BCR/ABL1, p190, mRNA Detection, Reverse Transcription-PCR (RT-PCR), Quantitative, Monitoring Assay, Varies

Test Definition: BA190

Reporting Title: BCR/ABL1, p190, Quant, Monitor **Performing Location:** Rochester

MAYO CLINIC

BORATORIES

Ordering Guidance:

This test should not be used to screen for BCR/ABL1 fusions at the time of diagnosis; order either BADX / BCR/ABL1, Qualitative, Diagnostic Assay, Varies; or BCRFX / BCR/ABL1 Qualitative Diagnostic Assay with Reflex to BCR/ABL1 p190 Quantitative Assay or BCR/ABL1 p210 Quantitative Assay, Varies should be ordered for that purpose.

To monitor patients carrying BCR/ABL1 fusion forms coding for the p210 protein, which includes most patients with chronic myeloid leukemia (CML); order BCRAB / BCR/ABL, p210, mRNA Detection, Reverse Transcription-PCR (RT-PCR), Quantitative, Monitoring Chronic Myeloid Leukemia (CML), Varies.

Shipping Instructions:

Refrigerate specimens must arrive within 5 days (120 hours) of collection, and ambient specimens must arrive within 3 days (72 hours) of collection. Collect and package specimen as close to shipping time as possible.

Necessary Information:

Pertinent clinical history including if the patient has a diagnosis of chronic myeloid leukemia or other BCR/ABL1-positive neoplasm information is required.

Specimen Requirements:

Submit only 1 of the following specimens:

Preferred: Specimen Type: Whole blood Container/Tube: Preferred: Lavender top (EDTA) Acceptable: Yellow top (ACD) 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 Container/Tube: Preferred: Lavender top (EDTA) Acceptable: Yellow top (ACD) Specimen Volume: 4 mL Collection Instructions: 1. Invert several times to mix bone marrow.

2. Send bone marrow specimen in original tube. Do not aliquot.

3. Label specimen as bone marrow.



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Specimen Minimum Volume:

Blood: 8 mL Bone marrow: 2 mL

Forms:

1. Hematopathology Patient Information (T676)

2. 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	PURPLE OR PINK TOP/EDTA
	Ambient	72 hours	PURPLE OR PINK TOP/EDTA

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Туре	Reportable
BA190	MP002	Specimen Type	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Туре	Unit	LOINC®
39470	BCR/ABL1 p190 Result	Alphanumeric		No LOINC Needed
MP002	Specimen Type	Alphanumeric		31208-2
19765	Interpretation	Alphanumeric		69047-9

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

Supplemental

CPT Code Information:

81207



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Reference Values:

The presence or absence of the BCR/ABL1 messenger RNA fusion form producing the p190 fusion protein is reported. If positive, the level is reported as the ratio of BCR/ABL1 (p190) transcript to ABL1 transcript in the form of a percentage.