



# Test Catalog

Diagnostic. Prognostic. Predictive. Predisposition.





## B-ALL MRD Flow Panel

### Alternative Name

B-ALL Minimal Residual Disease Panel

### Methodology

Flow Cytometry

### Test Description

Available as global test only. Markers are CD304/CD73, CD45, CD19, CD34, CD38, CD10, CD22, CD58, CD66C/CD123, CD13/CD33, and CD20. Additional markers (CD13, CD14, CD16, CD45, and HLA-DR) are included for bone marrow samples to aid in evaluating the extent of hemodilution in bone marrow aspirates. This panel can detect MRD at the 0.01% level.

### Clinical Significance

In patients with B-lymphoblastic leukemia, a combination of morphology and flow cytometry testing for minimal residual disease (MRD) is recommended when assessing response to therapy [1]. In both adult and pediatric patients with acute lymphoblastic leukemia, MRD during standard ALL chemotherapy is the strongest overall prognostic indicator and has therefore been used for refining initial treatment stratification [2, 3]. MRD positivity after the maintenance phase of treatment, pretransplant or post stem cell transplantation also provides prognostic information that may help guide therapeutic interventions [3]. This flow cytometry panel follows a consensus strategy and can detect MRD at the 0.01% level.

### Specimen Requirements

- **Bone marrow aspirate:** 2-3 mL EDTA preferred. Sodium heparin is acceptable.
- **Peripheral blood:** 5-6 mL EDTA preferred. Sodium heparin is acceptable.
- **NY Clients:** Please provide Date and Time of Collection.
- **Note:** Lithium heparin or ACD (pale yellow/no gel separator) is not acceptable. Please provide recent CBC report.

### Storage & Transportation

**Specimens should be received at NeoGenomics within 72 hours from collection to assure sample integrity and acceptable cell viability. Note: New York State samples must be received within 48 hours from collection per NYS requirements.** Ship same day as drawn whenever possible. Refrigerate specimen. Do not freeze. Use cold pack for transport, making sure cold pack is not in direct contact with specimen.

### CPT Code(s)\*

Bone Marrow samples: 88184x1, 88185x13. Peripheral Blood samples: 88184x1, 88185x10. Add 88188x1 for global.

### New York Approved

Yes

### Level of Service

Global

### Turnaround Time

24 hours

## References

1. Gupta S, Devidas M, Loh ML, et al. Flow-cytometric vs. morphologic assessment of remission in childhood acute lymphoblastic leukemia: a report from the Children's Oncology Group (COG). *Leukemia*. 2018;32(6):1370-1379.
2. Borowitz MJ, Wood BL, Devidas M, et al. Prognostic significance of minimal residual disease in high risk B-ALL: a report from Children's Oncology Group study AALL0232. *Blood*. 2015;126(8):964-71.
3. Brüggemann M, Kotrova M. Minimal residual disease in adult ALL: technical aspects and implications for correct clinical interpretation. *Blood Adv*. 2017;1(25):2456-2466.

\*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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Committed to research as the means to improve patient care, we provide Pharma Services for pharmaceutical companies, in vitro diagnostic manufacturers, and academic scientist-clinicians. We promote joint publications with our client physicians. NeoGenomics welcomes your inquiries for collaborations. Please contact us for more information.

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