Reporting Title: KIT, Mutation Analysis, Ex17
Performing Location: Rochester

Specimen Requirements:

A pathology/diagnostic report including a brief history is required. If available, include KIT Immunostain results.

Specimen Type:
Preferred: Formalin-fixed, paraffin-embedded (FFPE) tissue block with a minimum of 60% tumor cell population
Acceptable: Unstained slides with a minimum of 60% tumor population; slides may be stained and/or scraped
Collection Instructions:
1. Process all fresh or frozen specimens into FFPE blocks prior to submission.
2. When a FFPE block is not available or processing cannot be performed, a frozen specimen shipped on dry ice will be accepted and will be processed by the laboratory into a FFPE block prior to testing.
3. If submitting slides, a minimum of ten, 4- to 5-micron thick, unstained slides are required.
Additional Information:
1. A quality specimen is essential for evaluation. Submit only tissue containing tumor cells; minimal tissue is required for evaluation.
2. Special stains performed outside Mayo Medical Laboratories and included with the case may be repeated and charged at the reviewing pathologist's discretion. Testing requested by referring physician may not be performed if deemed unnecessary by Mayo Clinic pathologist.

Specimen Type	Temperature	Time
Varies	Ambient (preferred)	
	Refrigerated	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
88957	KIT, Mutation Analysis, Ex17			

Components:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
Billing only	Enzymatic Digestion	1	83892		
Billing only	Amplification, target, each nucleic acid sequence	1	83898		
Billing only	Mutation ID by sequencing, single segment	1	83904		

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
Billing only	Lysis of cells prior to nucleic acid extraction	1	83907		
Billing only	Interpretation and Report	1	83912		
Billing only	Molecular diagnostics, nucleic acid probe, each	2	83896		

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
20422	Pre-Analytic Process, MAP Lab	1	83891	Yes	No
60254	AP Special Studies Review			Yes	No

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
20422	20422	DNA/RNA Extraction, MAP Lab			
60254	20365	Accession Number			
60254	20366	Referring Pathologist/Physician			46608-6
60254	20367	Ref Path/Phys Address			
60254	20368	Place of Death:			21987-3
60254	20369	Date and Time of Death:			
60254	20370	Date of Autopsy:			
60254	20371	Specimen:			31208-2
60254	20372	Material:			
60254	20373	Tissue Description:			22634-0
60254	20374	Microscopic Description:			
60254	20375	Clinical History:			
60254	20376	Final Diagnosis:			34574-4
60254	20377	Final Diagnosis:			
60254	20378	Comment:			
60254	20379	Revision Description:			

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
60254	20380	Signing Pathologist:			
60254	20381	Special Procedures:			
60254	20382	SP Signing Pathologist:			
60254	20383	*Previous Report Follows*			
60254	20384	Addendum:			35265-8
60254	20385	Addendum Comment:			22638-1
60254	20386	Addendum Pathologist:			19139-5

Reference Values:

Negative