

Amyloid A (Hepatic) Immunostain, Technical Component Only

Overview

Useful For

Classification of hepatic adenomas

This test is **not useful for** amyloid typing.

Reflex Tests

Test Id	Reporting Name	Available Separately	Always Performed
IHTOI	IHC Initial, Tech Only	No	No
IHTOA	IHC Additional, Tech Only	No	No

Testing Algorithm

For the initial technical component only immunohistochemical (IHC) stain performed, the appropriate bill-only test ID will be reflexed and charged (IHTOI). For each additional technical component only IHC stain performed, an additional bill-only test ID will be reflexed and charged (IHTOA).

Method Name

Immunohistochemistry (IHC)

NY State Available

Yes

Specimen

Specimen Type

TECHONLY

Ordering Guidance

This test includes only technical performance of the stain (no pathologist interpretation is performed). If diagnostic consultation by a pathologist is required order PATHC / Pathology Consultation.

Shipping Instructions

Attach the green pathology address label and the pink Immunostain Technical Only label included in the kit to the outside of the transport container.

Specimen Required

Supplies: Immunostain Technical Only Envelope (T693)

Specimen Type: Tissue



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Container/Tube: Immunostain Technical Only Envelope

Preferred: 2 Unstained positively charged glass slide (25- x 75- x 1-mm) per test ordered; sections 4-microns thick.

Acceptable: Formalin-fixed, paraffin-embedded (FFPE) tissue block

Digital Image Access

- 1. Information on accessing digital images of immunohistochemical (IHC) stains and the manual requisition form can be accessed through this website: https://news.mayocliniclabs.com/ihc-stains/
- 2. Clients ordering stains using a manual requisition form will not have access to digital images.
- 3. Clients wishing to access digital images must place the order for IHC stains electronically. Information regarding digital imaging can be accessed through this website: https://news.mayocliniclabs.com/ihc-stains/#FAQ

Forms

If not ordering electronically, complete, print, and send a <u>Immunohistochemical (IHC)/In Situ Hybridization (ISH) Stains</u>
<u>Request</u> (T763) with the specimen.

Reject Due To

Wet/frozen	Reject
tissue	
Cytology	
smears	
Nonformalin	
fixed tissue	
Nonparaffin	
embedded	
tissue	
Noncharged	
slides	
ProbeOn slides	

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
TECHONLY Ambient (preferred)			
	Refrigerated		

Clinical & Interpretive

Clinical Information

Amyloid A (AA), also called serum AA, is an acute-phase protein. In the liver, AA is expressed on hepatocytes, although expression has been observed in adipocytes. AA can be used with a panel of immunohistochemical markers (beta-catenin, liver fatty acid binding protein, C-reactive protein, and glutamine synthetase) to distinguish hepatic adenoma from focal nodular hyperplasia and non-neoplastic liver. AA, along with C-reactive protein is overexpressed in



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inflammatory (type 3) hepatic adenoma and is not detectable in normal liver or in other adenoma types.

Interpretation

This test does not include pathologist interpretation, only technical performance of the stain. If interpretation is required, order PATHC / Pathology Consultation for a full diagnostic evaluation or second opinion of the case.

The positive and negative controls are verified as showing appropriate immunoreactivity. If a control tissue is not included on the slide, a scanned image of the relevant quality control tissue is available upon request; call 855-516-8404.

Interpretation of this test should be performed in the context of the patient's clinical history and other diagnostic tests by a qualified pathologist.

Cautions

Age of a cut paraffin section can affect immunoreactivity. Stability thresholds vary widely among published literature and are antigen dependent. Best practice is for paraffin sections to be cut within 6 weeks.

Clinical Reference

- 1. van Aalten SM, Verheij J, Terkivatan T, Dwarkasing RS, de Man RA, Ijzermans JN. Validation of a liver adenoma classification system in a tertiary referral centre: implications for clinical practice. J Hepatol. 2011;55(1):120-125
- 2. Bioulac-Sage P, Cubel G, Balabaud C, et al. Revisiting the pathology of resected benign hepatocellular nodules using new immunohistochemical markers. Semin Liver Dis. 2011;31(1):91-103
- 3. Bioulac-Sage P, Rebouissou S, Thomas C, et al. Hepatocellular adenoma subtype classification using molecular markers and immunohistochemistry. Hepatology. 2007;46(3):740-748
- 4. Magaki S, Hojat SA, Wei B, So A, Yong WH. An introduction to the performance of immunohistochemistry. Methods Mol Biol. 2019;1897:289-298. doi:10.1007/978-1-4939-8935-5_25

Performance

Method Description

Immunohistochemistry on sections of paraffin-embedded tissue.(Unpublished Mayo method)

PDF Report

No

Day(s) Performed

Monday through Friday

Report Available

1 to 3 days

Specimen Retention Time

Until staining is complete.



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Performing Laboratory Location

Rochester

Fees & Codes

Fees

- Authorized users can sign in to <u>Test Prices</u> for detailed fee information.
- Clients without access to Test Prices can contact <u>Customer Service</u> 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact <u>Customer Service</u>.

Test Classification

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

88342-TC, primary 88341-TC, if additional IHC

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value	
ААН	Amyloid A (Hepatic) IHC, Tech Only	Order only;no result	

Result ID	Test Result Name	Result LOINC® Value
70663	Amyloid A (Hepatic) IHC, Tech Only	Bill only; no result