

TEST CHANGE

Rapid Whole Genome Sequencing, Familial Control with Report

3005933, RWGS FRPT

Specimen Requirements:

Patient Preparation:

Collect: Lavender ~~or pink~~ (EDTA) ~~or yellow~~ (ACD solution A or B). Peripheral blood required. Contact ARUP's genetic counselor at 800-242-2787 ext. 2141 prior to test submission.

Specimen Preparation: Transport 2 mL whole blood. (Min: 0.5 mL)

Transport Temperature: Refrigerated.

Unacceptable Conditions:

Remarks: This test is used for parental control samples associated with a proband sample submitted for [Rapid Whole Genome Sequencing \(ARUP test code 3005935\)](#). ~~RWGS-NGS~~. A report will be provided for samples ordered using this test code. If a report for parental control sample is not desired, order [Rapid Whole Genome Sequencing, Familial Control \(ARUP test code 3005928\)](#). ~~RWGS-FAM (3005928)~~.

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

Methodology: Massively Parallel Sequencing

Performed: Varies

Reported: 5-7 days

Note: Parental samples are used to aid in interpretation of the proband's genome sequencing data. This test is ordered when a report of [the American College of Medical Genetics and Genomics \(ACMG\)](#) ~~ACMG~~ secondary findings is desired for submitted parental controls. For each parental specimen, please indicate on the intake form that the sample is control and reference the patient's name.

CPT Codes: NA

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:

Refer to report.

Reference Interval:

By report
