MAYO CLINIC LABORATORIES

Test Definition: NGSFX

Reanalysis of Acute Myeloid Leukemia 4- or 11- Gene Panels, Additional Genes

Reporting Title: Reanalysis, AML 4 or 11 Gene Panel
Performing Location: Rochester

Specimen Requirements:

No additional specimen is required. This is a bioinformatics review of additional gene regions not analyzed in the previously ordered NGAMT / Acute Myeloid Leukemia, Therapeutic Gene Mutation Panel (*FLT3*, *IDH1*, *IDH2*, *TP53*), Next-Generation Sequencing or NGAML / Acute Myeloid Leukemia, 11-Gene Panel. Call 800-533-1710 for assistance with ordering.

Forms:

1. Hematopathology Patient Information (T676)
2. If not ordering electronically, complete, print, and send an Hematopathology/Cytogenetics Test Request (T726) with the specimen.

Specimen Type	Temperature	Time	Special Container
Varies	Varies	14 days	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
NGSFX	MP043	Specimen Type	Plain Text	Yes
NGSFX	NFXID	Diagnosis/Indication	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
MP043	Specimen Type	Alphanumeric		31208-2
NFXID	Diagnosis/Indication	Alphanumeric		29308-4
601695	NGSFX Result	Alphanumeric		No LOINC Needed
601687	Pathogenic Mutations Detected	Alphanumeric		82939-0
601686	Interpretation	Alphanumeric		69047-9
601688	Clinical Trials	Alphanumeric		82786-5
601689	Variants of Unknown Significance	Alphanumeric		93367-1
601690	Additional Notes	Alphanumeric		48767-8
601691	Method Summary	Alphanumeric		85069-3
601693	NGSFX Panel Gene List	Alphanumeric		36908-2
601694	Reviewed By:	Alphanumeric		18771-6
601692	Disclaimer	Alphanumeric		62364-5

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

Supplemental Report:
No

CPT Code Information:
81450

Reference Values:
Only orderable as a reflex. For more information, see:
-NGAMT / Acute Myeloid Leukemia, Therapeutic Gene Mutation Panel (*FLT3*, *IDH1*, *IDH2*, *TP53*), Next-Generation Sequencing, Varies
-NGAML / Acute Myeloid Leukemia, 11-Gene Panel, Varies.