

TEST CHANGE

Cytochrome P450 Genotyping Panel

3001524, CYP PANEL

Specimen Requirements:

Patient Preparation:

Collect: Lavender (K2EDTA), pink (K2EDTA), or yellow (ACD solution A or B).

Specimen Preparation: Transport 3 mL whole blood. (Min: 1 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions: Plasma or serum. Specimens collected in sodium heparin or lithium heparin. Frozen specimens in glass collection tubes.

Remarks:

Stability: Ambient: 72 hours; Refrigerated: 1 week; Frozen: 1 month

Methodology: Polymerase Chain Reaction (PCR)/Fluorescence Monitoring/Sequencing

Performed: Varies

Reported: 5-10 days

Note: If long-range PCR/duplication testing is performed, additional charges will apply. Approximately less than 5% of samples require 2D6 copy number determination.

CPT Codes: 81225; 81226; 81227; 81230; 81231; 81479; if reflexed, add 81479

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

Refer to report.

Counseling and informed consent are recommended for genetic testing. Consent forms are available online.

Reference Interval:

By report

HOTLINE NOTE: There is a component change associated with this test. One or more components

have been added or removed. Refer to the Hotline Test Mix for interface build information.