## St. John Health System Lab Catalog

**Prenatal Chromosome Microarray** 

Order Name: Prenatal CMA
Test Number: 5195557
Revision Date: 09/03/2024

TEST NAME **METHODOLOGY LOINC CODE** 62365-2 **Prenatal Chromosome Microarray SNP Microarray Analysis** SPECIMEN REQUIREMENTS Specimen Specimen Volume (min) Specimen Type Specimen Container Transport Environment Preferred 2 T-25 flasks (1 T-25 flask) **Amniotic Fluid** Confluent T-25 flask **Room Temperature** Instructions Notes: 1 T-25 flask minimum volume will delay results due to culturing; direct array cannot be performed with minimum volumes) Specimen type: Amniotic Fluid; Cultured amniotic fluid sample or Chorionic villus sample (CVS) cells. Maternal cell contamination studies are recommended Specimen container: Two T-25 flask containers containing sterile Ringer's lactate OR Hank's balanced salt solution OR transport media provided by the cytogenetic laboratory (Do NOT use urine containers for shipping). Specimen Storage: Maintain specimen at room temperature. Specimen Collection: Not Available Causes for reject: Quantity not sufficient for analysis; One T-25 flask minimum volume will delay results due to culturing; direct array cannot be performed with minimum volumes) Special Instructions: A completed Informed Consent and Prenatal Chromosome SNP Microarray Questionnaire should accompany specimens. Call 800-345-4363 to request the Informed Consent and Questionnaire form. If a chromosome study has been performed it's recommended that it be included with sample submission. If prior NIPT studies have been performed, include copy of the report. If specimens from a twin pregnancy are submitted by request it can be reported if these are DZ or MZ twins. **SNP Microarray Prenatal POC Clinical Questionnaire** Reveal® SNP Microarray: Eligibility (Preverification) & Prior Authorization Request Form

GENERAL INFORMATION	
Expected TAT	8 - 15 days
CPT Code(s)	81229
Service Provided By	labcorp Oklahoma, Inc.

Click here to view test on Labcorp web site