



**MAYO CLINIC**  
Mayo Medical Laboratories

**1-800-533-1710**

## **TEST ALGORITHM CHANGE**

**NOTIFICATION DATE:** September 29, 2009

**EFFECTIVE DATE:** October 27, 2009

### **CHROMOSOME ANALYSIS, AUTOPSY, PRODUCTS OF CONCEPTION, OR STILLBIRTH #8887**

**EXPLANATION:** In approximately 20% of fresh tissue specimens of products of conception, autopsy, or stillbirth, chromosome analysis (test #8887) is not possible due to the absence of viable cells and a failure of cell culture. In these situations, test #8887 is resulted at no charge and reflex FISH studies (test #81081) "Aneuploidy Detection, Products of Conception (POC), FISH" are performed.

Effective October 27, 2009, the reflexed FISH test will have a new test code. The new reflex test will be #29924 "Aneuploidy Reflex, Products of Conception (POC), FISH."

**NOTE:** The new reflex FISH test, #29924, will not be orderable as a stand-alone test. However, the same FISH panel may be ordered, as test #81081, on paraffin-embedded tissue only.

**LIST FEE:** \$883.20 for test #29924

**QUESTIONS:** Contact your Mayo Medical Laboratories' Regional Manager  
Mark Kjer, Mayo Medical Laboratories' Technologist Support  
Telephone: 800-533-1710



# TEST DEFINITION

9/29/2009

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
8887	11/21/2008		CHROMOSOME, AUTOPSY/CONCEP/STILLBIR			MCR
		16095	TRANSPORT TEMP : REFRIG\AMBIENT OK\FROZEN NO SPECIMEN			
		16331	SPECIMEN ID			
		16786	SOURCE			
		16096	ORDER DATE			
		50471	BANDING METHODS			
		16100	METHOD			
		16101	REASON FOR REFERRAL			
		16102	RESULTS			
		16103	INTERPRETATION			
		16104	AMENDMENT			
		16105	CONSULTANT			
		16106	REPORT DATE			

\*PERFORMING SITE LEGEND

MCR MAYO CLINIC DPT OF LAB MED & PATHOLOGY  
200 FIRST STREET SW  
ROCHESTER, MN 55905

LAB DIRECTOR: FRANKLIN R. COCKERILL, III, M.D.

MESSAGES USED AS NORMALS

CODE TEXT

TOTAL OF 0 NORMALS CODES

\*\*\* END OF REPORT \*\*\*



# TEST DEFINITION

9/29/2009

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
29924	7/6/2009		ANEUPLOIDY REFLEX, POC, FISH UNIT CODE ALWAYS MESSAGE - [ZASR] ANALYTE SPECIFIC REAGENT THIS TEST WAS DEVELOPED AND ITS PERFORMANCE CHARACTERISTICS DETERMINED BY LABORATORY MEDICINE AND PATHOLOGY, MAYO CLINIC. THIS TEST HAS NOT BEEN CLEARED OR APPROVED BY THE U.S. FOOD AND DRUG ADMINISTRATION. TRANSPORT TEMP : REFRIG\AMBIENT OK\FROZEN NO			MCR
			50677 SPECIMEN			
			50678 SPECIMEN IDA			
			50679 SOURCE			
			50680 ORDER DATE			
			50681 REASON FOR REFERRAL			
			50682 METHOD			
			50683 RESULT			
			50684 INTERPRETATION			
			50685 AMENDMENT			
			50686 REVIEWED BY			
29924			50687 RELEASE DATE			

\*PERFORMING SITE LEGEND

MCR MAYO CLINIC DPT OF LAB MED & PATHOLOGY  
200 FIRST STREET SW ROCHESTER, MN 55905

LAB DIRECTOR: FRANKLIN R. COCKERILL, III, M.D.

1-800-533-1710

<b>PATIENT NAME</b> TESTING, MICHELLE		<b>PATIENT NUMBER</b>		<b>AGE</b> 33	<b>SEX</b> F	<b>ACCESSION #</b> G9135792
<b>ORDERING PHYSICIAN</b>		<b>CLIENT ORDER #</b>			<b>ACCOUNT #</b> LIAISONS	
<b>COLLECTION</b> 09/28/09 01:40 P	<b>RECEIVED</b> 09/28/09 01:40 P	<b>REPORT PRINTED</b> 09/29/09 01:49 P		<b>SPECIMEN INFORMATION</b> DATE OF BIRTH:		
<b>DATE</b> <b>TIME</b>	<b>DATE</b> <b>TIME</b>	<b>DATE</b> <b>TIME</b>				
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI	LO	REF RANGE	PERFORM SITE *
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**Chromosome, Autopsy/Concep/Stillbir**

<b>Specimen</b>		<b>MCR</b>
Products of Conception		
<b>Specimen ID</b>	1048202	<b>MCR</b>
<b>Order Date</b>	29 Sep 2009 09:41	<b>MCR</b>
<b>Method</b>	Fibroblast culture	<b>MCR</b>
<b>Reason For Referral</b>		<b>MCR</b>
r/o chromosome abnormality		
<b>Results</b>		<b>MCR</b>
Insufficient number of suitable metaphases		
<b>Interpretation</b>		<b>MCR</b>
No chromosome results were obtained. In our experience, fibroblast cultures are unsuccessful in approximately 20% of products of conception, either due to the lack of viable cells or microbial contamination. Results of FISH aneuploidy studies are reported separately.		
<b>Consultant</b>		<b>MCR</b>
Erik Carl Thorland PhD		
<b>Report Date</b>	29 Sep 2009 10:50	<b>MCR</b>

**Aneuploidy Reflex, POC, FISH**

<b>Specimen</b>		<b>MCR</b>
Products of Conception		
<b>Specimen ID</b>	1048202	<b>MCR</b>
<b>Order Date</b>	29 Sep 2009 09:41	<b>MCR</b>
<b>Reason For Referral</b>		<b>MCR</b>
r/o chromosome abnormality		
<b>Method</b>		<b>MCR</b>
FISH analysis of 100 nuclei with probes for Xcen (DXZ1), Ycen (DYZ3), 13q14 (Rb1), 15cen (D15Z4), 16cen (D16Z3), 18cen (D18Z1), 21q22 (D21S341) and 22q11.2 (BCR).		
<b>Result</b>		<b>MCR</b>

\* Perform Site Legend on last page of report

<b>PATIENT NAME</b> TESTING, MICHELLE	<b>ORDER STATUS</b> Final	<b>COLLECTION DATE AND TIME</b> 09/28/09 01:40 P
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1-800-533-1710

<b>PATIENT NAME</b> TESTING, MICHELLE		<b>PATIENT NUMBER</b>		<b>AGE</b> 33	<b>SEX</b> F	<b>ACCESSION #</b> G9135792
<b>ORDERING PHYSICIAN</b>		<b>CLIENT ORDER #</b>			<b>ACCOUNT #</b> LIAISONS	
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<b>DATE</b> <b>TIME</b>	<b>DATE</b> <b>TIME</b>	<b>DATE</b> <b>TIME</b>				
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
Chromosome	Result		
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XX	normal		
13	normal		
15	normal		
16	normal		
18	normal		
21	normal		
22	normal		

**NOMENCLATURE:**

nuc

ish(DXZ1x2,DYZ3x0,D18Z1x2), (Rb1,D21S341)x2, (D15Z4,D16Z1,BCR)x2

Of 100 nuclei, 100 had 2 DXZ1 and no DYZ3 signal, 100 had 2 D18Z1 signals, 100 had 2 signals for 13q14, 100 had 2 signals for 21q22, 100 had 2 signals for D15Z4, 100 had 2 signals for D16Z3 and 100 had 2 signals for BCR.

**Interpretation**

A normal signal pattern for chromosomes 13, 15, 16, 18, 21, 22 and XX was observed.

This testing is not sufficient to rule out a complete molar pregnancy. A surgical pathology consult on paraffin-embedded tissue (test #5439) is recommended to test for complete molar pregnancy if clinically warranted. If interested in this testing, please call 800-533-1710.

**DISCLAIMER:** This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic Rochester. It has not been cleared or approved by the U.S. Food and Drug Administration. This FISH test does not rule out other chromosome anomalies.

Jalal et al., Mayo Clin Proc 73:132-137, 1998.

Reviewed By

MCR

MCR

\* Perform Site Legend on last page of report

<b>PATIENT NAME</b> TESTING, MICHELLE	<b>ORDER STATUS</b> Final	<b>COLLECTION DATE AND TIME</b> 09/28/09 01:40 P
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1-800-533-1710

<b>PATIENT NAME</b> TESTING, MICHELLE		<b>PATIENT NUMBER</b>		<b>AGE</b> 33	<b>SEX</b> F	<b>ACCESSION #</b> G9135792
<b>ORDERING PHYSICIAN</b>		<b>CLIENT ORDER #</b>				<b>ACCOUNT #</b> LIAISONS
<b>COLLECTION</b> 09/28/09 01:40 P <b>DATE</b> <b>TIME</b>	<b>RECEIVED</b> 09/28/09 01:40 P <b>DATE</b> <b>TIME</b>	<b>REPORT PRINTED</b> 09/29/09      01:49 P <b>DATE</b> <b>TIME</b>		<b>SPECIMEN INFORMATION</b> DATE OF BIRTH:		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
Erik Carl Thorland PhD Release Date                      29 Sep 2009 10:50 Analyte Specific Reagent This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic. This test has not been cleared or approved by the U.S. Food and Drug Administration.			MCR

## \* PERFORMING SITE

MCR      Mayo Clinic Dpt of Lab Med & Pathology 200 First Street SW    Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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<b>PATIENT NAME</b> TESTING, MICHELLE	<b>ORDER STATUS</b> Final	<b>COLLECTION DATE AND TIME</b> 09/28/09 01:40 P
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