
Lab Dept: **Anatomic Pathology**

Test Name: **FISH LOCUS FAIRVIEW UNIVERSITY (SPECIFY DISEASE TYPE)**

General Information

Lab Order Codes: FISUM

Synonyms: Fluorescent in Situ Hybridization; FISH Locus Specific; Multicolor FISH; Spectral Karyotype Multicolor

CPT Codes: 88273 – Chromosomal in situ hybridization, analyze 10-30 cells
88271 – Molecular cytogenetics, DNA probe, each

Test Includes: Please indicate one of these specific diseases on order:
1 p telomere/p58 (1p36 microdeletion)
NPHP1 (2q13)
5p15.2 Cri du Chat
PTCH1 (9q22.32) Nevoid basal cell carcinoma
EHMT1 (9q34.3) Kellfstra syndrome
PTEN (10q23.31) Autism
PAX6 (11p13) Aniridia
WT1 (11p13) WAGR syndrome
ELP4 (11p13) Epilepsy
RB1 (13q14) Retinoblastoma
7q11.23 William's syndrome
SNRPN-UBE3a (15q11.2) Prader Willi/Angelman
TBX6 (16p11.2) Autism, 16p11.2 microdel/microdup
TP53 (17p13) Li Fraumeni syndrome
HIRA (22q11.2)/ARSA (22q13.3) 22q11.2 del/22q13.3 del
SHANKS (22q13.33) 22q13.3 del Autism
Centromere X/SRY (Yp11.2) Ambiguous genitalia
Centromere X/Centromere Y Turner Klinefelter/Mosaicism
Rule out Trisomy 12,18,21
1p telomere/p58 (1p36 microdeletion)
NPHP1 (2q13) Juvenile nephronitis
5p15.2 Cri du Chat

Logistics

Test Indications: N/A

Lab Testing Sections: Anatomic Pathology – Sendouts

Referred to: Fairview University Cytogenetics

Phone Numbers: MIN Lab: 612-813-6280

STP Lab: 651-220-6550

Test Availability:	Daily
Turnaround Time:	Results in 29 days
Special Instructions:	Special tube required. See Container , contact the laboratory for appropriate tube.

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. Forward specimen to Send Outs. Store and ship at room temperature. Must arrive at reference lab within 24 hours of collection. Order in Atlas and include collect date/time, ordering MD, specimen type, diagnosis/reason for referral.
Patient Preparation:	None
Sample Rejection:	Improper storage, mislabeled or unlabeled specimen

Interpretive

Reference Range:	An interpretive report will be provided
Critical Values:	N/A
Limitations:	N/A
Methodology:	Methodology is determined by lab director based on clinical indications.
References:	Fairview University Laboratories September 2010
Updates:	2/5/2013: CPT update 5/15/2019: Updated locus list