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**Reporting Title:** HER2, Misc. Tumor, FISH, Tissue**Performing Location:** Rochester**Ordering Guidance:**

This test is only performed on specimens from patients with primary or metastatic tumors other than breast or gastroesophageal.

This test is not appropriate if the specimen is derived from primary or metastatic breast carcinoma. See H2BR / HER2 Amplification Associated with Breast Cancer, FISH, Tissue. If this test is ordered and the laboratory is informed that the specimen is a primary or metastatic breast carcinoma, it will be canceled and automatically reordered by the laboratory as H2BR.

This test is not appropriate if the specimen is derived from primary or metastatic gastroesophageal carcinoma. See H2GE / HER2 Amplification Associated with Gastroesophageal Cancer, FISH, Tissue. If this test is ordered and the laboratory is informed that the specimen is a primary or metastatic gastroesophageal carcinoma, it will be canceled and automatically reordered by the laboratory as H2GE.

This test does not include a pathology consult. If a pathology consultation is requested, order PATHC / Pathology Consultation, and the appropriate testing will be added at the discretion of the pathologist and performed at an additional charge.

**Shipping Instructions:**

Advise Express Mail or equivalent if not on courier service.

**Necessary Information:**

1. A pathology report is required for testing to be performed. If not provided, appropriate testing and/or interpretation may be compromised or delayed. Acceptable pathology reports include working drafts, preliminary pathology, or surgical pathology reports.
2. The following information must be included in the report provided:
  - Patient name
  - Block number - must be on all blocks, slides, and paperwork
  - Date of collection
  - Tissue source
  - Fixation used AND time in fixation (recommended: >6 hours and <72 hours).
3. 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 Requirements:**

Submit only 1 of the following specimens:

Preferred

Specimen Type: Tissue block

Collection Instructions: Submit a formalin-fixed, paraffin-embedded tumor tissue block. Blocks prepared with alternative fixation methods may be acceptable; provide fixation method used.

Acceptable

Specimen Type: Tissue slides

Slides: 1 Hematoxylin and eosin stained and 4 unstained

Collection Instructions: Submit 1 slide stained with hematoxylin and eosin and 4 consecutive, unstained, positively charged, unbaked slides with 5-micron-thick sections of the tumor tissue. Slides cut from blocks prepared with alternative fixation methods may be acceptable; provide fixation method used.

**Specimen Minimum Volume:**

Slides: 1 Hematoxylin and eosin stained and 2 unstained

**Forms:**

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

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

**Ask at Order Entry (AOE) Questions:**

Test ID	Question ID	Description	Type	Reportable
H2MT	GC032	Reason for Referral	Plain Text	Yes

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
603096	Result Summary	Alphanumeric		50397-9
603097	Interpretation	Alphanumeric		69965-2
603098	Result	Alphanumeric		62356-1
GC032	Reason for Referral	Alphanumeric		42349-1
603099	Specimen	Alphanumeric		31208-2
603100	Source	Alphanumeric		85298-8
603101	Tissue ID	Alphanumeric		80398-1
603102	Fixative	Alphanumeric		8100-0

Result ID	Reporting Name	Type	Unit	LOINC®
603103	Method	Alphanumeric		85069-3
603104	Additional Information	Alphanumeric		48767-8
603105	Disclaimer	Alphanumeric		62364-5
603106	Released By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

88377

**Reference Values:**

An interpretative report will be provided.