Labcorp Oklahoma, Inc. Test Directory

GeneSeq PLUS, TTR

Order Name: GeneSeq P/TTR

Test Number: 5194961 Revision Date: 03/21/2023

TEST NAME		MET	HODOLOGY	LOINC CODE	
GeneSeq PLUS, TTR		Poly	olymerase Chain Reaction		
SPECIMEN REQUIRE	MENTS				
OI EOIMEN REGUIRE	MENTO				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	5 mL (3 mL)	Whole Blood	ACD Solution A or B (Yellow Top)	Room Temperature	
Alternate 1	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	Buccal swab in UTM	Room Temperature	
Instructions	uctions 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				
	Mininum 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: In cases in which there is a known variant documented in the family, the physician may prefer to order Targeted Variant				

GENERAL INFORMATION				
14 - 21 days In some cases, additional time may be required for confirmatory or reflex tests.				
This test is used for diagnostic testing for transthyretin amyloidosis and presymptomatic testing for family members. Technologies used do not detect germline mosaicism and do not rule out the presence of large chromosomal aberrations including rearrangements and gene fusions, or variants in regions or genes not included in this test, or possible inter/intragenic interactions between variants or repeat expansions. Variant classification and/or interpretation may change over time if more information becomes available. False positive or false negative results may occur for reasons that include: rare genetic variants, sex chromosome abnormalities, pseudogene interference, blood transfusions, bone marrow transplantation, somatic or tissue-specific mosaicism, mislabeled samples or erroneous representation of family relationships.				
482353				
Labcorp Test Code: 482353				
Reference Lab				

Analysis, test code 5194970. Test orders must include an attestation that the provider has the patient's informed consent for genetic testing.

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