

Targeted Variant Analysis

Order Name: Targeted Var WB

Test Number: 5194970

Revision Date: 03/21/2023

TEST NAME	METHODOLOGY	LOINC CODE
Targeted Variant Analysis	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	<p><b>Specimen Type:</b> Whole blood or PurFlock buccal swab kit or Oragene Dx saliva kit</p> <p><b>Specimen Volume:</b> 8.5 mL whole blood or PurFlock buccal swab kit or Oragene Dx saliva kit</p> <p><b>Mininum Volume:</b> 3 mL whole blood or PurFlock buccal swab kit or Oragene Dx saliva kit</p> <p><b>Collection:</b> 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.</p> <p><b>Specimen Storage:</b> Maintain specimen at room temperature or refrigerate at 4C Do not freeze.</p> <p><b>Special Instructions:</b> The specific gene and variant(s) to be analyzed must be indicated on the test requisition form. Failure to indicate the gene and variant will result in testing delays. Please include a copy of the previously tested family member's laboratory report for documentation. Please call 800-255-7357 to speak with a laboratory genetic coordinator before submitting specimens for Targeted Variant Analysis. If previous testing was performed at an outside laboratory, submitting a positive control sample is highly recommended. Test orders must include an attestation that the provider has the patient's informed consent for genetic testing. See sample physician office consent form: Consent for Genetic Testing.</p>			

GENERAL INFORMATION	
Expected TAT	14 - 21 days In some cases, additional time may be required for confirmatory or reflex tests.
Clinical Use	This test is used for testing for a known variant documented in the family and is available only for genes included in Inheritest® and GeneSeq® Cardio panels. This test includes all genes included in any Inheritest or GeneSeq®: Cardio panel except SMN1 and FMR1.
Performing Labcorp Test Code	482552
Notes	Labcorp Test Code: 482552
Lab Section	Reference Lab