St. John Health System Lab Catalog

MTHFR - Thermolabile Variant, DNA Analysis

Order Name: MTHFR
Test Number: 1515625
Revision Date: 10/22/2024

TEST NAME		METHO	DDOLOGY	LOINC CODE	
MTHFR Interpretation			nterpretive information.		
SPECIMEN REQUIREM	MENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	7mL (3mL)	Whole Blood	EDTA (Lavender Top)	Room Temperature	
Alternate 1	7mL (3mL)	Whole Blood	ACD Solution A or B (Yellow Top)	Room Temperature	
Alternate 2	2 Swabs	Buccal swab	Labcorp buccal swab kit	Room Temperature	
Instructions	Specimen Requirements Specimen: Whole blood or LabCorp buccal swab kit (buccal swab collection kit contains instructions for use of a buccal swab) Volume: 7 mL whole blood or LabCorp buccal swab kit (Minimum Volume 3 mL whole blood or two buccal swabs) Container: Lavender-top (EDTA) tube, yellow-top (ACD) tube, or LabCorp buccal swab kit Storage Instructions: Maintain specimen at room temperature or refrigerate.				

Causes for Rejection: Frozen specimen; hemolysis; quantity not sufficient for analysis; improper container; one buccal swab; wet buccal swab.

GENERAL INFORMATION			
Expected TAT	6 - 10 days		
Clinical Use	Methylenetetrahydrofolate Reductase (MTHFR) Thermolabile Variant, DNA Analysis Variants Analyzed: c.665C>T (p. Ala222Val), legacy name: C677T; and c.1286A>C (p. Glu429Ala), legacy name: A1298C. Results must be combined with clinical information for the most accurate interpretation. Molecular-based testing is highly accurate, but as in any laboratory test, diagnostic errors may occur. False positive or false negative results may occur for reasons that include genetic variants, blood transfusions, bone marrow transplantation, somatic or tissue-specific mosaicism, mislabeled samples, or erroneous representation of family relationships. This test was developed and its performance characteristics determined by Labcorp. It has not been cleared or approved by the Food and Drug Administration.		
Notes	Hyperhomocysteinemia is multifactorial, involving genetic, clinical, and environmental risk factors. Reduced enzyme activity of methylenetetrahydrofolate reductase (MTHFR) is a genetic risk factor for hyperhomocysteinemia, particularly when serum folate levels are low. There are two common variants in the MTHFR gene that can decrease enzyme activity: c.665C>T (p. Ala222Val), legacy name C677T, and c.1286A>C (p. Glu429Ala), legacy name A1298C. These variants do not independently increase risk of conditions related to hyperhomocysteinemia in the absence of elevated homocysteine levels. Measurement of total plasma homocysteine is recommended. Patients should share their MTHFR genotype with physicians who are making decisions regarding chemotherapy treatments that depend on folate, such as methotrexate. Guidelines do not recommend genotyping of these two MTHFR variants in the evaluation of venous thromboembolism or obstetric risk due to limited evidence of clinical utility. Genetic coordinators are available for health care providers to discuss results and for information on how to order additional testing, if desired, at 1-800-345-GENE.		
CPT Code(s)	81291		
Service Provided By	Oklahoma, Inc.		