Reporting Title: PV (JAK2 V617F, Exon 12-15) Reflex
Performing Location: Rochester

Shipping Instructions:
Specimen must arrive within 5 days of collection.

Specimen Requirements:
Submit only 1 of the following specimens:

Specimen Type: Blood
Container/Tube: Lavender top (EDTA) or yellow top (ACD-B)
Specimen Volume: 10 mL
Collection Instructions:
1. Invert several times to mix blood.
2. Send whole blood specimen in original tube. Do not aliquot.
3. Label specimen as blood.

Specimen Type: Bone marrow aspirate
Container/Tube: Lavender top (EDTA) or yellow top (ACD-B)
Specimen Volume: 4 mL
Collection Instructions:
1. Invert several times to mix blood.
2. Send bone marrow specimen in original tube. Do not aliquot.
3. Label specimen as bone marrow.

Specimen Minimum Volume:
Blood: 8 mL; Bone marrow: 2 mL

Forms:
If not ordering electronically, complete, print, and send a Hematopathology/Cytogenetics Test Request (T726) with the specimen.

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	5 days	
	Ambient	5 days	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
PVJAK	MP037	Specimen Type	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
42395	PV Reflex Result	Alphanumeric		43399-5
MP037	Specimen Type	Alphanumeric		31208-2
42394	Final Diagnosis	Alphanumeric		50398-7

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:

81270-JAK2 V617
0027U (if appropriate)

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
JAKXR	JAK2 Exon 12-15 Sequencing, Reflex			No	Yes (order JAKXB-blood or JAKXM-bone marrow), Bill Only

Reference Values:

An interpretive report will be provided.