



Test Catalog

Diagnostic. Prognostic. Predictive. Predisposition.



IGL/MYC t(8;22) Translocation

Alternative Name

IGL/MYC Translocation

Methodology

FISH

Test Description

Probes: IGL/MYC t(8;22)

Disease(s): B-cell lymphoma, double-hit lymphoma, triple-hit lymphoma

Clinical Significance

IGL/MYC translocation is observed recurrently in B-cell lymphomas, and when occurred concurrently with BCL2 and/or BCL6 rearrangement, is classified as double-hit/triple-hit lymphomas having a very poor prognosis.

Specimen Requirements

- **Bone Marrow Aspirate:** 1-2mL Sodium Heparin Tube. EDTA tube is acceptable
- **Peripheral Blood:** 2-5mL Sodium Heparin Tube. EDTA tube is acceptable
- **Fresh, Unfixed Tissue:** Tissue in RPMI
- **Bone Marrow/Peripheral Blood Smear or Fresh Tissue Preparation Slides:** minimum 1 slide labeled with specimen type.
- **Fluids:** Equal parts RPMI to specimen volume
- **Paraffin Block:** H&E slide (required) plus paraffin block. Circle H&E for tech-only.
- **Cut Slides:** H&E slide (required) plus 2 unstained slides cut at 4 microns. Circle H&E for tech only.

Storage & Transportation

Refrigerate specimen. Do not freeze. Use cold pack for transport, making sure cold pack is not in direct contact with specimen.

CPT Code(s)*

88374x1 automated or 88377x1 manual

New York Approved

Yes

Level of Service

Global, Technical

Turnaround Time

3-5 days

*The CPT codes provided with our test descriptions are based on AMA guidelines and are for informational purposes only. Correct CPT coding is the sole responsibility of the billing party.

Please direct any questions regarding coding to the payor being billed.

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Committed to research as the means to improve patient care, we provide Pharma Services for pharmaceutical companies, in vitro diagnostic manufacturers, and academic scientist-clinicians. We promote joint publications with our client physicians. NeoGenomics welcomes your inquiries for collaborations. Please contact us for more information.

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