
Reporting Title: BRAF V600 Somatic Mutation Analysis, Tumor**Performing Location:** Rochester**Necessary Information:**

Pathology report (final or preliminary) must accompany specimen in order for testing to be performed. At minimum, it should contain the following information:

1. Patient name
2. Block number-must be on all blocks, slides and paperwork (can be handwritten on the paperwork)
3. Tissue collection date
4. Source of the tissue

Specimen Requirements:

Preferred:

Specimen Type: Tissue block

Collection Instructions: Submit a formalin-fixed, paraffin-embedded tissue block.

Acceptable:

Specimen Type: Tissue slide

Slides: 1 stained and 5 unstained

Collection Instructions: Submit 1 slide stained with hematoxylin and eosin and 5 unstained, nonbaked slides with 5-micron thick sections of the tumor tissue.

Specimen Minimum Volume:

See Specimen Required

Forms:

If not ordering electronically, complete, print, and send an Oncology Test Request (T729) with the specimen.

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

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
608306	Result Summary	Alphanumeric		50397-9
608307	Result	Alphanumeric		97025-1
608308	Interpretation	Alphanumeric		69047-9
608309	Additional Information	Alphanumeric		48767-8
608310	Specimen	Alphanumeric		31208-2
608311	Source	Alphanumeric		31208-2
608312	Released By	Alphanumeric		18771-6
608235	Method	Alphanumeric		85069-3
608222	Tissue ID	Alphanumeric		80398-1
606746	Disclaimer	Alphanumeric		62364-5

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

81210
88381-Microdissection, manual

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
SLIRV	Slide Review in MG			Yes	No (Bill Only)

Reference Values:

An interpretive report will be provided.