



# Test Catalog

Diagnostic. Prognostic. Predictive. Predisposition.





# FGFR2 Rearrangement

## Methodology

FISH

## Test Description

**Probes:** FGFR2 (10q26.13)

**Disease(s):** Cholangiocarcinoma (bile duct cancer) and various solid tumors

## Clinical Significance

FGFR2 fusions are under active clinical study in a range of solid tumors, with targeted therapy already available to certain cholangiocarcinoma patients. FGFR2 fusions occur at highest frequency in intrahepatic cholangiocarcinoma (iCCA), observed in 10-16% of patients. This lab-developed test uses a break-apart FISH probe to detect the presence of FGFR2 fusions (translocations). Fusion partners of FGFR2 are not specifically identified.

## Specimen Requirements

- **Bone marrow aspirate:** N/A
- **Peripheral blood:** N/A
- **Fresh, unfixed tissue:** N/A.
- **Fluids:** N/A
- **Paraffin block:** Send paraffin block. Also send circled H&E slide for tech-only (required).
- **Cut slides:** H&E slide (required) plus 4 unstained slides cut at 4-5 microns. Circle H&E slide for tech-only.

## Storage & Transportation

Use cold pack for transport. Make sure cold pack is not in direct contact with specimen.

## CPT Code(s)\*

88374x1 automated or 88377x1 manual

## New York Approved

Yes

## Level of Service

Technical, Global

## Turnaround Time

3-5 days

## References

1. Newsroom page, published April 20, 2020. Am J Managed Care website. <https://www.ajmc.com/newsroom/-/fda-approves-orphan-drug-pemigatinib-for-rare-bile-duct-cancer-cholangiocarcinoma> Accessed June 20, 2020

\*The CPT codes provided with our test descriptions are based on AMA guidelines and are for informational purposes only. Correct CPT coding is the sole responsibility of the billing party.

Please direct any questions regarding coding to the payor being billed.

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