

TEST CHANGE

Whole Genome Reanalysis

3005939, RWGS REA

Specimen Requirements:

Patient Preparation:

Collect: No new specimen is required to process this test. New York State Clients: ARUP cannot facilitate testing for New York patients. Please work directly with a New York-approved laboratory.

Specimen Preparation:

Transport Temperature:

Unacceptable Conditions:

Remarks: Patient History Form for Rapid Whole Genome Reanalysis (REQUIRED); Fax to Genetics Processing at 801-584-5249.

Stability:

Methodology: Bioinformatic Processing and Variant Analysis

Performed: Varies

Reported: ~~14-Within~~ 21 days

Note: Only the proband will receive an updated report. The most current list of American College of Medical Genetics and Genomics (ACMG) recommended genes will be examined for the proband if consent for reporting ACMG variants was originally provided.

CPT Codes: 81427

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.