

BRCAssure Comprehensive Panel (BRCA1 and BRCA2)

Order Name: **BRCA Comp Pnl**
 Test Number: 6907511
 Revision Date: 12/10/2024

TEST NAME	METHODOLOGY	LOINC CODE
BRCAssure Comprehensive Panel (BRCA1 and BRCA2)	Massively Parallel Sequencing	

SPECIMEN REQUIREMENTS

Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	7 mL (3 mL)	Whole Blood	EDTA (Lavender Top)	Room Temperature
Alternate 1	7 mL (3 mL)	Whole Blood	ACD Solution A or B (Yellow Top)	Room Temperature
Alternate 2	2 mL (0.5 mL)	Saliva	Oragene Dx saliva kit	Room Temperature

Instructions

BRCAssure® Comprehensive Panel
Notes: 7 mL whole blood, 2 mL saliva
Specimen Type: Lavender-top (EDTA) tube OR yellow-top (ACD) tube OR Oragene DX 500 saliva collection kit.
Specimen Storage: Maintain specimen at room temperature.
Specimen Collection: Blood draw; saliva collection
Stability: Room temperature: Whole blood: 14 days; Saliva: 60 days Refrigerated: Whole blood: 30 days Frozen: Do NOT Freeze.
Special Instructions: A BRCAssure® clinical questionnaire should be submitted with specimens. Contact CMBP genetics services at 800-345-4363 to coordinate testing. To order Oragene Dx 500 saliva collection kits using PeopleSoft No. 87917, or contact your local Labcorp branch supply department.
Causes for Rejection: Frozen whole blood; serum; leaking tube; clotted blood; grossly hemolyzed specimen; incorrect anticoagulant; saliva collection in incorrect container.
 Do not eat, drink, smoke, or chew gum 30 min prior to saliva sample collection. See Oragene Dx 500 saliva kit for detailed instructions.

[BRCAssure® Physician Brochure](#)
[BRCAssure® Patient Brochure](#)
[Clinical Questionnaire for Hereditary Cancer](#)
[BRCAssure® Technical Summary](#)

GENERAL INFORMATION

Expected TAT	18 - 21 days
Clinical Use	aka: BRCA1/2 NGS Sequencing and Del/Dup
Notes	Turnaround time is defined as the usual number of days from the date of pickup of a specimen for testing to when the result is released to the ordering provider. In some cases, additional time should be allowed for additional confirmatory or additional reflex tests. Testing schedules may vary.
CPT Code(s)	81162

Service Provided By

