
Lab Dept: **Anatomic Pathology**

Test Name: **CHROMOSOMES, LEUKEMIC BLOOD (FAIRVIEW)**

General Information

Lab Order Codes: CHRB

Synonyms: Leukemic Chromosome Analysis to Fairview

CPT Codes: 88237 - Tissue culture for neoplastic disorder; bone marrow, blood cells
88264 - Chromosome analysis; analyze 20-25 cells
88280 - Chromosome analysis; additional karyotypes, each study

Test Includes: Leukemic Blood Chromosome interpretive report

Logistics

Test Indications: N/A

Lab Testing Sections: Anatomic Pathology – Sendouts

Referred to: Fairview University Medical Center – Cytogenetics Lab (test CYHOLD)

Phone Numbers: MIN Lab: 612-813-6280

STP Lab: 651-220-6550

Test Availability: Daily, 24 hours

Turnaround Time: 2 - 21 days testing performed Monday - Friday

Special Instructions: Request form must 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: Whole Blood

Container: Green top (sodium heparin, no gel) tube

Draw Volume: 10 mL (Minimum: 5 mL) blood

Processed Volume: Same as Draw Volume

Collection: Routine Venipuncture

Special Processing: Lab Staff: Do Not Centrifuge. Specimen should remain in the original collection container. Store and ship at room temperature. **Specimen must arrive at Fairview within 24 hours of collection.**

Patient Preparation: N/A

Sample Rejection: Clotted or frozen sample; mislabeled or unlabeled specimens.

Interpretive

Reference Range: An interpretive report will be provided

Critical Values: N/A

Limitations: N/A

Methodology: Determined by laboratory director based on clinical information.

References: [Fairview Diagnostic Laboratories](#) July 2009