GeneSeq PLUS, Fetal Analysis

Order Name: **GeneSeq P/Fetal**
Test Number: 5194963
Revision Date: 03/21/2023

TEST NAME	METHODOLOGY	LOINC CODE
GeneSeq PLUS, Fetal Analysis	Polymerase Chain Reaction	

SPECIMEN REQUIREMENTS

Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	**4 mL (3 mL)**	**Amniotic Fluid**	**Sterile Screwtop Container**	**Room Temperature**
Alternate 1	**See Instructions**	**See Instructions**	**See Instructions**	**Room Temperature**

Instructions

Specimen Type: 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.
Specimen Volume: 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.
Mininum Volume: Amniotic fluid: 10 mL or CVS: 10 mg or amniotic fluid and CVS culture: one confluent T-25 flask or 3 mL cordblood
Collection: Standard sterile techniques. Transfer aseptically to sterile tubes. Amniotic fluid: Discard first 2mL of fluid aspirated to avoid maternal cell contamination.
Specimen Storage: Maintain specimen at room temperature. Do not freeze.
Special Instructions: The specific gene(s) to be analyzed must be indicated on the test requisition form. Failure to indicate the gene(s) will result in testing delays. Variants of uncertain significance (VUS) will be reported unless VUS opt out is indicated on the requisition. Labcorp clients with 8 digit client account numbers should call 800-345-4363 and Labcorp Genetics & 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.

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 all genes included in any Inheritest® or GeneSeq®: Cardio panel except SMN1 and FMR1. 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.
Performing Labcorp Test Code	482389
Notes	Labcorp Test Code: 482389
Lab Section	Reference Lab