

Flow Cytometry Test Menu

Leukemia & Lymphoma Studies

Through immunophenotyping, the Leukemia/Lymphoma Panel is a powerful tool for the diagnosis and classification of chronic lymphoproliferative disorders and acute leukemias. This standard screening panel may also be useful in the development of treatment plans, and monitoring residual or relapsed disease.

Test Name	Test Code	Panel Components
Leukemia / Lymphoma Panel* (indicate source on the requisition; specimen requirements below)	662	CD2, CD3, CD4, CD5, CD7, CD8, CD10, CD13, CD14, CD19, CD20, CD23, CD33, CD34, CD38, CD45, CD56, CD117, FMC-7, HLA-DR, Kappa, Lambda, CD5/19 co-expression, CD38/19 co-expression & pathologist's interpretation (see Additional Markers below available as clinically indicated)
B-Cell CD20 Expression* (indicate source on the requisition; specimen requirements below)	906875	CD19, CD20, CD45 & pathologist's interpretation

Additional Markers: Our pathologists may add markers to a Leukemia/Lymphoma Panel based on diagnosis (additional charges apply).

CD11b, CD11c, CD64	CD41, CD61	cKL (Cytoplasmic Kappa and Lambda) / CD138
CD22, CD123, CD25	CD49d	MPO
CD25, CD11c, CD103	CD57, CD16	TdT / cCD3 (Cytoplasmic CD3)
CD25, CD26, CD52, TCRαβ, TCRγδ, CD5	CD235a (Glycophorin A)	

Specimen Requirements

Peripheral Blood: One EDTA, or one sodium heparin, or one 7 or 8.5 mL ACD-A tube. Store and transport specimens at room temperature. Cold packs may be required inside the sealed container to ensure a stable room temperature (18-22° C, 64-72° F) environment during transportation. Testing within 24 hours is preferred; however, up to 72 hours is acceptable. Viability testing is performed on all whole blood samples.

Bone Marrow: Since bone marrow collection is such a difficult and traumatic process, every attempt will be made to test any specimen submitted. Also, since the concentration of cells varies dramatically, standard volumes cannot be established. Approximately 2.0 mL of bone marrow in K³ EDTA is recommended. Sodium heparin may also be used. Store and transport at room temperature. Cold packs may be required inside the sealed container to ensure a stable room temperature (18-22° C, 64-72° F) environment during transportation. Testing within 24 hours is preferred; however, up to 72 hours is acceptable. Viability testing is performed on all bone marrow samples.

Tissue (lymph nodes, etc.): Place fresh tissue in a sterile container with McCoy's media, RPMI, or a comparable nutrient holding media. If possible, slice into the tissue without cutting all the way through several times to allow penetration of the nutrient. Store and transport at 2-8° C. During summer/hot months, cold packs may be required inside the sealed container to ensure a stable temperature during transportation. Testing within 24 hours is preferred; however, up to 72 hours is acceptable. Viability testing is performed on all tissue samples.

Core Biopsies, Fine Needle Aspirate (FNA): Place the core in a sterile test tube containing approximately 10 mL of McCoy's, RPMI, or similar nutrient media. Rinse the syringe and needle used to aspirate the FNA into the tube. Store and transport at 2-8° C. During summer/hot months, cold packs may be required inside the sealed container to ensure a stable temperature during transportation. Testing within 24 hours is preferred; however, up to 72 hours is acceptable. Viability testing is performed on all FNA samples.

Body Fluids (bronchial lavage, pleural, ascites fluid, etc.): Most body fluids are a very good holding media for blood cells and may be sent in the original collection container. Store and transport at 2-8° C. During summer/hot months, cold packs may be required inside the sealed container to ensure a stable temperature during transportation. Testing within 24 hours is preferred; however, up to 72 hours is acceptable. Viability testing is performed on all body fluid samples.

CSF: Send fresh CSF mixed with equal volume RPMI or McCoy's media. Store and transport at 2-8° C. During summer/hot months, cold packs may be required inside the sealed container to ensure a stable temperature during transportation. Testing within 24 hours is preferred; however, up to 72 hours is acceptable. Viability testing is performed on all CSF samples.

Mature T-Cell Neoplasm Studies

A multicolor Sezary Panel with peripheral smear review and pathologist's interpretation is available for the clinical evaluation of suspected Sezary Syndrome/Mycosis Fungoides cases and other cutaneous T-cell lymphomas. Additionally, we offer an abridged version of the Sezary Panel as an add-on to the standard Leukemia/Lymphoma Panel to aid in the evaluation of mature T-cell lymphomas.

Sezary Panel* (See EDTA and heparin peripheral blood specimen requirements above. ACD is not acceptable for Sezary testing)	906771	CD2, CD3, CD4, CD7, CD8, CD19, CD25, CD26, CD45, CD52, CD56, TCRαβ, TCRγδ & pathologist's interpretation
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Immunodeficiency Studies

The CDC recommends that the abbreviated subset panel (CD4/CD8 Panel – Test 205927) be used only for patients for whom CD4+T-Cell levels are requested as part of a sequential follow-up of complete lymphocyte subset analysis.

Test Name	Test Code	Specimen Requirements	Components / Clinical Use Summary
CD3, Total	700474	1 EDTA lavender-top tube at room temperature.	Includes WBC, Lymphocyte %, Absolute Lymphocytes and CD3 % and count.
CD4, Absolute	800817	1 EDTA lavender-top tube at room temperature.	Includes CD4 count.
CD4, Absolute & Percent	801133	1 EDTA lavender-top tube at room temperature.	Includes WBC, Lymphocyte %, Absolute Lymphocytes and CD4 % and count.
CD4/CD8 Panel	205927	1 EDTA lavender-top tube at room temperature.	Includes CD3, CD4, CD8, & CD4/8 Ratio; Testing includes WBC and Absolute counts for lymphocytes subsets.
Lymphocyte Subset Panel*	205925	1 EDTA lavender-top tube at room temperature.	Includes CD3, CD4, CD8, CD19, CD56 & CD4/8 Ratio; Testing includes WBC and Absolute counts for lymphocyte subsets.
Lymphocyte Subset Panel with CD20*	800679	2 EDTA lavender-top tubes at room temperature.	Includes CD3, CD4, CD8, CD19, CD56 & CD4/8 Ratio; Testing includes WBC and Absolute counts for lymphocyte subsets as well as CD20 %.
NK Cell Panel*	701303	1 EDTA lavender-top tube at room temperature.	Includes WBC, Lymphocyte Absolute, CD16/56 % and count.
Surface Marker, without Interpretation*	7199	1 EDTA lavender-top tube at room temperature.	Only percentages will be reported for the marker(s) requested. No interpretation or absolute counts will be provided. Indicate up to six surface markers from test 662 on test request form.
T & B Total	905574	1 EDTA lavender-top tube at room temperature.	Includes WBC, Lymphocyte Absolute, CD3 % and count, and CD19 % and count.

PNH (Paroxysmal Nocturnal Hemoglobinuria)

PNH with FLAER (High Sensitivity)	905009	5.0 mL room temperature whole blood from an EDTA (lavender-top) tube, ACD (Solution A) yellow-top tube, or sodium heparin (green-top) tube (3.0 mL minimum). Specimen must be collected Monday through Thursday before 10:00 AM ONLY.	This high sensitivity and quantitative flow cytometry assay is used in the diagnosis and follow-up monitoring of patients with paroxysmal nocturnal hemoglobinuria (PNH). Markers evaluated are FLAER, CD14, CD16, CD24, CD25 and CD59 with CD33, CD45 and glycophorin A used for gating. Granulocytes, monocytes and erythrocytes (RBCs) are evaluated separately. The assay can detect glycosylphosphatidylinositol (GPI)-deficient cell populations down to a level of 0.01%.
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*These tests were developed, and their performance characteristics determined, by Sonora Quest Laboratories. These tests have not been cleared by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary.

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