



# Test Definition: TFE3F

Alveolar Soft Part Sarcoma (ASPS)/Renal Cell Carcinoma (RCC), Xp11.23 (TFE3), FISH, Tissue

## Overview

### Useful For

An aid in the diagnosis of alveolar soft-part sarcoma or renal cell carcinoma variant when used in conjunction with an anatomic pathology consultation

### Reflex Tests

Test Id	Reporting Name	Available Separately	Always Performed
_I099	Interphases, 25-99	No, (Bill Only)	No
_I300	Interphases, >=100	No, (Bill Only)	No
_IL25	Interphases, <25	No, (Bill Only)	No
_PADD	Probe, +1	No, (Bill Only)	No
_PB02	Probe, +2	No, (Bill Only)	No
_PB03	Probe, +3	No, (Bill Only)	No
_PBCT	Probe, +2	No, (Bill Only)	No

### Testing Algorithm

When a *TFE3* rearrangement is identified, reflex testing using the *TFE3/ASPCR1* probe will be performed.

This test does not include a pathology consultation. If a pathology consultation is requested, PATHC / Pathology Consultation should be ordered, and the appropriate fluorescence in situ hybridization (FISH) test will be performed at an additional charge.

This test includes a charge for application of the first probe set (2 FISH probes) and professional interpretation of results. Additional charges will be incurred for all reflex probes performed. Analysis charges will be incurred based on the number of cells analyzed per probe set. If no cells are available for analysis, no analysis charges will be incurred.

Appropriate ancillary probes may be performed at consultant discretion to render comprehensive assessment. Any additional probes will have the results included within the final report and will be performed at an additional charge.

### Method Name

Fluorescence In Situ Hybridization (FISH)

### NY State Available

Yes

## Specimen

### Specimen Type

Tissue

**Necessary Information**

- 1. A pathology report is required in order for testing to be performed.** Acceptable pathology reports include working drafts, preliminary pathology or surgical pathology reports.
- 2. A reason for testing must be provided.** If this information is not provided, an appropriate indication for testing may be entered by Mayo Clinic Laboratories.

**Specimen Required****Submit only 1 of the following specimens:****Specimen Type:** Tissue**Preferred:** Tissue block**Collection Instructions:** Submit a formalin-fixed, paraffin-embedded (FFPE) tumor tissue block. Blocks prepared with alternative fixation methods may be acceptable; provide fixation method used.**Acceptable:** Slides**Collection Instructions:** Four consecutive, unstained, 5 micron-thick sections placed on positively charged slides, and 1 hematoxylin and eosin-stained slide.**Forms**If not ordering electronically, complete, print, and send an [Oncology Test Request](#) (T729) with the specimen.**Specimen Minimum Volume**

Two consecutive, unstained, 5 micron-thick sections placed on positively charged slides and 1 hematoxylin and eosin-stained slide

**Reject Due To**

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

**Specimen Stability Information**

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

**Clinical & Interpretive****Clinical Information**

Alveolar soft-part sarcoma (ASPS) is a rare malignant tumor typically occurring in patients in their 20s to 30s within the muscle and deep tissues of the extremities. ASPS is slow growing and refractory to chemotherapy with a propensity to metastasize. Prolonged survival is possible even with metastasis, although the long-term disease-related mortality rate is high. ASPS is characterized by a translocation that results in fusion of *TFE3* on chromosome Xp11.2 with *ASPSCR1* (also

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called *ASPL* or *RCC17*) on chromosome 17q25.3. Both balanced and unbalanced forms (loss of the derivative X chromosome) of the translocation have been observed.

Another tumor, a rare subset of papillary renal cell carcinoma (RCC) with a distinctive pathologic morphology, has rearrangements of *TFE3* with *ASPSCR1* or other fusion partner genes. This tumor predominantly affects children and young adults, presents at an advanced stage but with an indolent clinical course, and is a distinct entity in the World Health Organization classification. Typically a balanced form of the translocation is present in the RCC variant. An assay to detect rearrangement of *TFE3* is useful to resolve diagnostic uncertainty in these tumor types, as immunohistochemistry for *TFE3* is not reliable.

### Reference Values

An interpretive report will be provided.

### Interpretation

A neoplastic clone is detected when the percent of nuclei with the abnormality exceeds the established normal cutoff for the *TFE3* probe set.

A positive result of *TFE3* rearrangement is consistent with a diagnosis of alveolar soft-part sarcoma (ASPS) or renal cell carcinoma (RCC) variant.

A negative result suggests that *TFE3* is not rearranged, but does not exclude the diagnosis of ASPS or RCC variant.

### Cautions

This test is not approved by the U.S. Food and Drug Administration and it is best used as an adjunct to existing clinical and pathologic information.

Fixatives other than formalin (eg, Prefer, Bouin's) may not be successful for FISH assays, however non-formalin fixed samples will not be rejected.

Paraffin-embedded tissues that have been decalcified are generally unsuccessful for FISH analysis. The pathologist reviewing the hematoxylin and eosin-stained slide may find it necessary to cancel testing.

### Supportive Data

FISH analysis was performed on 71 formalin fixed, paraffin-embedded specimens. These included 12 tumor samples (10 alveolar soft-part sarcoma [ASPS] and 2 renal cell carcinoma [RCC variant]), 9 tumors in the differential diagnosis, and 25 noncancerous control specimens from each sex (50 total). The normal controls were used to generate a normal cutoff for this assay. Of the 10 ASPS cases, 4 did not have a rearrangement, 2 had a balanced *TFE3* separation, and 4 had an atypical *TFE3* separation (presence of 2 normal X chromosomes and the derivative 17, but loss of the derivative X). This atypical rearrangement was confirmed using a *TFE3/ASPSCR1* probe set. Of the 2 diagnostic RCC cases, 1 was normal and 1 had an atypical *TFE3* separation, but reflex testing with the *TFE3/ASPSCR1* probe was not possible due to insufficient sample.

### Clinical Reference

1. Zhong M, De Angelo P, Osborne L, et al: Dual-color break-apart FISH assay on paraffin-embedded tissues as an adjunct to diagnosis of Xp11 translocation renal cell carcinoma and alveolar soft part sarcoma. *Am J Surg Pathol*

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2010;34(6):757-766

2. Ladanyi M, Lui MY, Antonescu CR, et al: The der(17)t(X;17)(p11;q25) of human alveolar soft part sarcoma fuses the TFE3 transcription factor gene to ASPL, a novel gene at 17q25. *Oncogene* 2001;20:48-57

3. Ross H, Argani P: Xp11 translocation renal cell carcinoma. *Pathology* 2010;42(4):369-373

## Performance

### Method Description

The test is performed using a laboratory-developed *TFE3* tri-color break-apart strategy probe (BAP). Reflex testing using a *TFE3/ASPCR1* dual-color, dual-fusion (D-FISH) strategy probe set is performed when atypical *TFE3* separation is detected. Formalin fixed paraffin-embedded tissues are cut at 5 microns and mounted on positively charged glass slides. The selection of tissue and the identification of target areas on the hematoxylin and eosin (H and E)-stained slide are performed by a pathologist. Using the H and E-stained slide as a reference, target areas are etched with a diamond-tipped etcher on the back of the unstained slide to be assayed. Each probe set is hybridized to the appropriate target area and 2 technologists each analyze 50 interphase nuclei (100 total for each probe set) with the results expressed as the percent of abnormal nuclei. (Unpublished Mayo method)

### PDF Report

No

### Day(s) Performed

Monday through Friday

### Report Available

7 to 10 days

### Specimen Retention Time

Slides and H&E used for analysis are retained by the laboratory in accordance to CAP and NYS requirements. Client provided paraffin blocks and extra unstained slides (if provided) will be returned after testing is complete.

### Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Main Campus

## Fees & Codes

### Fees

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

### Test Classification

This test was developed using an analyte specific reagent. Its performance characteristics were determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the US Food and Drug Administration.

### CPT Code Information

- 88271x2, 88291-DNA probe, each (first probe set), Interpretation and report
- 88271x2-DNA probe, each; each additional probe set (if appropriate)
- 88271x1-DNA probe, each; coverage for sets containing 3 probes (if appropriate)
- 88271x2-DNA probe, each; coverage for sets containing 4 probes (if appropriate)
- 88271x3-DNA probe, each; coverage for sets containing 5 probes (if appropriate)
- 88274 w/modifier 52-Interphase in situ hybridization, <25 cells, each probe set (if appropriate)
- 88274-Interphase in situ hybridization, 25 to 99 cells, each probe set (if appropriate)

### LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
TFE3F	TFE3 (Xp11.23), FISH, Ts	95779-5

Result ID	Test Result Name	Result LOINC® Value
52091	Result Summary	50397-9
52093	Interpretation	69965-2
54577	Result	35474-6
CG737	Reason For Referral	42349-1
52094	Specimen	31208-2
52095	Source	31208-2
52096	Tissue ID	80398-1
52097	Method	85069-3
52098	Released By	18771-6
55122	Additional Information	48767-8
53838	Disclaimer	62364-5