

Order Name: AML INV 16
Test Number: 9116175
Revision Date: 10/01/2022

TEST NAME			METHODOLOGY	LOINC CODE
AML, Inversion 16 by FISH		Fluorescence in Situ Hybridization		
SPECIMEN REQUIRE	MENTS			
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	5 mL (1 mL)	Bone Marrow	Sodium Heparin (Green Top, No-Gel)	Room Temperature
Alternate 1	5 mL (3 mL)	Whole Blood	Sodium Heparin (Green Top, No-Gel)	Room Temperature
Instructions	Send specimen ASAP, Keep at	t room temperature! (DO NOT	FREEZE). Frozen samples will be rejected.	

GENERAL INFORMATION		
Testing Schedule	Mon-Fri	
Expected TAT	3-5 Days	
Clinical Use	[inv(16) or t(16;16)(p13;q22)]; inv(16), AML-M4 CBFB/MYH11 is associated with acute myeloid leukemia (FAB M4 Eo subtype)	
CPT Code(s)	88377x2	
Service Provided By	labcorp Oklahoma, Inc.	