

Medical Genetics
Wake Forest University School of Medicine
Winston Salem NC

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Test: Oncology Pleural Fluid/CNS Fluid/Lymph Node Chromosome Analysis

Purpose of Test: To identify acquired chromosome abnormalities detectable by routine cytogenetic analysis. This includes: translocations, deletions, duplications, inversions, and numerical aberrations.

Required Information: Please provide indications (ICD-9) for testing on our referral form with each specimen. Accurate testing and interpretation may otherwise be compromised.

Pleural Fluid

- Aseptically obtain 25 to 50 mL of pleural fluid. Place in a sterile screw-capped container.
- Label vial with patient's name.
- **SEND SPECIMEN REFRIGERATED, DO NOT FREEZE.**

Central Nervous Spinal (CNS) Fluid

- Aseptically obtain 5 to 10 mL of CNS fluid.
- Place in a sterile screw-capped container.
- Label container with patient's name.
- **SEND SPECIMEN REFRIGERATED, DO NOT FREEZE.**

Lymph Node

- Aseptically obtain 1-3 cm of lymphomatous tissue. Place specimen in a screw-capped, sterile container with sterile medium or alternatively Hank's balanced salt solution, Ringer's solution, or physiologically normal saline.
- Label container with patient's name.
- **SEND SPECIMEN REFRIGERATED, DO NOT FREEZE.**

Adjunct Test: FISH specific per physician's request
No additional specimen required.

Turn Around Time: 6-10 days – stat 24 hr

CPT Code Information:

88239	Other tissue culture (solid tumor)
88262	Count 15-20 cells, 2 karyotypes, GTG
88280	Additional karyotypes, each study
88285	Additional cells counted, each study