

CD52 Cell Expression Evaluation, Varies

**Reporting Title:** CD52 Cell Expression Evaluation, V **Performing Location:** Rochester

# Ordering Guidance:

This test should **not** be used as a shortened diagnostic panel. For a complete diagnostic B-cell, T-cell, or acute immunophenotyping panel, order LCMS / Leukemia/Lymphoma Immunophenotyping, Flow Cytometry, Varies.

This test evaluates CD52 expression only. For CD20 expression, order CEE20 / CD20 Cell Expression Evaluation, Varies. For CD49d expression, order CEE49 / CD49d Cell Expression Evaluation, Varies.

## **Shipping Instructions:**

Specimen must arrive within 4 days of collection.

## Necessary Information:

The following information is required:

- 1. The therapeutic monoclonal antibody being used or considered
- 2. The pertinent hematologic diseases that have been diagnosed or considered

3. Diagnostic immunophenotype of the neoplastic cells (when available, a pathology and/or flow cytometry report should be included).

- 4. Specimen source
- 5. Date and time of collection

# **Specimen Requirements:**

Submit only 1 of the following specimens:

Specimen Type: Whole Blood
Container/Tube:
Preferred: Yellow top (ACD solution A or B)
Acceptable: Lavender top (EDTA) or Green top (sodium heparin)
Specimen Volume: 10 mL
Collection Instructions:

Send specimen in original tube. Do not aliquot.
Label specimen as blood.

Specimen Stability Information: Ambient/Refrigerated < or =4 days</p>

Specimen Type: Bone marrow
Container/Tube:
Preferred: Yellow top (ACD solution A or B)
Acceptable: Lavender top (EDTA) or Green top (sodium heparin) Specimen Volume: 1-5 mL
Collection Instructions:
1. Submission of bilateral specimens is not required.
2. Label specimen as bone marrow.

3. Send bone marrow specimen in original tube. **Do not aliquot.** 

Specimen Stability Information: Ambient/Refrigerated < or =4 days

## Forms:



# **Test Definition: CEE52**

CD52 Cell Expression Evaluation, Varies

If not ordering electronically, complete, print, and send a <u>Hematopathology/Cytogenetics Test Request</u> (T726) with the specimen.

Specimen Type	Temperature	Time	Special Container
Varies	Varies	4 days	

# **Result Codes:**

Result ID	Reporting Name	Туре	Unit	LOINC®
CK166	CEE52 Result	Alphanumeric		No LOINC Needed
CK167	Final Diagnosis	Alphanumeric		22637-3

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

## **Supplemental Report:**

No

# **CPT Code Information:**

88184-Flow cytometry; first cell surface, cytoplasmic or nuclear marker 88185 x 3-Flow cytometry; additional cell surface, cytoplasmic or nuclear marker 88187-Flow Cytometry Interpretation, 2 to 8 Markers

## **Reference Values:**

Normal individuals have B lymphocytes, T lymphocytes, or myeloid cells that express the corresponding cell-surface antigens in question.