

HOTLINE: Effective August 15, 2022

2012010 Skeletal Dysplasia Panel, Sequencing and Deletion/Duplication, Fetal SKEL FE

Specimen Required: Collect: **Fetal Specimen:** Four (4) T-25 flasks at 80% confluent of cultured amniocytes or cultured chorionic villus sampling (CVS). **AND Maternal Whole Blood Specimen:** Lavender (EDTA), pink (K₂EDTA), or yellow (ACD Solution A or B).
Specimen Preparation: **Cultured Amniocytes or Cultured CVS:** Fill flasks with culture media. Transport four (4) T-25 flasks at 80 percent confluent of cultured amniocytes or cultured CVS filled with culture media. Backup cultures must be retained at the client's institution until testing is complete. **If the client is unable to culture amniocytes, this can be arranged by contacting ARUP Client Services at (800) 522-2787 ext. 2141 prior to test submission.**
Maternal Whole Blood Specimen: Transport 3 mL whole blood (Min: 2 mL)
Storage/Transport Temperature: **Cultured Amniocytes or Cultured CVS: CRITICAL ROOM TEMPERATURE.** Must be received within 48 hours of shipment due to viability of cells.
Maternal Specimen: Room temperature.
Stability (collection to initiation of testing): **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

Note: Genes Tested: *AGPS; ALPL; ARSL; CANT1; CCN6; CILK1; COL1A1; COL1A2*; COL2A1; COL10A1; COL11A1; COL11A2; COMP; CRTAP; DDR2; DLL3; DYM*; DYNC2H1; EBP; EVC; EVC2; FGFR1*; FGFR2; FGFR3; FKBP10; FLNA; FLNB; GDF5; GNPAT; HSPG2; IFT80; INPPL1; LBR; LIFR; NEK1*; NPR2; P3H1; PCNT; PEX7; POR*; PPIB; PTH1R; RUNX2; SERPINH1; SLC26A2; SLC35D1; SMARCAL1; SOX9; TRIP11; TRPV4; TTC21B; WDR19; WDR35*

* One or more exons are not covered by sequencing and/or deletion/duplication analysis for the indicated gene; see Additional Technical Information.

Reported times are based on receiving the four T-25 flasks at 80 percent confluent. Cell culture time is independent of testing turnaround time. Maternal specimen is recommended for proper test interpretation. Order Maternal Cell Contamination.

CPT Code(s): 81405; 81408; 81479; 81265 Fetal Cell Contamination (FCC)