

# Test Catalog

Diagnostic. Prognostic. Predictive. Predisposition.





# **PgR**

# **Alternative Name**

Progesterone Receptor

#### Methodology

Immunohistochemistry (IHC)

## **Test Description**

Progesterone Receptor (PR) belongs to a superfamily of nuclear hormone receptors. Estrogen Receptor (ER) induces PR expression, therefore, PR status serves as an indicator of an intact ER pathway. There are two known isoforms of PR; PR? and PRß. The current assays in clinical breast cancer measure both isoforms. PR is expressed in about 60-70% of invasive breast cancers. It is a weak prognostic factor by itself but a modest predictive factor that adds to the predictive value of ER for response to endocrine therapies, both in adjuvant and metastatic settings. The primary indication to assess PR in breast cancer is to predict response to hormonal therapies, such as tamoxifen, other selective estrogen receptor modulators (SERMs) and aromatase inhibitors.

## **Specimen Requirements**

- A formalin-fixed, paraffin-embedded (FFPE) tissue block is preferred specimen type or
- One (1) unbaked, unstained slide for H&E staining (required) and two to three (2-3) positively charged unstained slides (all cut at 4-5 microns) for each test/antibody ordered
- Block and slide identifiers should be clearly written and match exactly with the specimen ID and specimen labeling as noted on the requisition.

#### Storage & Transportation

Use cold pack for transport. Make sure cold pack is not in direct contact with specimen.

#### CPT Code(s)\*

88342 x 1 or 88341 x 1 (qualitative IHC) or 88360 (quantitative/semi-quantitative – manual) or 88361 x 1 (quantitative/semi-quantitative – computer assisted)

#### **New York Approved**

Yes

#### Level of Service

Stain Only, Global

#### **Turnaround Time**

Global: 48 hours, Image Analysis (tech-only): 48 hours, Tech-Only (stain only): 24 hours

Please direct any questions regarding coding to the payor being billed.

<sup>\*</sup>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.

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