

KIT Immunostain, Technical Component Only

### Overview

### **Useful For**

Aids in the identification of gastrointestinal stromal tumors

#### **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 "Attention Pathology" address label (T498) 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

**Container/Tube:** Immunostains Technical Only Envelope

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

Acceptable: Formalin-fixed, paraffin-embedded tissue block



KIT Immunostain, Technical Component Only

## **Digital Image Access**

- 1. Information on accessing digital images of immunohistochemical (IHC) stains and the manual requisition form can be accessed through this website: <a href="https://news.mayocliniclabs.com/pathology/digital-imaging/">https://news.mayocliniclabs.com/pathology/digital-imaging/</a>
- 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: <a href="https://news.mayocliniclabs.com/pathology/digital-imaging/#section3">https://news.mayocliniclabs.com/pathology/digital-imaging/#section3</a>

### **Forms**

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

KIT (CD117) membrane protein is a type III tyrosine kinase growth factor receptor for stem cell factor (SCF), also known as mast cell growth factor. It is expressed in mast cells, melanocytes, and interstitial cells of Cajal. KIT is expressed in various epithelia (breast, sweat glands and salivary glands, renal tubular cells, thyroid follicular cells), testicular and ovarian interstitial cells, neurons of the central nervous system, immature myeloid cells, and trophoblastic cells. KIT staining is useful in the diagnosis of gastrointestinal stromal tumors (GIST), germ cell tumors, mast cell disorders and acute myeloid leukemias.

## Interpretation



KIT Immunostain, Technical Component Only

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. Lau SK, Weiss LM, Chu PG. D2-40 immunohistochemistry in the differential diagnosis of seminoma and embryonal carcinoma: a comparative immunohistochemical study with KIT (CD117) and CD30. Mod Pathol. 2007;20:320-325
- 2. Miettinen M, Sobin LH, Sarloma-Rikala M. Immunohistochemical spectrum of GISTs at different sites and their differential diagnosis with a reference to CD117 (KIT). Mod Pathol. 2000;13(10):1134-1142
- 3. Sarlomo-Rikala M, Kovatich AJ, Barusevicius A, Miettinen M. CD117: a sensitive marker for gastrointestinal stromal tumors that is more specific than CD34. Mod Pathol. 1998;11(8):728-734
- 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.

### **Performing Laboratory Location**

Rochester



KIT Immunostain, Technical Component Only

### **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
KIT	KIT IHC, Tech Only	Order only;no result

Result ID	Test Result Name	Result LOINC® Value
70797	KIT IHC, Tech Only	Bill only; no result