



Patient Information

Name:
SSN/ID #:
Date of Birth:
Gender:

Account Information

Account name:
Address:
City: State: Zip:
Country:
Phone #:
Fax #:
Report Delivery Preference: Overnight mail Fax

Ordering Physician Information

Ordering Physician Name:
Address:
City: State: Zip:
Country:
Phone #:
Fax #:
NPI #:
Report Delivery Preference: Overnight mail Fax

Specimen Information

Specimen Type: Formalin-fixed paraffin embedded tissue
Biopsy Site:
Specimen Collection Date:
Subm. Lab Access. #:
Date Specimen Received:
Barcode #:
Sample ID #:
Date Result Reported:

Test Results

Test score:



Interpretation of Results

Hsa-miR-205 is overexpressed in squamous non-small cell lung cancer (NSCLC). Lower test scores (higher expression and hence lower C_t) are interpreted as squamous differentiation. A score below 2.5 is interpreted as squamous differentiation and above 2.5 as non-squamous differentiation. Score values between 1 and 4 represent the "near cutoff" squamous and non-squamous categories. In validation studies, the sensitivity and specificity of this assay for detection of squamous differentiation in NSCLC, when the sample contained 50% tumor or greater, were 97% and 91% respectively. The overall accuracy of test results obtained was 94%. **Score values obtained near the cut-off (± 1.5 from the decision cut-off) may be more prone to interpretation error.**

Test Description

The miRview™ squamous assay quantifies the expression of two microRNAs and a small RNA to discriminate squamous from non-squamous histologies in non-small cell lung cancer. Initially, an adequate ratio of tumor to surrounding tissue is ascertained, depending on sample characteristics microdissection is performed, and after RNA extraction, qRT-PCR is performed. The cycle number threshold (C_t) of hsa-miR-205 is normalized versus hsa-miR-21 and U6 snRNA and converted via a proprietary algorithm into a numerical score. Thus, the test objectively distinguishes between squamous and non-squamous tumors.

Note

The performance characteristics of this test were determined by Rosetta Genomics in accordance with the requirements of CLIA (Clinical Laboratory Improvement Amendments of 1988). It has not been cleared or approved by the U.S. Food and Drug Administration. This test is intended to be used for clinical purposes and should not be considered to be for investigational or research use only. Decisions regarding care and treatment should be based on the independent medical judgment of the treating physician taking into consideration all available information concerning the patient's condition, including other tests.

Laboratory Director
Tina Edmonston, MD