



# Test Definition: EGFRS

EGFR Gene, Targeted Mutation Analysis, 51 Mutation Panel, Tumor

## Overview

### Useful For

Identifying non-small cell lung cancers that may respond to epidermal growth factor receptor-targeted therapies

### Additional Tests

Test Id	Reporting Name	Available Separately	Always Performed
SLIRV	Slide Review in MG	No, (Bill Only)	Yes

### Testing Algorithm

When this test is ordered, slide review will always be performed at an additional charge.

### Method Name

Polymerase Chain Reaction (PCR)

### NY State Available

Yes

## Specimen

### Specimen Type

Varies

### Necessary Information

Pathology report must accompany specimen for testing to be performed.

### Specimen Required

**Preferred:** Submit 3, if available, or 2 of the following specimens.

**Acceptable:** Submit **at least one** of the following specimens.

**Specimen Type:** Tissue block

**Collection Instructions:** Submit a formalin-fixed, paraffin-embedded (FFPE) tissue block with acceptable amount of tumor tissue.

**Specimen Type:** Tissue slide

**Source:** FFPE tissue, cell block (prepared from fine-needle aspirate, or pleural fluid)

**Slides:** 1 Hematoxylin and eosin-stained and 5 unstained

**Collection Instructions:**

Submit the followings slides:

1 Slide stained with hematoxylin and eosin

AND

5 Unstained, nonbaked slides with 5-micron thick sections of the tumor tissue.

**Additional Information:** Hematoxylin and eosin-stained and unstained slides will not be returned.

**Specimen Type:** Cytology slide (direct smears; smears stained with Pap stain are not acceptable)

**Slides:** 2 Slides

**Collection Instructions:** Submit 2 slides stained with Diff Quik and coverslipped with a total of 5000 nucleated cells (preferred) or at least 3000 nucleated cells (minimum).

**Note:** Glass coverslips are preferred; plastic coverslips are acceptable but will result in longer turnaround times.

**Additional Information:** Cytology slides will not be returned. An image of the slides will be stored per regulatory requirements.

## Forms

If not ordering electronically, complete, print, and send an [Oncology Test Request](#) (T729) with the specimen.

## Specimen Minimum Volume

Formalin-fixed, paraffin-embedded tissue block or Slides: see Specimen Required

Cytology smear stained with Diff Quik: >1000 cells

## Reject Due To

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability

## Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Ambient (preferred)		
	Refrigerated		

## Clinical & Interpretive

### Clinical Information

Targeted cancer therapies are defined as antibody or small molecule drugs that block the growth and spread of cancer by interfering with specific cell molecules involved in tumor growth and progression. Multiple targeted therapies have been approved by the US Food and Drug Administration for treatment of specific cancers. Molecular genetic profiling is often needed to identify targets amenable to targeted therapies and to minimize treatment costs and therapy-associated risks.

Epidermal growth factor receptor (EGFR) protein is activated by the binding of specific ligands, resulting in activation of the RAS/MAPK pathway. Activation of this pathway induces a signaling cascade ultimately leading to cell proliferation. Dysregulation of the RAS/MAPK pathway is a key factor in tumor progression for many solid tumors. Targeted therapies directed to tumors harboring activating mutations within the *EGFR* tyrosine kinase domain (exons 18-21) have demonstrated some success in treating a subset of patients with non-small cell lung cancer.

As a result, the mutation status of *EGFR* can be a useful marker by which patients are selected for EGFR-targeted therapy.

**Reference Values**

An interpretive report will be provided.

**Interpretation**

The interpretation of molecular biomarker analysis includes an overview of the results and the associated diagnostic, prognostic, and therapeutic implications.

**Cautions**

A negative (wildtype) result does not rule out the presence of a mutation that may be present but below the limits of detection for this assay (approximately 10%).

A negative (wildtype) result does not rule out the presence of other activating mutations in the *EGFR* gene.

Not all patients that have activating *EGFR* mutations detected by this assay respond to epidermal growth factor receptor-targeted therapies.

Rare genetic alterations (ie, polymorphisms) exist that could lead to false-negative or false-positive results.

**Clinical Reference**

1. Sharma SV, Bell DW, Settleman J, Haber DA. Epidermal growth factor receptor mutations in lung cancer. *Nat Rev Cancer*. 2007;7(3):169-181. doi:10.1038/nrc2088
2. Gao G, Ren S, Li A, et al. Epidermal growth factor receptor-tyrosine kinase inhibitor therapy is effective as first-line treatment of advanced non-small-cell lung cancer with mutated EGFR: a meta-analysis from six phase III randomized controlled trials. *Int J Cancer*. 2012;131(5):E822-829. doi:10.1002/ijc.27396
3. Mok TS. Personalized medicine in lung cancer: what we need to know. *Nat Rev Clin Oncol*. 2011;8(11):661-668. doi:10.1038/nrclinonc.2011.126
4. Lee CS, Sharma S, Miao E, Mensah C, Sullivan K, Seetharamu N. A comprehensive review of contemporary literature for epidermal growth factor receptor tyrosine kinase inhibitors in non-small cell lung cancer and their toxicity. *Lung Cancer (Auckl)*. 2020;11:73-103. doi:10.2147/LCTT.S258444

**Performance****Method Description**

All specimens will undergo *EGFR* testing. The *EGFR* test is a qualitative polymerase chain reaction (PCR)-based assay employing fluorescently labeled probes that are used to detect exon 18 (G719A/C/S), exon 21 (L858R, L861Q), exon 20 (T790M, S768I) mutations, exon 19 deletions and exon 20 insertions of the *EGFR* gene. (Unpublished Mayo method)

Exon	Mutation	Protein change	Nucleotide change	Genotype
18	G719A	p.Gly719Ala	c.2156G>C	G719A/C/S

	G719C	p.Gly719Cys	c.2155G>T	
	G719C	p.Gly719Cys	c.2154_2155delinsTT	
	G719S	p.Gly719Ser	c.2155G>A	
19	Deletion 9	p.Leu747_Ala750delinsPro	c.2238_2248delinsGC	Exon 19 deletion
			c.2239_2248delinsC	
		p.Leu747_Ala750delinsSer	c.2240_2248del	
		p.Leu747_Glu749del	c.2239_2247del	
	Deletion 12	p.Leu747_Thr751delinsPro	c.2239_2251delinsC	
		p.Leu747_Thr751delinsSer	c.2240_2251del	
	Deletion 15	p.Glu746_Ala750del	c.2235_2249del	
			c.2236_2250del	
		p.Leu747_Thr751del	c.2239_2253del	
			c.2240_2254del	
			c.2238_2252del	
		p.Glu746_Thr751delinsAla	c.2237_2251del	
		p.Glu746_Thr751delinsIle	c.2235_2252delinsAAT	
		p.Glu746_Thr751delinsVal	c.2237_2252delinsT	
		p.Lys745_Ala750delinsThr	c.2234_2248del	
		p.Glu746_Thr751delinsLeu	c.2236_2253delinsCTA	
		p.Glu746_Thr751delinsVal	c.2237_2253delinsTA	
		p.Glu746_Thr751delinsAla	c.2235_2251delinsAG	
		p.Glu746_Thr751delinsGln	c.2236_2253delinsCAA	
		p.Ile744_Ala750delinsValLys	c.2230_2249delinsGTCAA	
	Deletion 18	p.Leu747_Pro753delinsSer	c.2240_2257del	
		p.Glu746_Ser752delinsVal	c.2237_2255delinsT	
		p.Leu747_Ser752del	c.2239_2256del	
		p.Glu746_Thr751del	c.2236_2253del	
		p.Leu747_Pro753delinsGln	c.2239_2258delinsCA	
		p.Glu746_Ser752delinsAla	c.2237_2254del	
		p.Glu746_Ser752delinsAsp	c.2238_2255del	
p.Glu746_Pro753delinsValSer		c.2237_2257delinsTCT		
p.Glu746_Ser752delinsIle		c.2236_2255delinsAT		
		c.2236_2256delinsATC		
p.Glu746_Ser752delinsVal	c.2237_2256delinsTT			
	c.2237_2256delinsTC			
	c.2235_2255delinsGGT			
Deletion 21	p.Leu747_Pro753del	c.2238_2258del		
	p.Glu746_Ser752del	c.2236_2256del		
Deletion 24	p.Ser752_Ile759del	c.2253_2276del		
20	T790M	p.Thr790Met	c.2369C>T	T790M
	S768I**	p.Ser768Ile	c.2303G>T	S768I
	InsG	p.Asp770_Asn771insGly	c.2310_2311insGGT	Exon 20

	InsASV(9)	p.Val769_Asp770insAlaSerVal	c.2307_2308insGCCAGCGTG	insertion
	InsASV(11)	p.Val769_Asp770insAlaSerVal	c.2309_2310delinsCCAGCGTGGAT	
	InsSVD	p.Asp770_Asn771insSerValAsp	c.2311_2312insGCGTGGACA	
	InsH	p.His773_Val774insHis	c.2319_2320insCAC	
21	L858R	p.Leu858Arg	c.2573T>G	L858R
			c.2573_2574delinsGT	
			c.2573_2574delinsGA	
	L861Q	p.Leu861Gln	c.2582T>A	L861Q

### PDF Report

No

### Day(s) Performed

Monday through Friday

### Report Available

4 to 7 days

### Specimen Retention Time

Tissue blocks: Unused portions of blocks will be returned; Tissue slides: Hematoxylin and eosin-stained and unstained slides will not be returned. Unused slides are stored for at least 5 years.

### Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Main Campus

## Fees & Codes

### Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

### Test Classification

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

### CPT Code Information

81235-EGFR (epidermal growth factor receptor) (eg, non-small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q)

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88381-Microdissection, manual

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
EGFRS	EGFR Gene, Mutation Analysis, Tumor	21665-5

Result ID	Test Result Name	Result LOINC® Value
616123	Result Summary	50397-9
616124	Result	21665-5
616125	Interpretation	69047-9
616126	Specimen	31208-2
616127	Source	31208-2
616128	Tissue ID	80398-1
616129	Released By	18771-6