



MAYO
Mayo Medical Laboratories
1-800-533-1710

NEW TEST ANNOUNCEMENT

NOTIFICATION DATE: August 2, 2012

EFFECTIVE DATE: August 8, 2012

BRAF Mutation Analysis (V600), Melanoma Test ID: BRAFM

USEFUL FOR: Identification of melanoma tumors that may respond to *BRAF*-targeted therapies

METHODOLOGY: Polymerase Chain Reaction (PCR) Analysis

REFERENCE VALUES: An interpretative report will be provided.

SPECIMEN REQUIREMENTS: Submit formalin-fixed, paraffin-embedded tissue block (preferred) or 1 slide stained with hematoxylin-and-eosin and 5 unstained, non-baked slides (5-micron thick sections) of the tumor tissue. Sections should contain both tumor and normal tissue.

NOTE: Pathology report **must** accompany specimen in order for testing to be performed.

SPECIMEN STABILITY INFORMATION:

Specimen Type	Temperature	Time
varies	Ambient (preferred)	
	Frozen	
	Refrigerated	

CAUTIONS:

- Not all patients that have *BRAF* mutations respond to *BRAF*-targeted therapies.
- Rare polymorphisms exist that could lead to false-negative or false-positive results.
- Test results should be interpreted in context of clinical findings, tumor sampling, and other laboratory data. If results obtained do not match other clinical or laboratory findings, please contact the laboratory for possible interpretation. Misinterpretation of results may occur if the information provided is inaccurate or incomplete.

FEE: Please contact your Regional Manager for your account's fee information.

CPT CODE:

81210-*BRAF* (v-raf murine sarcoma viral oncogene homolog B1), Melanoma FDA approved Cobas assay

DAY(S) SET UP: Monday through Friday, varies **ANALYTIC TIME:** 5 days

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager or Marvin H. Anderson, Jr., MML Laboratory Technologist Resource Coordinator
Telephone: 800-533-1710