

**Sickle Cell, Fetal Analysis**

Order Name: **Sickle Cell Fetal**  
 Test Number: 5194951  
 Revision Date: 07/17/2023

TEST NAME	METHODOLOGY	LOINC CODE
Sickle Cell, Fetal Analysis	Polymerase Chain Reaction	

**SPECIMEN REQUIREMENTS**

Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	<b>4 mL (3 mL)</b>	<b>Amniotic Fluid</b>	<b>Sterile Screwtop Container</b>	<b>Room Temperature</b>
Alternate 1	<b>See Instructions</b>	<b>See Instructions</b>	<b>See Instructions</b>	<b>Room Temperature</b>
Instructions	<p><b>Specimen Type:</b> 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.</p> <p><b>Specimen Volume:</b> 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.</p> <p><b>Minimum Volume:</b> Amniotic fluid: 10 mL or CVS: 10 mg or amniotic fluid and CVS culture: one confluent T-25 flask or 3 mL cordblood</p> <p><b>Collection:</b> Standard sterile techniques. Transfer aseptically to sterile tubes. Amniotic fluid: Discard first 2mL of fluid aspirated to avoid maternal cell contamination.</p> <p><b>Specimen Storage:</b> Maintain specimen at room temperature. Do not freeze.</p> <p><b>**THIS TEST IS FOR FETAL TESTING ONLY**</b> It is not intended for routine sickle cell screening. Labcorp clients with 8 digit client account numbers should call 800-345-4363 and Labcorp Genetics &amp; 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 maternal blood, PurFlock buccal swab kit or Oragene Dx 500 saliva kit for maternal cell contamination (MCC). A separate requisition should be submitted with the maternal specimen.</p>			

**GENERAL INFORMATION**

Expected TAT	8 - 14 days If culture is needed, an additional 14-21 days may be required.
Clinical Use	Sickle cell analysis: HbS (c.20A>T, p.Glu7Val) and HbC (c.19G>A, p.Glu7Lys) pathogenic variants are identified by Sanger sequencing, capillary gel electrophoresis and fluorescence detection. Maternal cell contamination analysis (MCC): Analysis of short tandem repeat markers by multiplex fluorescent polymerase chain reaction (PCR) and capillary electrophoresis
Notes	Labcorp Test Code: 482091
CPT Code(s)	81361
Service Provided By	 <b>labcorp</b> Oklahoma, Inc.