

Inheritest High Frequency

Order Name: **Inherit HF**
Test Number: 5194941
Revision Date: 03/21/2023

| TEST NAME | METHODOLOGY | LOINC CODE |
|---------------------------|---------------------------|------------|
| Inheritest High Frequency | Polymerase Chain Reaction | |

SPECIMEN REQUIREMENTS

| Specimen | Specimen Volume (min) | Specimen Type | Specimen Container | Transport Environment |
|-------------|-----------------------|---------------|----------------------------------|-----------------------|
| Preferred | 8.5 mL (3 mL) | Whole Blood | ACD Solution A or B (Yellow Top) | Room Temperature |
| Alternate 1 | 8.5 mL (3 mL) | Whole Blood | EDTA (Lavender Top) | Room Temperature |
| Alternate 2 | 1 | Saliva | Oragene Dx saliva kit | Room Temperature |
| Alternate 3 | 1 | Buccal swab | PurFlock buccal swab kit | Room Temperature |

Instructions

Specimen Type: Whole blood or PurFlock buccal swab kit or Oragene Dx saliva kit
Specimen Volume: 8.5 mL whole blood or PurFlock buccal swab kit or Oragene Dx saliva kit
Minimum Volume: 3 mL whole blood or PurFlock buccal swab kit or Oragene Dx saliva kit
Collection: Standard phlebotomy. Follow PurFlock buccal swab kit or Oragene Dx 500 saliva kit collection instructions. Do not eat, drink, smoke, or chew gum 30 min prior to collection.
Specimen Storage: Maintain specimen at room temperature or refrigerate at 4C Do not freeze.
Special Instructions: Males are not tested for x-linked disorders, including fragile X syndrome. Test orders must include an attestation that the provider has the patient's informed consent for genetic testing.

GENERAL INFORMATION

| | |
|-------------------------------------|--|
| Expected TAT | 14 - 21 days In some cases, additional time may be required for confirmatory or reflex tests. |
| Clinical Use | This test includes the following genes: ABCA3, ABCC8, ABCD1, ACADM, ACADVL, ACAT1, AGA, AGXT, AHI1, AIRE, ALDOB, ALPL, ANO10, ARSA, ARX, ASL, ASPA, ATP7B, BBS1, BBS2, BCKDHB, BLM, BTB, CBS, CC2D2A, CCDC88C, CEP290, CFTR, CHRNE, CLCN1, CLRN1, CNGB3, COL7A1, CPT2, CYP11A1, CYP21A2, CYP27A1, CYP27B1, DHCR7, DHDDS, DLD, DMD, DYNC2H1, ELP1, ERCC2, EVC2, F9, FAH, FANCC, FKRP, FKTN, FMO3, FMR1, G6PC1, GAA, GALT, GBA, GBE1, GJB2, GLA, GNPTAB, GRIP1, HBA1, HBA2, HBB, HEXA, HPS1, HPS3, IDUA, L1CAM, LRP2, MCCC2, MCOLN1, MCPH1, MID1, MLC1, MMACHC, MMUT, MVK, NAGA, NEB, NPHS1, NR0B1, OCA2, OTC, PAH, PCDH15, PKHD1, PLP1, PMM2, POLG, PRF1, RARS2, RNASEH2B, RPGR, RS1, SCO2, SLC19A3, SLC26A2, SLC26A4, SLC37A4, SLC6A8, SMN1, SMPD1, TF, TMEM216, TNXB, TYR, USH2A and XPC. |
| Performing Labcorp Test Code | 481816 |
| Notes | Clinical Questionnaire for Inheritest® Carrier Screen and GeneSeq® PLUS |
| Lab Section | Reference Lab |