

Reporting Title: Comprehensive NGS Myeloid, BM
Performing Location: Jacksonville

Necessary Information:
A reason for testing and a bone marrow pathology report are requested with each specimen. The laboratory will not reject testing if this information is not provided; however, appropriate testing and/or interpretation may be compromised or delayed in some instances. If not provided, an appropriate indication for testing may be entered by Mayo Clinic Laboratories.

Specimen Requirements:
Container/Tube:
Preferred: Lavender top (EDTA)
Acceptable: Yellow top (ACD A or B)
Specimen Volume: 4 mL

Collection Instructions:
1. Invert several times to mix bone marrow.
2. Send bone marrow in original tube. **Do not aliquot.**

Specimen Type	Temperature	Time	Special Container
Bone Marrow	Refrigerated (preferred)	72 hours	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
620042	Specimen Type	Alphanumeric		31208-2
620043	Indication for Test	Alphanumeric		42349-1
620054	Pathogenic Mutations Detected	Alphanumeric		82939-0
620045	Interpretation	Alphanumeric		59465-5
620046	Clinical Trials	Alphanumeric		82786-5
620047	Variants of Unknown Significance	Alphanumeric		93367-1
620048	Additional Notes	Alphanumeric		48767-8
620049	Method Summary	Alphanumeric		85069-3
620050	Disclaimer	Alphanumeric		62364-5
620055	Panel Gene List	Alphanumeric		36908-2
620051	Signing Pathologist	Alphanumeric		18771-6

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:

81455

Reference Values:

An interpretive report will be provided.