submitted with the maternal specimen.

St. John Health System

<u>Lab Catalog</u>

Targeted Variant, Fetal

Order Name: Targeted Var Fetal

Test Number: 5194969
Revision Date: 03/21/2023

TEST NAME			DOLOGY	LOINC CODE	
Targeted Variant, Fetal	Polymerase Chain Reaction				
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	4 mL (3 mL)	Amniotic Fluid	Sterile Screwtop Container	Room Temperature	
Alternate 1	See Instructions	See Instructions	See Instructions	Room Temperature	
Instructions	Specimen Type: Amniotic fluid or chorionic villus sample (CVS) or cultured cells or cordblood. Direct amniotic fluid or CVS specimen may be submitted; additional culture fee may be applied. Specimen Volume: Amniotic fluid: 10 mL or CVS: 10 mg or amniotic fluid and CVS culture: one confluent T-25 flask or 4 mL cordblood. If amniotic fluid or CVS are cultured at another facility, please maintain back-up cultures. Mininum Volume: Amniotic fluid: 10 mL or CVS: 10 mg or amniotic fluid and CVS culture: one confluent T-25 flask or 3 mL cordblood Collection: Standard sterile techniques. Transfer aseptically to sterile tubes. Amniotic fluid: Discard first 2mL of fluid aspirated to avoid maternal cell contamination. Specimen Storage: Maintain specimen at room temperature. Do not freeze. Special Instructions: The specific gene and variant(s) to be analyzed must be indicated on the test requisition form. Failure to indicate the gene and variant will result in testing delays. Please include a copy of the previously tested family member's laboratory report for documentation. Labcorp clients with 8 digit client account numbers should call 800-345-4363 and Labcorp Genetics & Women's Health clients with 6 digit client /subclient account numbers should call 800-255-7357 to speak with a laboratory genetic coordinator before collecting specimens. In some circumstances, specimens from both parents and other family members may be required. All fetal specimens, including cordblood, must be accompanied by a				

GENERAL INFORMATION		
Expected TAT	14 - 21 days In some cases, additional time may be required for confirmatory or reflex tests.	
Clinical Use	This test is used for prenatal diagnosis for pregnancies at risk for known variants in genes included in any Inheritest or GeneSeq®: Cardio panel. This test includes all genes included in any Inheritest or GeneSeq®: Cardio panel except SMN1 and FMR1.	
Notes	Labcorp Test Code: 482534	
Service Provided By	labcorp Oklahoma, Inc.	

maternal blood, PurFlock buccal swab kit or Oragene Dx 500 saliva kit for maternal cell contamination (MCC). A separate requisition should be