Lab Dept: Anatomic Pathology

Test Name: CHROMOSOMES, BONE MARROW

General Information

Lab Order Codes: CBOM

Synonyms: Bone Marrow Chromosome

CPT Codes:
- 88237 - Tissue culture for neoplastic disorders; bone marrow, blood cells
- 88262-26 - Chromosome analysis; count 15-20 cells, 2 karyotypes, with banding (if appropriate)
- 88264 - Chromosome analysis; analyze 20-25 cells
- 88280 - Chromosome analysis; additional karyotypes, each study
- 88280-26 - Chromosome analysis; additional karyotypes, each study (if appropriate)

Test Includes: Chromosome karyotype

Logistics

Test Indications: Useful for detecting malignant and premalignant hematologic disorders, residual disease, and as a preliminary test for bone marrow transplant.

Lab Testing Section: Anatomic Pathology - Sendouts

Referred to: Fairview-University Diagnostic Laboratories (Test: BMCHRMB)

Phone Numbers:
- MIN Lab: 612-813-6711
- STP Lab: 651-220-6560

Test Availability: Daily, 24 hours

Turnaround Time: Results are reported within 2-21 days

Special Instructions: Request form should include date and time of specimen collection, attending physician, diagnosis (or reason for referral), clinical status, information regarding medication or transfusions, and specimen type.

Specimen

Specimen Type: Bone Marrow aspirate or trephine biopsy
**Container:**

- Bone marrow aspirate: Collect in sterile sodium heparin syringe.
- Bone marrow biopsy: Collect in sterile specimen cup with tissue culture medium.

**Draw Volume:**

5 mL (Minimum: 3 mL) aspirate; 1 cm trephine biopsy

**Processed Volume:**

Same as Draw Volume

**Collection:**

If aspiration is impossible, a trephine biopsy should be obtained. Collect 5 mL of Na heparinized peripheral blood in addition to the bone marrow in all cases of newly diagnosed Acute Leukemia and Chronic Lymphocytic Leukemia.

**Special Processing:**

Store at room temperature. **Do Not** refrigerate of freeze. Ship at room temperature. Must arrive within 24 hours.

**Patient Preparation:**

Physician preference

**Sample Rejection:**

Clotted bone marrow

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**Interpretive**

**Reference Range:**

46, XX or 46, XY

**Methodology:**

Determined by laboratory director based on clinical information.

**References:**

Fairview-University Diagnostic Laboratory Web Page  
[http://labguide.fairview.org/diagnostic.asp](http://labguide.fairview.org/diagnostic.asp)

**Updates:**

12/7/2015: Order code update CBM to CBOM.