Legacy Laboratory Services

BCR-ABL1 PCR Ordering Options Have Changed

June 2011

Effective May 16, 2011, **the ordering options for BCR-ABL1 have changed**. This change includes a standardized reporting scale (international scale; IS) enabling the comparison of serial data sets regardless of laboratory of origin or specific PCR test methodology. There are now 3 ordering options to choose from:

- BCR-ABL1, Qualitative with Reflex to BCR-ABL1 Quantitative Major or Minor
- BCR-ABL1, Major (p210), Quantitative
- BCR-ABL1, Minor (p190), Quantitative

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If....	Then order...
• a diagnostic sample • diagnosis is unknown • no previous BCR-ABL1 testing performed	**BCR-ABL1, Qualitative with Reflex to BCR-ABL1 Quantitative** **(**BCR RFLX 2005010)
there is a diagnosis of CML or known p210 (Major) translocation	**BCR-ABL1, Major (p210), Quantitative** (BCR MAJ 2005017) This test detects only the p210 forms resulting from (e13a2) and (e14a2) translocations and not other rare fusions (ie. P230). Note: About 1% of CML patients harbor the p190. For negative p210 (Major) with strong clinical symptoms please consider ordering BCR MIN (Test code 2005016).
there is a known p190 (Minor) translocation	**BCR-ABL1, Minor (p190), Quantitative** **(**BCR MIN 2005016)
there is a diagnosis of Ph+ ALL	**BCR-ABL1, Qualitative with Reflex to BCR-ABL1 Quantitative** (BCR RFLX 2005010) If positive, the qualitative portion will be credited the first time only. Subsequent orders will need to follow either p210 (BCR MAJ) or p190 (BCR MIN) quantitative tests as determined by the initial testing.

Please place your order based on the above options. If orders are not clear, Legacy Client Services will contact you for clarification before referring specimens. If you have questions, please call our Client Service department at 503-413-1234.

Please note, at this time, all BCR-ABL PCR testing is referred to ARUP (Associated Regional University Pathologists) which is the preferred reference laboratory selected by Legacy Laboratory Services for this testing.

For additional information, contact:

Mary Perkins, MT (ASCP)
Hematology, Coag System Manager
503-413-2441

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