MAYO CLINIC
Mayo Medical Laboratories

LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME	PATIENT NUMBER	AGE	SEX	ACCESSION #
TESTING, FCHIC2	L3MRNG9164320	28	M	G9164320

ORDERING PHYSICIAN	CLIENT ORDER #	ACCOUNT #
		LIAISONS

COLLECTION DATE TIME	RECEIVED DATE TIME	REPORT PRINTED DATE TIME	SPECIMEN INFORMATION
02/09/11 08:15 A	02/09/11 08:15 A	03/09/11 08:08 A	DATE OF BIRTH: 1/28/1983

Test Client
Attn: Mayo Liaisons
200 First Street SW
Rochester, MN 55905
507-284-8202

TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *

CHIC2, 4q12 Deletion, FISH — **REPORTED: 02/09/11 08:20 A**

Specimen	**Bone Marrow**	**MCR**
Specimen ID	**1053458**	**MCR**
Source	**Fixed cells**	**MCR**
Order Date	**09 Feb 2011 08:16**	**MCR**

Reason For Referral — **MCR**

leukemia new diagnosis

Method — **MCR**

FISH for CHIC2 anomalies with probes for 4q12 (FIP1L1, CHIC2, PDGFRA).

Results — **MCR**

nuc ish(FIP1L1x2,CHIC2x1,PDGFRAx2)[194/200]
97.0% of nuclei had one CHIC2, two FIP1L1 and two PDGFRA signals. The normal cutoff is <2.5% for 1 CHIC2, 2 FIP1L1 and 2 PDGFRA signals.

Interpretation — **MCR**

The result is abnormal and indicates 97.0% of nuclei have a deletion involving the CHIC2 gene region with retention of the PDGFRA/FIP1L1 gene regions. This abnormality is usually associated with a chronic myeloproliferative disorder with associated eosinophilia. Patients with a CHIC2 deletion and PDGFRA/FIP1L1 fusion reportedly respond to targeted therapy, such as imatinib mesylate. Pardanani et al. Blood. 102(9):3093-3096, 2003.
For monitoring response to therapy in this patient, we suggest using FISH for CHIC2.
DISCLAIMER: This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic, Rochester, MN. It has not been cleared or approved by the U.S. Food and Drug Administration. This FISH test does not rule out other

** Perform Site Legend on last page of report*

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, FCHIC2	Final	02/09/11 08:15 A

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Rochester, MN 55905
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TEST REQUESTED	HI LO	REF RANGE	PERFORM SITE *
chromosome abnormalities.			
Consultant	**Heather Lynn Owen**		**MCR**
Report Date	**09 Feb 2011 08:18**		**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.

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, FCHIC2	Final	02/09/11 08:15 A

Specimen receipt and report times are in CST/CDT

REPRINT