



GENETICS
ASSOCIATES

INCORPORATED



GENETICS ASSOCIATES, Inc.

1916 Patterson Street, Suite 400

Nashville, TN 37203

Business Hours

Monday through Friday

7:00 a.m. to 6:00 p.m. (CST)

Saturday

8:00 a.m. to 2:00 p.m. (CST)

***After hours, calls are answered by a licensed
technologist**

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Toll Free: 800-331-4363

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History of Genetics Associates

Genetics Associates was established in 1990, with the goal of providing high quality, efficient, economical, and state of the art cytogenetic diagnostic services. Our owners and directors bring numerous years of experience to GAI and work side by side with their team of cytogenetic technologists and support staff. GAI believes in building relationships by paying close attention to the needs of our clients. Our strengths include providing results in a timely fashion, a highly-skilled, experienced staff and a reputation for quality service.

OUR MISSION

To be the cytogenetic laboratory and information resource of choice for physicians who demand accurate, timely, and state of the art cytogenetic diagnostic services for their patients.

To grow and expand our services while maintaining the excellence in quality expected by our physicians, patients, and staff.

To provide our staff with environment that promotes growth, education, fairness, security, and a sense of well-being through leadership, discipline, and belief in our fellow employees.



LICENSURE AND CERTIFICATION

College of American Pathologists
3932401

License #

Clinical Laboratory Improvements Amendments
44D0688266

License #

State of TN Board of Health
0000002299

License #

State of CA Dept. of Public Health
00800301

License # COS

State of FL Agency for Health Care Administration
800011959

License #

Maryland Dept. of Health & Mental Hygiene
Office of Health Care Quality -Medical Laboratory

Permit # 1353

Pennsylvania Clinical Laboratory Permit

Permit # 29942A

Rhode Island & Prov. Plantations Dept. of Health
00272

License # LCO



SPECIMEN COLLECTION



SPECIMEN COLLECTION AND HANDLING GUIDE

Proper specimen collection and handling are essential parts of obtaining an accurate and timely laboratory test result. The purpose of this guide is to describe the proper procedure for specimen collection, labeling, storage, and shipping.

Specimen Identification and Labeling Requirements

Labeling Requirements:

Label all primary specimen containers with at least two patient-specific identifiers.

- Acceptable identifiers include but are not limited to: patient name, date of birth, hospital number, social security number, requisition number, accession number, or unique random number. A hospital room number is not an appropriate patient identifier.
- Label all specimens in the presence of the patient
- Positive identification is the responsibility of the person collecting the sample

Specimen Identification:

Submit a completed order or requisition form with all specimens. Completed orders or requisition forms should contain the following information:

- Full Name of Patient

- Secondary Unique Identifier
- Date of Birth
- Sex of Patient
- Referring Physician
- Facility Name and Address
- Date and Time of Specimen Collection
- Specimen Type
- Referring Diagnosis
- ICD 10 Code
- Appropriate Related Patient History
- Test Requested

Patient Preparation

Many tests require proper patient preparation before collection to ensure a quality specimen for testing. Refer to collection facility's procedures for patient preparation requirements.



SPECIMEN COLLECTION AND HANDLING GUIDE

Specimen Collection and Storage Requirements for Chromosome Analysis, FISH, ICP, and Microarray

Amniotic Fluid:

- Volume: 10-20 ml; discard the first ml of fluid or use for other testing
- Container: Sterile 15 ml centrifuge tube or container
- Storage Conditions: Room temperature, 20 to 22°C (68 - 72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)

Bone Core:

- Volume: N/A
- Container: Sodium Heparin vacutainer or a sterile tube containing sterile transport media

- Invert tube 4-8 times to prevent formation of clots
- Storage Conditions: Room temperature, 20 to 22°C (68 - 72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)

Bone Marrow:

- **Adults**
 - Volume: 2 - 5 ml of bone marrow; from the first or at least the second tap
 - Container: Sodium Heparin vacutainer
 - **DO NOT USE LITHIUM HEPARIN**
 - Invert tube 4 - 8 time to prevent clots
 - Storage Conditions: Room temperature, 20 to 22°C (68 - 72°F)
 - **DO NOT FREEZE SPECIMEN**
- **Children**
 - Volume: 1 - 5 ml of bone marrow; from the first or at least the second tap
 - Container: Sodium Heparin vacutainer
 - **DO NOT USE LITHIUM HEPARIN**
 - Invert tube 4 - 8 time to prevent clots
 - Storage Conditions: Room temperature, 20 to 22°C (68 - 72°F)
 - **DO NOT FREEZE SPECIMEN**

Buccal Swab:

- Volume: Entire Swab (2—if performing Microarray testing)
- Container: Original collection tube, dry.
- Storage Conditions: Room temperature, 20 to 22°C (68 - 72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)



DO NOT FREEZE SPECIMEN

Chorionic Villi:

- Volume: 10-20 mg of chorionic villi
- Container: 15 ml sterile centrifuge tube containing sterile transport media
 - Sterile transport media provided by GAI upon request, sterile media such as RPMI, or sterile saline solution may be used
- Storage Conditions: Room temperature, 20 -22°C (38 - 72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F) o Do Not Freeze
- For locations in the Nashville area and with advanced notice, a cytogenetic technologist may be provided to verify that an adequate sample has been obtained.

Fine Needle Aspirate:

- Volume: Entire aspirate
- Container: 15 ml sterile centrifuge tube containing sterile transport media
 - Sterile transport media provided by GAI upon request, sterile media such as RPMI, or sterile saline solution may be used
 - **DO NOT USE FORMALIN**
- Storage Conditions: Room temperature, 20 -22°C (38 - 72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)
 - **DO NOT FREEZE SPECIMEN**

Lymph Node:

- Volume: Entire lymph node
- Container: Sterile container containing sterile transport media
 - Sterile transport media, provided by GAI upon request, sterile media such as RPMI, or sterile saline solution may be used
 - **DO NOT USE FORMALIN**
- Rinse lymph nodes collected in non-sterile conditions with sterile balanced salts solution, Ringer's lactate, or sterile saline.
- Storage Conditions: Room temperature, 20 -22°C (68 - 72°F) or refrigerated temperature, 2 -8°C (35.6 - 46.4°F)
 - **DO NOT FREEZE SPECIMEN**

Masses / Tumors:

- Volume: Entire mass / tumor
- Container: Sterile specimen cup containing sterile transport media
 - Sterile transport media provided by GAI upon request, sterile media such as RPMI, or balanced salt solution may be used
 - **DO NOT USE FORMALIN**
- Storage Conditions: Room temperature, 20 -22°C (68 - 72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)
 - **DO NOT FREEZE SPECIMEN**



Peritoneal Fluid:

- Volume: 15 -50 ml peritoneal fluid
- Container: 50 ml sterile centrifuge tube or specimen cup
- Storage Conditions: Room temperature, 20 -22°C (68 -72°F) or refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)
 - **DO NOT FREEZE SPECIMEN**

Peripheral Blood:

- **Children - Adults (8 days and up)**
 - Volume: 2 - 5 ml peripheral blood
 - Container: Sodium Heparin vacutainer; Do Not Use Lithium
 - Invert tube 4 - 8 time to prevent clots

- o Storage Conditions: Room temperature, 20 - 22 °C (68 - 72 °F) or refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - **DO NOT FREEZE SPECIMEN**
- **Newborn (0 - 7 days)**
 - o Volume: 1 - 2 ml peripheral blood
 - o Container: Sodium Heparin vacutainer
 - **DO NOT USE LITHIUM HEPARIN**
 - Invert tube 4 - 8 times to prevent clots
 - o Storage Conditions: Room temperature, 20 - 22 °C (68 - 72 °F) or refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - **DO NOT FREEZE SPECIMEN**
- **PUBS (Percutaneous Umbilical Blood Specimen/Cord Blood)**
 - o Volume: 1 - 2 ml PUBS or cord blood
 - o Container: Sodium Heparin vacutainer
 - **DO NOT USE LITHIUM HEPARIN**
 - Invert tube 4 - 8 times to prevent clots
 - o Storage Conditions: Room temperature, 20 - 22 °C (68 - 72 °F) or refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - **DO NOT FREEZE SPECIMEN**

Pleural Fluid:

- Volume: 15 -50 ml pleural fluid
- Container: Sterile centrifuge tube or specimen cup
- Storage Conditions: Room temperature, 20 - 22 °C (68 - 72 °F) or refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - o **DO NOT FREEZE SPECIMEN**



Products of Conception:

- Volume: ≥100 mg of appropriate tissue; If volume is inadequate, all tests requested may not be performed.
 - o Specimen collected should include, by order of preference, one or more of the following: villi, placenta or placental membrane, or recognizable fetal parts.
 - o **Stillborn:** Placenta containing chorionic villi is the preferred tissue; include other tissue as well
 - o **Stillborn or infant autopsy:** Preferred tissues in descending order are: lung, kidney, thymus, skin.
- Rinse tissue collected in non-sterile conditions with sterile balanced salt solution, Ringer's lactate, or sterile saline.
- Container: Sterile container containing sterile transport media
 - o Sterile transport media, provided by GAI upon request, sterile media such as RPMI, or sterile saline solution may be used
 - o Carefully tighten the lid of container to prevent leakage
 - o **DO NOT USE FORMALIN**
- Storage Conditions: Room temperature, 20 -22 °C (68 - 72 °C) or refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - o **DO NOT FREEZE SPECIMEN**

Slides (Paraffin Embedded Tissue):

- Volume: Submit 2 slides per probe requested
 - Cut specimen 3 - 4 μ thick.
 - Use positively charged slides.
- Submit H & E slides marked with the area of interest.
- Storage Conditions: Room temperature, 20 - 22 °C (68 - 72 °F)

Tissue, Solid (Constitutional):

- Volume: 3mm³ tissue biopsy
- Container: Sterile specimen cup containing sterile transport media
 - Sterile transport media provided by GAI upon request, sterile media such as RPMI, or balanced salt solution may be used
 - **DO NOT USE FORMALIN**
- Storage Conditions: Room temperature, 20 - 22 °C (68 - 72 °F) or refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - **DO NOT FREEZE SPECIMEN**

Urine:

- Volume: \geq 33 ml of urine
- Container: Sterile container
 - Carefully tighten the lid of the container to prevent leakage
- Storage Conditions: Refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - **DO NOT FREEZE SPECIMEN**



Specimen Collection and Storage Requirements for Molecular Testing (DNA Based Testing)

IgVH Hypermutation

JAK2

B Cell & T Cell Clonality

NGS

Thrombophilia

Breast Milk Identity

Bone Marrow:

- Volume: 1.5 - 5ml bone marrow; from the first or at least second tap
- Container: EDTA (purple top) vacutainer
 - Sodium Heparin tube can be used but is not preferred
 - Invert tube 4 - 8 times to prevent clots
- Storage Conditions: Refrigerated temperature, 2 - 8 °C (35.6 - 46.4 °F)
 - **DO NOT FREEZE SPECIMEN**
- Specimen must be received in the lab within 72 hours of draw

Breast Milk:

- Volume: 5-10 mL
- Container: Sterile DNase/RNase free 15 mL centrifuge tube
- Storage Conditions: Refrigerated temperature, 2-8°C (35.6-46.6°F) or frozen temperature, -25 to -15°C (-13 to 5°F)
 - o If specimen is frozen and thawed prior to preparing aliquot for GAI, do not re-freeze specimen, send at refrigerated temperature, 2-8°C (35.6-46.6°F)

Buccal Swab:

- Volume: Entire Swab (1)
- Container: Original collection tube, dry.
- Storage Conditions: Room temperature, 20-22°C (68-72°F) or refrigerated temperature, 2-8°C (35.6-46.6°F)
 - o **DO NOT FREEZE SPECIMEN**

Peripheral Blood:

- Volume: 2 - 5 ml peripheral blood
- Container: EDTA (purple top) vacutainer
 - o Sodium Heparin tube can be used but is not preferred
 - o Invert tube 4 - 8 times to prevent clots
- Storage Conditions: Refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)
 - o **DO NOT FREEZE SPECIMEN**



Specimen must be received in the lab within 72 hours of draw

Specimen Collection and Storage Requirements for Molecular Testing (RNA Based Testing)

BCR/ABL1 p210
BCR/ABL 1 p190

Bone Marrow:

- Volume: 1.5 - 5ml bone marrow; from the first or at least second tap
- Container: EDTA (purple top) vacutainer
 - o Sodium Heparin tube can be used but is not preferred
 - o Invert tube 4 - 8 times to prevent clots
- Storage Conditions: Refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)
 - o **DO NOT FREEZE SPECIMEN**
- Specimen must be received in the lab within 72 hours of draw

Peripheral Blood:

- Volume: 2 - 5 ml peripheral blood
- Container: EDTA (purple top) vacutainer
 - o Sodium Heparin tube can be used but is not preferred
 - o Invert tube 4 - 8 times to prevent clots
- Storage Conditions: Refrigerated temperature, 2 - 8°C (35.6 - 46.4°F)

- o DO NOT FREEZE SPECIMEN
- Specimen must be received in the lab within 72 hours of draw

Fixed Pellets (Bone Marrow or Peripheral Blood):

- Volume: Cell pellet fixed in Methanol: Acetic Acid (3:1); pellet must be visible
 - o Pellet must not be older than 1 week
- Container: Sterile centrifuge tube
- Storage Conditions: Refrigerated temperature, 2 -8° C (35.6 - 46.4° F)
 - o DO NOT FREEZE SPECIMEN



TURN AROUND TIME

| | |
|--|--------|
| Leukemic Bloods | 3 Days |
| Bone Marrows | 3 Days |
| Lymph Nodes | 3 Days |
| Urovysion® | 3 Days |
| Peripheral Bloods | 4 Days |
| Newborn Bloods | 4 Days |
| <ul style="list-style-type: none"> • 24 - 48 hour prelims | |
| Paraffin-embedded Slides | 4 Days |
| PCR | 4 Days |
| ICP | 5 Days |
| CVS | 7 Days |
| POC | 7 Days |
| Amniotic Fluid | 7 Days |

| | |
|------------|---------|
| Microarray | 7 Days |
| Mass | 10 Days |
| Tissue | 10 Days |



REQUISITION INSTRUCTIONS

*Current requisitions may be printed at www.geneticsassociates.com

ADDITIONAL FORMS: TEST AUTHORIZATION

ADDITIONAL FORMS: PATIENT DATA VERIFICATION

ONCOLOGY TEST

CPT CODES

| | |
|--|--|
| Chromosome Analysis -Bone Marrow | 88237 x 2, 88264, 88280 x 3, 88291 |
| Chromosome Analysis -Bone Marrow Core | 88237 x 2, 88264, 88280 x 3, 88291 |
| Chromosome Analysis -Leukemic Blood | 88237 x 2, 88264, 88280 x 3, 88291 |
| Chromosome Analysis -Mass/Solid Tumor | 88233 x 2, 88264, 88280 x 3, 88291 |
| Fluorescence in Situ Hybridization—Single 88291 | 88271 (per probe), 88275 (per probe), 88291 |
| Fluorescence in Situ Hybridization—Multi 88291 | 88271 x 2 (per probe), 88275 (per probe), 88291 |



Information is
provided in this form

Please enter the correct
information

→

Sign

→

Required

FISHnet / iFISH (enrichment only
above)

88112 (FISH codes will also apply—see

Microarray (SNP) 81229

PCR

JAK2 81270

BCR/ABL p210 BKPT 81206

BCR/ABL P190 BKPT 81207

*Please note, codes are report dependent.



CONSTITUTIONAL TEST

CPT CODES

| | |
|---------------------------------------|--|
| Chromosome Analysis -Amniotic Fluid | 88235 X 2, 88267, 88261, 88280, 88291 |
| Chromosome Analysis -CVS 88291 | 88235 X 2, 88267, 88261, 88280, 88172, |
| Chromosome Analysis -Peripheral Blood | 88230 x 2, 88262, 88280, 88291 |
| Chromosome Analysis -POC | 88305, 88233x2, 88261, 88267, 88280 |
| Chromosome Analysis -Tissue | 88233 x 2, 88264, 88280 x 3, 88291 |
| | |
| FISH (Microdeletion) | 88271, 88273, 88291 |
| Aneuvysion® FISH | 88271 x 5, 88275, 88291 |
| POC FISH | 88271 x 8, 88275 X 2, 88291 |
| ICP FISH | 88271 X 24, 88275 x 2, 88291 |

Microarray (SNP)

81229

*Please note, codes are report dependent.



SHIPPING



SPECIMEN SHIPPING

- Call Genetics Associates, Inc. at 615-327-4532 for pick up and additional information.
- Specimen Shipping Kits and FedEx Shipping Bags
 - Specimen shipping kits are provided by GAL.
 - FedEx overnight shipment will be provided for all outlying areas.
 - Mark “Saturday Delivery” box on the FedEx airbill when samples are shipped on Friday.
 - Samples shipped on Saturday by FedEx will not be delivered until the next business day .
- Enclose completed requisition form with each specimen unless a electronic order has been sent.
- Enclose a refrigerated cold pack in the shipping box for overnight transportation for specimens requesting chromosome analysis, FISH, ICP, or microarray and avoid extreme temperatures to ensure specimen integrity.
- Enclose a frozen cool pack in the shipping box for overnight transportation for specimens requesting PCR testing and avoid temperature extremes to ensure specimen integrity.
- Store samples as stated in the Specimen Collection and Handling Guide for each specific specimen type until pickup by courier

Please note that Federal Express does not deliver on Sunday or holidays.

FEDERAL EXPRESS SUPPLIES

GAI provides shipping supplies for our clients, unless other arrangements are made. Clients may request the following supplies via the website at www.geneticsassociates.com or by calling 615-327-4532 or 1-800-331-GENE (4363).

COURIER SERVICES

GAI provides courier services to the Nashville Metropolitan area. A Better Courier Service (ABC) couriers are utilized in a 100 mile radius of Nashville, TN.



Specimen Packaging Guidelines

1. Use the Genetics Associates, Inc. (GAI) Cytogenetic Specimen box with the Styrofoam insert and lid to send samples.
2. To be compliant with federal regulations, the box must have a UN3373 diamond and should read "Biological Substance Category B". Do not place stickers or labels on the outside of the box or cover up these required logos.
3. **Always use TWO SMALL OR ONE LARGE REFRIGERATED GEL PACKS.** NOT frozen or room temperature.
4. Make sure the specimen collection tube/container is fully closed.
5. Place the specimen collection tube in one of the pockets of the included absorbent material (see image below).



6. Insert the tubes and absorbent material in the enclosed 95kpa specimen bag. Seal the bag by removing the tape and pressing down firmly.
 - a. If you are sending 5-7ml vacutainers, one GAI specimen box will hold up to 10 tubes.
 - b. If you are sending 8-10ml vacutainers, one GAI specimen box will hold up to 6 tubes.
 - c. If you are sending 15ml centrifuge tubes, one GAI specimen box will hold up to 6 tubes.
 - d. If you are sending 50ml conical tubes, one GAI specimen box will hold up to 3 tubes.
7. Different patient specimens may be included in the same box. Make sure each patient's paperwork is included in the same box as the specimen.
Note: One patient's specimens are not to be divided between different boxes.

8. Patient test requisitions and corresponding insurance paperwork must be folded and inserted into the pouch at the back of the specimen bag. Fold the paperwork to ensure patient information is not visible.
9. Fold the specimen bag above the tubes and lay flat on the gel pack (see image below).



10. Close the box by inserting the tabs on top lid into side slots.
11. Place in the orange FedEx biological substance shipping pak.
 - a. Seal the pak by removing the tape and pressing down firmly.
12. Apply the proper FedEx airbill marked from your facility to GAI.
 - a. Call 1-800-331-GENE (4363) to inform GAI of the package's shipment and corresponding tracking number.



CONTACT INFORMATION



Executive Team

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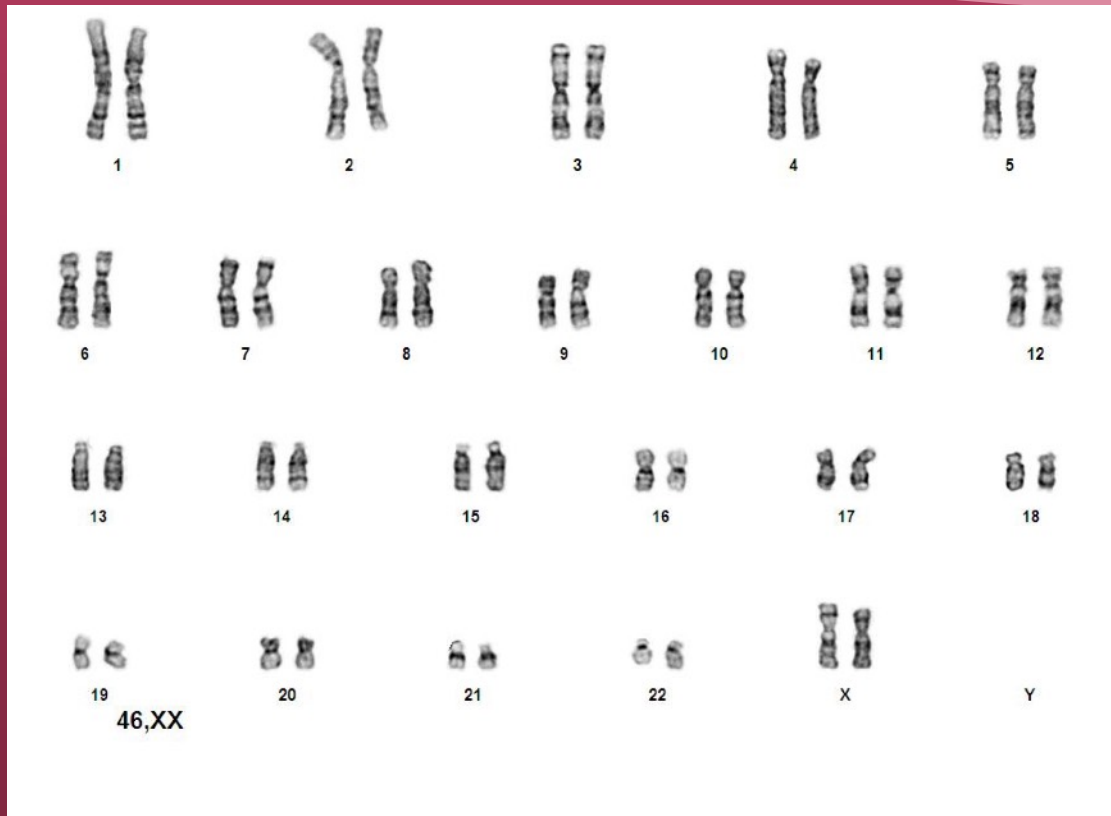
Fellow of the American College of Medical Genetics and Genomics
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CANCER/LEUKEMIA

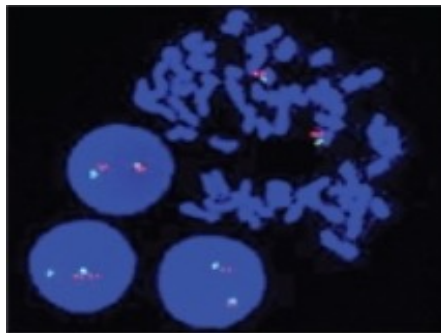
Bone Marrow & Leukemic Blood Chromosome Analysis

Normal and leukemic blood samples which, contain spontaneously dividing cells cultured short-term without mitogens. Some specimens with B-cell conditions are stimulated with mitogens. Chromosome analysis of the dividing cells is useful in the diagnosis and classification of hematological malignancies.



Fluorescence in Situ Hybridization (FISH)

Fluorescence in situ hybridization (FISH) utilizes molecular biology techniques to detect the presence or absence of, and enumerate specific regions of the genome using fluorescently labeled DNA (probes). Unlike most other techniques used to study chromosomes, FISH does not require actively dividing cells. This adds flexibility and increases the ability to identify and characterize cytogenetic abnormalities.



Polymerase Chain Reaction (PCR)

The polymerase chain reaction (PCR) is a molecular method that enables the detection and analysis of specific gene sequences in a patient's sample. PCR testing is used to both diagnosis and monitor hematologic malignancies and solid tumors. Peripheral blood, bone marrow, and paraffin embedded tissue are acceptable specimen types for PCR testing.



Cancer Microarray

Single nucleotide polymorphism (SNP) chromosome microarray (CMA), is a molecular cytogenomic technology that evaluates areas of the human genome for gains or losses of chromosome segments at a higher resolution than traditional karyotyping. Due to the small size, many of these DNA imbalances may not be detected by standard cytogenetics. SNP CGH also will identify marker chromosomes, some cases of mosaicism, and aneuploidy. The performance characteristics of this test, including sensitivity and specificity, have been determined by Genetics Associates. All results are interpreted by board certified and Tennessee licensed cytogenetic directors at our laboratory, who are available to discuss results and offer clinical advice.

Next Generation Sequencing (NGS)

Next-generation sequencing (NGS) is a technology that enables sequencing of multiple regions of the genome in a single assay. Compared to “traditional” or Sanger sequencing method, NGS allows sequencing at higher coverage levels (deep sequencing) that result in greater confidence for calling low-frequency variants. Our targeted NGS panels are designed to detect mutations, substitutions, insertions, and deletions that may have diagnostic, prognostic, and/or therapeutic implications in hematologic malignancies.

Fluorescence in situ Hybridization (FISH) Panels

Please note, FISH probes may be ordered individually or as panel.

Adult B-Cell ALL profile

del(9p) CDKN2A

del(6q) CCND3/SEC63/MYB

t(9;22) BCR/ABL1/ASS1

11q23 KMT2A (MLL) rearrangements

t(1;19) TCF3/PBX1

14q32 IGH rearrangements

Adult T-Cell ALL profile

14q11.2 TRA rearrangements

7q34 TRB rearrangements

10q24 TLX1

5q35 TLX3

11q23 KMT2A (MLL) rearrangements

del(9p) CDKN2A

Pediatric ALL profile

t(12;21) ETV6/RUNX1

11q23 KMT2A (MLL) rearrangements

t(9;22) BCR/ABL1/ASS1

trisomy 4,10,17

Additional probes

t(1;19) TCF3/PBX1

14q32 IGH rearrangements

Ph-Like ALL profile

1q25.2 ABL2

5q32 PDGFRB

5q32 CSF1R

9p24.1 JAK2

9q34.1 ABL1

19p13.2 EPOR

Xp22.33/Yp11.3 CRLF2

Acute Myelogenous (AML) profile

t(15;17) PML/RARA

t(9;22) BCR/ABL1/ASS1

t(8;21) RUNX1T1/RUNX1

11q23 KMT2A (MLL) rearrangements

inv(16), t(16;16) CBFβ rearrangements

inv(3) MECOM rearrangements

17q RARA rearrangements

Chronic Lymphocytic (CLL) profile

del(11q) ATM

trisomy 12

del(13q) 13q14/13q34

del(17p) TP53

Additional probes

t(11;14) CCND1/IGH

del(6q) CCND3/SEC63/MYB



Chronic Myelogenous (CML) profile

t(9;22) BCR/ABL1/ASS1

Additional probes

trisomy 8

i(17q)

Lymphoma probes

t(8;14) MYC/IGH (Burkitt or Follicular)

8q24 MYC rearrangements

t(11;14) CCND1/IGH (Mantle Cell)

t(11;18) BIRC3/MALT1

18q21 BCL2 rearrangements

18q21 MALT1 rearrangements

t(14;18) IGH/BCL2 (Follicular or Diffuse Large B-Cell)

3q27 BCL6 rearrangements (Diffuse Large B-Cell, Follicular, Marginal Zone B-cell)

T-cell Leukemia/Lymphoma probes

2p23 ALK (Anaplastic) rearrangements

14q11.2 TRA rearrangements

7q34 TRB rearrangements

i(7q) 7cen/7q22/7q31

14q32 TCL1A

10q24 TLX1

5q35 TLX3



Multiple Myeloma CD138 Enriched (MM) profile (FISHnet™)

1p32.3/1q21 CDKN2C/CKS1B

del(13q) 13q14/13q34

del(17p) TP53

t(11;14) CCND1/IGH

t(4;14) FGFR3/IGH

t(14;16) IGH/MAF

Additional probes

trisomy 5

trisomy 7

t(6;14) CCND3/IGH

t(14;20) IGH/MAFB

Myelodysplastic (MDS) profile

del(5q) EGR1

del(7q) / monosomy 7

trisomy 8

del(20q)

Additional probes

11q23 KMT2A (MLL) rearrangements

t(9;22) BCR/ABL1/ASS1



Myeloproliferative (MPN) profile

del(5q) EGR1

del(7q) / monosomy 7

trisomy 8

del(20q)

t(9;22) BCR/ABL1/ASS1

Additional probes

4q12 FIP1L1/CHIC2/PDGFR A

5q33 PDGFR B rearrangements

8p11 FGFR1 rearrangements

Solid Tumor probes

EWSR1 Ewing Sarcoma

FOXO1 Alveolar Rhabdomyosarcoma

DDIT3 (CHOP) Myxoid Liposarcoma

LOH 1p/19q Glioma

MYCN 2p24.1 Neuroblastoma

SS18 Synovial Sarcoma

UroVysion®

Transplant

XX/XY for sex mismatched transplant



Individual FISH Probes

(Numerically by Chromosome)

Probe

Requisition

1p32.3/1q21 CDKN2C/CKS1B

1q25.2 ABL2

t(1;19) TCF3/PBX1

Location on Cancer

Multiple Myeloma Profile

Ph-Like ALL profile

Adult B-Cell ALL profile

t(1;19) TCF3/PBX1

Pediatric ALL profile

1p/19q LOH (Glioma)

Solid Tumor probes

2p23 ALK (Anaplastic) rearrangements probes

T-cell Leukemia/Lymphoma

2p24.1 MYCN (Neuroblastoma)

Solid Tumor probes

inv(3) MECOM rearrangements profile

Acute Myelogenous (AML)

3q27 BCL6 rearrangements (Diffuse Large B-Cell, Follicular, Marginal Zone B-cell)

Lymphoma probes

trisomy 4,10,17

Pediatric ALL profile

4q12 FIP1L1/CHIC2/PDGFR

Myeloproliferative (MPN) profile

t(4;14) FGFR3/IGH

Multiple Myeloma Profile

trisomy 5

Multiple Myeloma Profile

del(5q) EGR1

Myelodysplastic (MDS) profile

del(5q) EGR1

Myeloproliferative (MPN) profile

5q32 CSF1R

Ph-Like ALL profile

5q33 PDGFRB rearrangements profile

Myeloproliferative (MPN)

RB rearrangements

Ph-Like ALL profile

Adult T-Cell ALL profile



del(6q) CCND3/SEC63/MYB

Adult B-Cell ALL profile

del(6q) CCND3/SEC63/MYB

Chronic Lymphocytic (CLL) profile

t(6;14) CCND3/IGH

Multiple Myeloma Profile

trisomy 7

Multiple Myeloma Profile

del(7q) / monosomy 7
profile

Myelodysplastic (MDS)

del(7q) / monosomy 7
profile

Myeloproliferative (MPN)

i(7q) 7cen/7q22/7q31
probes

T-cell Leukemia/Lymphoma

7q34 TRB rearrangements

Adult T-Cell ALL profile

7q34 TRB rearrangements

T-cell Leukemia/Lymphoma probes

trisomy 8

Chronic Myelogenous (CML) profile

trisomy 8

Myelodysplastic (MDS) profile

trisomy 8

Myeloproliferative (MPN) profile

8p11 FGFR1 rearrangements

Myeloproliferative (MPN) profile

8q24 MYC rearrangements

Lymphoma probes

t(8;14) MYC/IGH (Burkitt or Follicular)

Lymphoma probes

t(8;21) RUNX1T1/RUNX1

Acute Myelogenous (AML) profile

9p24.1 JAK2

Ph-Like ALL profile

9p24.1 JAK2

Myeloproliferative (MPN) profile

del(9p) CDKN2A

Adult B-Cell ALL profile

del(9p) CDKN2A

Adult T-Cell ALL profile

9p24.1 ARI 1

Ph-Like ALL profile



t(9;22) BCR/ABL1/ASS1

Adult B-Cell ALL profile

t(9;22) BCR/ABL1/ASS1

Pediatric ALL profile

t(9;22) BCR/ABL1/ASS1
profile

Acute Myelogenous (AML)

t(9;22) BCR/ABL1/ASS1
profile

Chronic Myelogenous (CML)

t(9;22) BCR/ABL1/ASS1
profile

Myelodysplastic (MDS)

t(9;22) BCR/ABL1/ASS1
profile

Myeloproliferative (MPN)

10q24 TLX1

Adult T-Cell ALL profile

10q24 TLX1

T-cell Leukemia/Lymphoma probes

del(11q) ATM

Chronic Lymphocytic (CLL) profile

11q23 KMT2A (MLL) rearrangements

Myelodysplastic (MDS) profile

11q23 KMT2A (MLL) rearrangements

Adult B-Cell ALL profile

11q23 KMT2A (MLL) rearrangements

Adult T-Cell ALL profile

11q23 KMT2A (MLL) rearrangements

Pediatric ALL profile

11q23 KMT2A (MLL) rearrangements

Acute Myelogenous (AML) profile

t(11;14) CCND1/IGH

Chronic Lymphocytic (CLL) profile

t(11;14) CCND1/IGH (Mantle Cell)

Lymphoma probes

t(11;14) CCND1/IGH

Multiple Myeloma Profile

t(11;18) BIRC3/MALT1

Lymphoma probes

trisomy 12

Chronic Lymphocytic (CLL) profile

12q13 DDIT3 (CHOP) Myxoid Liposarcoma

Solid Tumor probes

t(12:21) ETV6/RUNX1

Pediatric ALL profile



del(13q) 13q14/13q34
profile

Chronic Lymphocytic (CLL)

del(13q) 13q14/13q34

Multiple Myeloma Profile

13q14.1 FOXO1 Alveolar Rhabdomyosarcoma

Solid Tumor probes

14q11.2 TRA rearrangements
14q11.2 TRA rearrangements
14q32 IGH rearrangements
14q32 IGH rearrangements
14q32 TCL1A
t(14;16) IGH/MAF
t(14;18) IGH/BCL2 (Follicular or Diffuse Large B-Cell)
t(14;20) IGH/MAFB

Adult T-Cell ALL profile
T-cell Leukemia/Lymphoma probes
Adult B-Cell ALL profile
Pediatric ALL profile
T-cell Leukemia/Lymphoma probes
Multiple Myeloma Profile
Lymphoma probes
Multiple Myeloma Profile

t(15;17) PML/RARA

Acute Myelogenous (AML) profile

inv(16), t(16;16) CBFβ rearrangements profile

Acute Myelogenous (AML)

del(17p) TP53

Chronic Lymphocytic (CLL) profile

del(17p) TP53

Multiple Myeloma Profile

i(17q)

Chronic Myelogenous (CML) profile

17q RARA rearrangements

Acute Myelogenous (AML) profile

18q11.2 SS18 Synovial Sarcoma

Solid Tumor probes

18q21 BCL2 rearrangements

Lymphoma probes

rearrangements

Lymphoma probes



19p13.2 EPOR

Ph-Like ALL profile

del(20q)

Myelodysplastic (MDS) profile

del(20q)

Myeloproliferative (MPN) profile

22q12.2 EWSR1 Ewing Sarcoma

Solid Tumor probes

UroVysion®

Solid Tumor probes

Xp22.33/Yp11.3 CRLF2

Ph-Like ALL profile

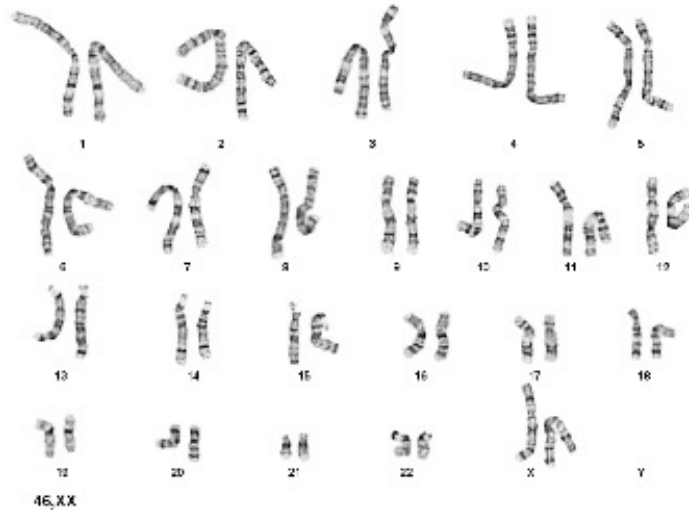
Xcen/Yq12 CEPXY (XX/XY for sex mismatched transplant) Transplant

CONSTITUTIONAL
(Including Prenatal)



Peripheral Blood Chromosome Analysis

Chromosome analysis (karyotyping) is the microscopic evaluation of metaphase chromosomes for numerical and structural abnormalities associated with disease. A nationally certified and state licensed cytogenetic technologist analyzes the banded chromosomes at a microscope. Digital images of representative cells are captured and the chromosomes are arranged in a standard format known as a karyogram. The karyograms are then reviewed by a board-certified and state licensed clinical cytogeneticist.



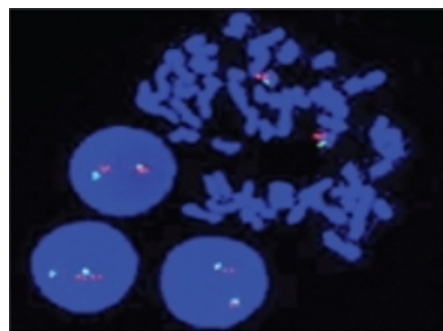
Prenatal Chromosome Analysis

The chromosomal constitution of the fetus can be accurately determined from cells derived by prenatal diagnostic techniques. Chromosome studies of the fetus are indicated when there is a significant risk for a chromosome abnormality.



Fluorescence in Situ Hybridization (FISH)

Fluorescence in situ hybridization (FISH) utilizes molecular biology techniques to detect the presence or absence of, and enumerate specific regions of the genome using fluorescently labeled DNA (probes). Unlike most other techniques used to study chromosomes, FISH does not require actively dividing cells. This adds flexibility and increases the ability to identify and characterize cytogenetic abnormalities.



Polymerase Chain Reaction (PCR)

The polymerase chain reaction (PCR) is a molecular method that enables the detection and analysis of specific gene sequences in a patient's sample. PCR testing is used to both diagnosis and monitor hematologic malignancies and solid tumors. Peripheral blood, bone marrow, and paraffin embedded tissue are acceptable specimen types for PCR testing.

Microarray

Single nucleotide polymorphism (SNP) chromosome microarray (CMA), is a molecular cytogenomic technology that evaluates areas of the human genome for gains or losses of chromosome segments at a higher resolution than traditional karyotyping. Due to the small size, many of these DNA imbalances may not be detected by standard cytogenetics. SNP CGH also will identify marker chromosomes, some cases of mosaicism, and aneuploidy. The performance characteristics of this test, including sensitivity and specificity, have been determined by Genetics Associates. All results are interpreted by board certified and Tennessee licensed cytogenetic directors at our laboratory, who are available to discuss results and offer clinical advice.

Noninvasive Prenatal Test (NIPT)

The verifi® from Genetics Associates, Inc. Prenatal Test is a non-invasive test that **screens** for aneuploidy of chromosomes 21, 18, and 13. Additional screening is available for sex chromosome aneuploidies and select microdeletions in singleton pregnancies. In twin pregnancies, screening for aneuploidy in chromosomes 21, 18, and 13 and the option to screen the Y chromosome is available. This test can be performed as early as 10 weeks of gestational age (8 weeks of fetal age as determined by date of conception).



FISH for Microdeletion Syndromes

(Listed Alphabetically)

Angelman Syndrome (15q12)

Cri-du-Chat Syndrome (5p15.3)

DiGeorge Syndrome (22q11.2)

DiGeorge II Syndrome (10p14)

Kallman Syndrome (Xp22.3)

Miller-Dieker Syndrome (17p13.3)

Pallister-Killian Syndrome/Tetrasomy 12p

Phelan-McDermid Syndrome (22q13)

Prader-Willi Syndrome (15q12)

Saethre-Chotzen Syndrome (7p21.1)

Smith-Magenis Syndrome (17p11.2)

Sotos Syndrome (5q35.3)

Steroid Sulfatase Deficiency Syndrome (Xp22.3)

Williams Syndrome (7q11.23)

Wolf-Hirschhorn Syndrome (4p16.3)

1p36 microdeletion Syndrome



ABBREVIATIONS



ABBREVIATIONS and ACRONYMS

| | |
|-----------------|--|
| FISH chromosome | Fluorescence in situ hybridization. This is a methodology used to detect abnormalities in cells. |
| FL | Follicular lymphoma |
| FXS | Fragile X syndrome |
| GVHD | Graft vs host disease |
| GVL | Graft vs leukemia or graft vs lymphoma |
| HCL | Hairy cell leukemia |
| HCT | Hematocrit; the percentage of red blood cells in the blood. A low hematocrit measurement indicates anemia. |
| HD | Hodgkin disease |
| HDC | High-dose chemotherapy |
| Hem/Onc | Hematologist/Oncologist |
| HGB | Hemoglobin |
| HLA bone | Human leukocyte antigen test; a special blood test used to match a blood or |

marrow donor to a recipient for transfusion or transplant.

Ig Immunoglobulin (IgA, IgD, IgE, IgG, IgM)

ITP Idiopathic thrombocytopenia purpura

IV Intravenous

LB Leukemic blood

LPL Lymphoplasmacytic lymphoma

MALT Mucosa associated lymphoid tissue

Mab Monoclonal antibodies

MCL Mantle cell lymphoma

MDS Myelodysplastic syndrome

MM Multiple myeloma

MS Multiple sclerosis

Myeloproliferative disease



MUD Matched unrelated donor of bone marrow

MZL Marginal zone lymphoma

NHL Non-Hodgkin lymphoma

OR Overall remission

OS Overall survival

PD Parkinson's Disease

PB Peripheral blood

PLL Prolymphocytic Leukemia

PMF Primary Myelofibrosis

PR Partial remission

PV Polycythemia Vera

RARS Refractory anemia with ringed sideroblasts

RBC Red Blood count

Rx Prescribed medication

SB Spina bifida

SBMT Syngeneic bone marrow transplantation (identical twin transplant)

SLE Systemic lupus erythematosus

SLVL Splenic lymphoma with villous lymphocytes

| | |
|----------|--|
| SMA | Spinal muscular atrophy |
| SMCD-eos | Systemic mast cell disease with eosinophilia |
| SMS | Smith Magenis syndrome |
| SPS | Stiff Person syndrome |
| SRBCT | Small round blue cell tumor |
| T-ALL | T-cell acute lymphoblastic leukemia |
| t-AML | Therapy-related acute myeloid leukemia |
| TTP | Thrombotic thrombocytopenia purpura |
| | Turnaround time |



| | |
|------|---------------------------------|
| VCFS | Velocardiofacial syndrome |
| VHL | Von Hippel-Lindau disease |
| WBC | White Blood cell |
| WD | Well differentiated |
| WM | Waldenstrom's macroglobulinemia |
| WS | Williams syndrome |
| XRT | External radiation therapy |
| XP | Xeroderma pigmentosa |



CYTOGENETIC ABBREVIATIONS

| | |
|-------|--|
| AI | First meiotic anaphase |
| All | Second meiotic anaphase |
| Ace | Acentric fragment |
| add | Additional material of unknown origin |
| amp | Denotes an amplified signal |
| (-) | Approximate sign denotes intervals and boundaries of a chromosome segment or number of chromosomes, fragments, or markers; denotes a range of number of copies of a chromosome region when the exact number cannot be determined |
| arr | Microarray |
| b | Break |
| (< >) | Brackets, angle; surround the ploidy level |
| ([]) | Brackets, square; surround number of cells or genome build |
| c | Constitutional anomaly |
| cen | Centromere |
| cgh | Comparative genomic hybridization |
| chi | Chimera |
| chr | Chromosome |
| cht | Chromatid |
| (:) | Colon, single; break, in detailed system |
| ::) | Colon, double; break and reunion, in detailed system |

| | |
|-----|---|
| (,) | Comma; separates chromosome numbers, sex chromosomes, chromosome abnormalities |
| con | Connected signals |
| cp | Composite karyotype |
| cth | Chromothripsis |
| {} | Curly braces; indicates differences in the altered segment compared to the reference sequence in duplications, in versions, conversions, insertions, etc. |



| | |
|------|--|
| cx | Complex rearrangements |
| (.) | Decimal point; denotes sub-bands |
| del | Deletion |
| der | Derivative chromosome |
| dia | Diakinesis |
| dic | Dicentric |
| dim | Diminished |
| dip | Diploene |
| dis | Distal |
| dit | Dictyotene |
| dmin | Double minute |
| dn | de novo; designates a chromosome abnormality that has not been inherited |
| dup | Duplication |
| e | Exchange |
| end | Endoreduplication |
| enh | Enhanced |
| (=) | Equal sign; number of chiasmata |
| fem | Female |
| fib | Extended chromatin/DNA fiber |
| fis | Fission, at the centromere |
| fra | Fragile site |

| | |
|------|---|
| g | Gap |
| GRCh | Genome Reference Consortium human; human genome build or assembly |
| h | Heterochromatin, constitutive |



| | |
|------|--|
| hmz | Homozygous, homozygosity; used when one or two copies of a genome are detected, but previous, known heterozygosity has been reduced to homozygosity through a variety of mechanisms, e.g. loss of heterozygosity (LOH) |
| hsr | Homogeneously staining region |
| htz | Heterozygous; heterozygosity |
| i | Isochromosome |
| idem | Denotes the stemline karyotype in a subclone |
| ider | Isoderivative chromosome |
| inc | Incomplete karyotype |
| inh | Inherited |
| ins | Insertion |
| inv | Inversion |
| ish | In Situ hybridization |
| lep | Leptotene |
| MI | First meiotic metaphase |
| MII | Second meiotic metaphase |
| mal | Male |
| mar | Marker chromosome |
| mat | Maternal origin |
| med | Medial |
| min | Minute acentric fragment |
| (-) | Minus sign/loss |
| mos | Mosaic |
| (x) | Multiplication sign; multiple copies of rearranged chromosomes |
| neg | No presence of the rearrangement for which testing was conducted |

neo Neocentromere
nuc Nuclear or interphase



oom Oogonial metaphase
or Alternative interpretation
p Short arm of chromosome
PI First meiotic prophase
pac Pachytene
() Parentheses; surround structurally altered chromosomes and breakpoints
pat Paternal origin
pcc Premature chromosome condensation
pcd Premature centromere division
pcp Partial chromosome paint
(.) Period; separates various techniques
Ph Philadelphia chromosome
(+) Plus sign; additional normal or abnormal chromosome; increase in length; locus present on a specific chromosome
(++) Plus sign, double; two hybridization signals or hybridization regions on a specific chromosome
pos Detection of a rearrangement for which testing was conducted
prx Proximal
ps Satellited short arm of chromosome
psu Pseudo-
pter Terminal end of the short arm
pvz Pulverization
q Long arm of chromosome
qdp Quadruplication
qr Quadriradial
qs Satellited long arm of chromosome



| | |
|-----------------|--|
| qter | terminal end of the long arm |
| (?) | Question mark; questionable identification of a chromosome or chromosome structure |
| r | Ring chromosome |
| rec | Recombinant chromosome |
| rev | Reverse, including comparative genomic |
| rob | Robertsonian translocation |
| I-IV structures | Roman numerals; indicate univalent, bivalent, trivalent, and quadrivalent |
| rsa | Region-specific assay |
| s | Satellite |
| sce | Sister chromatid exchange |
| sdl | Sideline |
| (;) | Semicolon; separates altered chromosomes and breakpoints in structural rearrangements involving more than one chromosome; separates probes on different derivative chromosomes |
| sep | Separate signals |
| seq | Sequencing |
| sl | Stemline |
| (/) | Slant line, single; separates clones or contiguous probes |
| (//) | Slant line, double: separates chimeric clones |
| spm | Spermatogonial metaphase |
| stk | Satellite stalk |
| subtel | Subtelomeric region |
| t | Translocation |
| tas | Telomeric association |
| ter | Terminal (end of chromosome) or telomere |
| tr | Triradial |
| trc | Tricentric chromosome |



| | |
|--------------------|--|
| underline (single) | Used to distinguish homologous chromosomes |
| (_) | Underscore; used to indicate range of nucleotide positions |
| upd | Uniparental disomy |
| var | Variant or variable region |
| wcp | Whole chromosome paint |
| xma | Chiasma(ta) |
| zyg | Zygotene |