

Test Catalog

Diagnostic. Prognostic. Predictive. Predisposition.



JAK2 (9p24.1)

Methodology FISH

Test Description Probe(s): JAK2 (9p24.1) Disease(s): Eosinophilia Also available as part of <u>ALL FISH Panel (Ph-Like)</u>

Clinical Significance

JAK2 (9p24.1) break-apart test by FISH is useful for detecting JAK2 rearrangements in eosinophilia workup. Eosinophilia is a common feature of the diseases that are recognized by the World Health Organization (WHO) category, "Myeloid/lymphoid neoplasms with eosinophilia and rearrangement of PDGFRA, PDGFRB, or FGFR1, or with PCM1-JAK2."

For analysis of JAK2 mutations for suspected myeloproliferative neoplasms (MPN), consider <u>JAK2 V617F Mutation Analysis</u> with or without reflex to <u>JAK2 Exon 12-14 Mutation Analysis</u> by molecular.

Specimen Requirements

- Bone Marrow Aspirate: 1-2 mL in sodium heparin tube. EDTA tube is acceptable.
- Peripheral Blood: 2-5 mL sodium heparin tube. EDTA tube is acceptable.
- Fresh, Unfixed Tissue: Tissue in RPMI
- Bone Marrow/ Peripheral Blood Smear or Fresh Tissue Touch Preparation Slides: minimum 1 slide labeled with specimen type.
- Fluids: Equal parts RPMI to specimen volume.
- Fixed Cell Suspension: A client fixed cell suspension may be submitted for testing as long as it is received in 3:1 Methanol:Glacial Acetic Acid.
- Paraffin Block or Cut Slides: Not Available
- Note: Please exclude biopsy needles, blades, and other foreign objects from transport tubes. These can compromise specimen viability and yield, and create hazards for employees.

Storage & Transportation

Refrigerate specimen. Do not freeze. Use cold pack for transport, making sure cold pack is not in direct contact with specimen. For fresh samples: ship same day as drawn whenever possible; specimens <72 hours old preferred.

CPT Code(s)*

88374x1 automated or 88377x1 if manual analysis is performed.

New York Approved

Yes

Level of Service

Technical, Global

Turnaround Time 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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