



# Test Catalog

Diagnostic. Prognostic. Predictive. Predisposition.



## RUNX1-RUNX1T1 (AML1-ETO) Translocation, t(8;21)

### Alternative Name

RUNX1-RUNX1T1 Translocation, RUNX1-RUNX1T1 Fusion, AML1-ETO Translocation, AML1-ETO Fusion

### Methodology

Molecular

### Test Description

Real-time RT-PCR for quantitative detection of the t(8;21) RUNX1-RUNX1T1 fusion transcript (formerly called AML1-ETO). Analytical sensitivity is 1 tumor cell in 100,000 normal cells. Positive results are reported as a ratio between quantities of (8;21) transcript and a normal control gene.

### Clinical Significance

The (8;21) translocation occurs in approximately 5% of AML. These cases are usually considered core-binding factor AML (CBF-AML). The translocation is usually associated with a high rate of complete remission and longer overall survival in AML subtype M2. This assay is recommended for diagnostic confirmation of and for monitoring minimal residual disease (MRD). c-KIT mutation testing may be considered for t(8;21)-positive AML patients as c-KIT mutations are considered an adverse risk factor in these patients.

### Specimen Requirements

- **Peripheral blood:** 5 mL in EDTA tube.
- **Bone marrow:** 2 mL in EDTA tube.

**Note:** Test is RNA-based. Please select Extract & Hold – RNA if specimen hold service is desired.

### Storage & Transportation

Use cold pack for transport, making sure cold pack is not in direct contact with specimen. Ship same day as drawn whenever possible; specimens <72 hours old preferred.

### CPT Code(s)\*

81401

### New York Approved

No

### Level of Service

Global

### Turnaround Time

7 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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