

TEST CHANGE

Cystic Fibrosis (CFTR) Expanded Variant Panel, Fetal

2013662, CF VAR FE

Specimen Requirements:

Patient Preparation:

Collect: Amniotic fluid OR cultured amniocytes OR cultured CVS: Two T-25 flasks at 80 percent confluency. AND ~~maternal whole blood for maternal cell contamination:~~ lavender (~~K2 or K3EDTA~~ EDTA), pink (K2EDTA), yellow (ACD solution A or B). If the client is unable to culture, order test Cytogenetics Grow and Send (ARUP test code 0040182) in addition to this test and ARUP will culture upon receipt (culturing fees will apply). If you have any questions, contact ARUP's Genetics Processing at 800-522-2787 ext. 3301.

Specimen Preparation: Amniotic fluid: Transport 10 mL amniotic fluid in a sterile container (~~m~~Min: 5 mL) OR cultured amniocytes OR cultured CVS: Fill flasks with culture media. Backup cultures must be retained at the client's institution until testing is complete. ~~AND Whole blood for maternal whole blood: 2~~ ~~contamination:~~ ~~Transport 3 mL whole blood- (m~~Min: 1 mL).

Transport Temperature: Amniotic fluid, cultured amniocytes, or cultured CVS: CRITICAL ROOM TEMPERATURE. Must be received within 48 hours of shipment due to lability of cells. ~~Maternal whole~~ ~~Whole blood:~~ ~~Room temperature for maternal cell contamination:~~ Refrigerated.

Unacceptable Conditions: Frozen specimens in glass collection tubes.

Remarks: Patient History Form is available on the ARUP Web site or by contacting ARUP Client Services.

Stability: Fetal Specimen: Ambient 48 hours; Refrigerated: 48 hours; Frozen: Unacceptable ~~Maternal whole~~ ~~Whole blood for maternal cell contamination:~~ Ambient: 72 hours; Refrigerated: 1 week; Frozen: ~~Unacceptable~~ 1 month

Methodology: Matrix-Assisted Laser Desorption Ionization-Time of Flight (MALDI-TOF) Mass Spectrometry/Fragment Analysis

Performed: Sun-Sat

Reported: 7-10 days

Note: The Cystic Fibrosis (CFTR) Expanded Variant Panel includes 23 pathogenic CFTR variants recommended by the American College of Medical Genetics for population carrier screening.

CPT Codes: 81220; 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
