

## TEST CHANGE

### Cytogenomic Molecular Inversion Probe Array FFPE Tissue - Products of Conception 3004273, CMAPFFPE

#### Specimen Requirements:

##### Patient Preparation:

**Collect:** Fetal autopsy or products of conception.

**Specimen Preparation:** FFPE Fetal tissue: Transport ten slides, each with 5 microm unstained sections or four 20 microm scrolls or tissue block. OR FFPE villi: Transport one H&E stained slide and ten slides, each with 5 microm unstained sections or tissue block. New York State Clients: Transport 1 FFPE block or 10 slides (10 microm each).

**Transport Temperature:** Room temperature. Also acceptable: Refrigerated. Ship in cooled container during summer months.

**Unacceptable Conditions:** Specimens fixed or processed in alternative fixatives or heavy metal fixatives (B-4 or B-5).

**Remarks:** If multiple specimens (blocks or slides) are sent to ARUP, they must be accompanied by one of the following: an order comment indicating that the ARUP pathologist should choose the specimen most appropriate for testing (e.g., "Choose best block"), or individual orders for each sample submitted. A Pathologist Block Selection Fee (ARUP test code 3002076) will be added to orders that utilize the first option. If multiple specimens are sent to ARUP without a request for pathologist block/slide selection or individual orders, they will be held until clarification is provided.

**Stability:** Ambient: Indefinitely; Refrigerated: Indefinitely; Frozen: Unacceptable

**Methodology:** Molecular Inversion Probe Array

**Performed:** Sun-Sat

**Reported:** 14-21 days

**Note:** If sending placenta instead of fetal tissue, at least 80% villi for products of conception specimens. This test must be ordered using Cytogenetic test request form #43098 or through your ARUP interface. Please submit the Patient History for Prenatal Cytogenetics form with the electronic packing list

(<http://ltd.aruplab.com/Tests/Pdf/65>).

CPT Codes: 81229

New York DOH Approval Status: Specimens from New York clients will be sent out to a New York DOH approved laboratory, if possible.

**Interpretive Data:**

For detection of copy number alterations and loss of heterozygosity in FFPE specimens.  
Refer to report.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

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

Reference Interval:

**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.