

HOTLINE: Effective November 14, 2022

New Test **3005708** **Hereditary Pancreatic Cancer Panel, Sequencing and Deletion/Duplication** **PANCAN NGS**



Patient History for Hereditary Pancreatic Cancer Testing



Additional Technical Information

Methodology: Massively Parallel Sequencing/Sequencing/Multiplex Ligation-dependent Probe Amplification
Performed: Varies
Reported: 3-6 weeks

Specimen Required: Collect: Lavender or pink (EDTA) or yellow (ACD solution A or B).
Specimen Preparation: Transport 3 mL whole blood. (Min: 2 mL)
New York State Clients: Transport 10 mL whole blood (Min: 7 mL)
Storage/Transport Temperature: Refrigerated.
Unacceptable Conditions: Serum or plasma; grossly hemolyzed or frozen specimens; saliva, buccal brush, or swab; FFPE tissue; DNA.
Stability (collection to initiation of testing): Ambient: 72 hours; Refrigerated: 1 week; Frozen: Unacceptable

Reference Interval: By report

Interpretive Data:
Refer to report.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. 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.

Note: Genes Tested: *APC**; *ATM*; *BRCA1**; *BRCA2*; *CDK4*; *CDKN2A**; *EPCAM***; *MEN1**; *MLH1*; *MSH2*; *MSH6*; *PALB2*; *PMS2*; *STK11*; *TP53*; *VHL**

*One or more exons are not covered by sequencing and/or deletion/duplication analysis for the indicated gene; see Additional Technical Information.
**Deletion/duplication analysis of EPCAM (NM_002354) exon 9 only, sequencing is not available for this gene.

CPT Code(s): 81201; 81203; 81408; 81162; 81292; 81294; 81295; 81297; 81298; 81300; 81307; 81317; 81319; 81404; 81405; 81351; 81403; 81479

New York DOH approval pending. Call for status update.

HOTLINE NOTE: Refer to the Test Mix Addendum for interface build information.