TEST CHANGE

Galactosemia (*GALT*) 9 Mutations, Fetal

0051270, GALTDNA FE

Specimen Requirements:	
Patient Preparation:	
Collect:	Fetal: Cultured Amniocytes, Cultured CVS AND Maternal Whole Blood Specimen: Lavender (EDTA), pink (K2EDTA), or yellow (ACD solution A or B).
Specimen Preparation:	Cultured Amniocytes or Cultured CVS: Transfer cultured amniocytes or cultured CVS to two T-25 flasks at 80 percent confluence. (Min: one T-25 flask at 80 percent confluence) Backup cultures must be retained at the client's institution until testing is complete. If ARUP receives a sample below the minimum confluence, Cytogenetics Grow and Send (ARUP test code 0040182) will be added on by ARUP, and additional charges will apply. If clients are unable to culture specimens, Cytogenetics Grow and Send should be added to the initial order. Maternal Whole Blood Specimen: 2 mL whole blood (Min: 1 mL).
Transport Temperature:	Cultured Amniocytes or Cultured CVS: CRITICAL ROOM TEMPERATURE. Must be received within 48 hours of collection due to viability of cells. Maternal Whole Blood Specimen: Room temperature
Unacceptable Conditions:	
Remarks:	
Stability:	Cultured Amniocytes or Cultured CVS: Room temperature: 48 hours; Refrigerated: Unacceptable; Frozen: Unacceptable Maternal Whole Blood Specimen: Room temperature: 7 days; Refrigerated: 1 month; Frozen: Unacceptable
Methodology:	Polymerase Chain Reaction (PCR) / Single Nucleotide Extensions
Note:	This test is offered to individuals with a known familial mutation(s).
CPT Codes:	81401; 81265 Fetal Cell Contamination (FCC)
New York DOH Approval Status:	This test is New York DOH approved.
Interpretive Data:	
Refer to report.	
Reference Interval:	
By report	

HOTLINE NOTE: There is a prompt change associated with this test. Refer to the Hotline Test Mix for interface build information.