ALL), FISH, Pediatric
<input type="checkbox"/> TALMF	T-Cell Acute Lymphoblastic Leukemia/ Lymphoma (ALL), Specified FISH
For TALMF: must specify probe sets to be performed.	
<input type="checkbox"/> TAL1/STIL	1p33 rearrangement
<input type="checkbox"/> TLX3/BCL11B	t(5;14)
<input type="checkbox"/> PDGFRB break-apart	5q33 rearrangement
<input type="checkbox"/> TRB break-apart	7q34 rearrangement
<input type="checkbox"/> MYB/TRB	t(6;7)(q23;q34)
<input type="checkbox"/> TRB/TLX1	t(7;10)(q34;q24)
<input type="checkbox"/> TRB/LMO1	t(7;11)(q34;p15)
<input type="checkbox"/> TRB/LMO2	t(7;11)(q34;p13)
<input type="checkbox"/> CDKN2A/D9Z1	+9/9p-
<input type="checkbox"/> JAK2 break-apart	9p24.1 rearrangement
<input type="checkbox"/> ABL1/BCR	t(9;22) or ABL1 amplification
<input type="checkbox"/> ABL1 break-apart	9q34 rearrangement
<input type="checkbox"/> MLLT10/PICALM	t(10;11)
<input type="checkbox"/> MLL (KMT2A) break-apart	11q23 rearrangement
<input type="checkbox"/> AFF1/MLL	t(4;11)(q21;q23)
<input type="checkbox"/> MLLT4(AFDN)/MLL	t(6;11)(q27;q23)
<input type="checkbox"/> MLLT3/MLL	t(9;11)(p22;q23)
<input type="checkbox"/> MLLT10/MLL	t(10;11)(p12;q23)
<input type="checkbox"/> MLL/ELL	t(11;19)(q23;p13.1)
<input type="checkbox"/> MLL/MLLT1	t(11;19)(q23;p13.3)
<input type="checkbox"/> TRAD break-apart	14q11.2 rearrangement
<input type="checkbox"/> MYC/TRAD	t(8;14)(q24.1;q11.2)
<input type="checkbox"/> TLX1/TRAD	t(10;14)(q24;q11.2)
<input type="checkbox"/> LMO1/TRAD	t(11;14)(p15;q11.2)
<input type="checkbox"/> LMO2/TRAD	t(11;14)(p13;q11.2)
<input type="checkbox"/> TP53/D17Z1	-17/17p-
<input type="checkbox"/> TLBLF	T-Lymphoblastic Leukemia/Lymphoma, FISH, Tissue
For TLBLF: must specify probe sets to be performed.	

*** Algorithms are available online for these tests. Visit www.MayoClinicLabs.com

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Birth Date <i>(mm-dd-yyyy)</i>	

<input type="checkbox"/> TAL1/STIL	1p33 rearrangement
<input type="checkbox"/> TLX3/BCL11B	t(5;14)
<input type="checkbox"/> TRB break-apart	7q34 rearrangement
<input type="checkbox"/> CDKN2A/D9Z1	9p-
<input type="checkbox"/> ABL1/BCR	t(9;22) or ABL1 amplification
<input type="checkbox"/> MLLT10/PICALM	t(10;11)
<input type="checkbox"/> MLL (KMT2A) break-apart	11q23
<input type="checkbox"/> TRAD break-apart	14q11.2 rearrangement
<input type="checkbox"/> TP53/D17Z1	-17/17p-

MYELOPROLIFERATIVE NEOPLASM (MPN)

BCR/ABL1 Testing

Diagnostic

BCRFX BCR/ABL1 Qualitative Diagnostic Assay with Reflex to BCR/ABL1 p190 Quantitative Assay or BCR/ABL1 p210 Quantitative Assay

BADX BCR/ABL1, Qualitative, Diagnostic Assay***

Monitoring

BCRAB BCR/ABL1, p210, mRNA Detection, Reverse Transcription-PCR (RT-PCR), Quantitative, Monitoring Chronic Myeloid Leukemia (CML)

BA190 BCR/ABL1, p190, mRNA Detection, Reverse Transcription-PCR (RT-PCR), Quantitative, Monitoring Assay

Additional

BAKDM BCR/ABL1, Tyrosine Kinase Inhibitor Resistance, Kinase Domain Mutation Screen, Sanger Sequencing

JAK2-CALR-MPL-JAK2V617F Testing

MPNR Myeloproliferative Neoplasm, JAK2 V617F with Reflex to CALR and MPL

PVJAK Polycythemia Vera, JAK2 V617F with Reflex to JAK2 Exon 12-15, Sequencing for Erythrocytosis

JAK2 V617F Mutation Detection

JAK2B Blood***

JAK2M Bone Marrow***

JAK2V Varies

CALR CALR Mutation Analysis, Myeloproliferative Neoplasm (MPN)***

MPNCM Myeloproliferative Neoplasm, CALR with Reflex to MPL

MPLVS MPL Exon 10 Mutation Detection

JAK2 Exon 12 and Other Non-V617F Mutation Detection

JAKXB Blood***

JAKXM Bone Marrow

MISCELLANEOUS MYELOPROLIFERATIVE NEOPLASM (MPN)

CSF3R CSF3R Exon 14 and 17 Mutation Detection by Sanger Sequencing

EOSDF Chronic Eosinophilia, Diagnostic FISH

EOSMF Chronic Eosinophilia, Specified FISH

For EOSMF: **must** specify probe sets to be performed.

FIP1LI, CHIC2, PDGFRA 4q12 deletion or rearrangement

PDGFRA 4q12 rearrangement

PDGFRB 5q33 rearrangement

PDGFRB/ETV6 t(5;12)

FGFR1 8p11.2 rearrangement

JAK2 9p24.1 rearrangement

ABL1 9q34 rearrangement

BCR/ABL1 t(9;22)

MURA Myeloma, High Risk with Reflex Probes, Diagnostic FISH Evaluation, Fixed Cell Pellet

KIT Mutation Testing

KITVS KIT Asp816Val Mutation Analysis

KITE KIT Mutation Exons 8-11 and 17, Hematologic Neoplasms, Sequencing

MYELOMA, AMYLOIDOSIS, & DYSPROTEINEMIA

Amyloid

FABP Amyloid Beta-Protein

AMPIP Amyloid Protein Identification, Paraffin, Mass Spectrometry

TTRZ TTR Gene, Full Gene Analysis

FMTT Familial Mutation, Targeted Testing

TTRX Amyloidosis, Transthyretin-Associated Familial, Reflex, Blood

FATAS Subcutaneous Fat Aspirate

Myeloma

Is patient on CD38 Therapy? Yes No

FLCS Immunoglobulin Free Light Chains

MSMRT Mayo Algorithmic Approach for Stratification of Myeloma and Risk-Adapted Therapy Report Bone Marrow

TMOGA Monoclonal Gammopathy, Monitoring, Serum

DMOGA Monoclonal Gammopathy, Diagnostic

MALD M-Protein Isotype, Matrix-Assisted Laser Desorption-Ionization Time-of-Flight Mass Spectrometry

MRDMM Multiple Myeloma Minimal Residual Disease by Flow, Bone Marrow

PBLI Plasma Cell Assessment, Blood

PCPRO Plasma Cell DNA Content and Proliferation, Bone Marrow

PEISO Protein Electrophoresis and Isotype, Serum

PCPDS Plasma Cell Proliferative Disorder, FISH, Bone Marrow

MFCDF Myeloma Fixed Cell, High Risk, FISH

PLASF Plasma Cell Proliferative Disorder, FISH, Tissue