

NEW TEST

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Platelet Antigen Genotyping Panel, Fetal

3016673, HPAGENO FE

Specimen Requirements:

Patient Preparation:

Collect: Fetal genotyping: Amniotic fluid Cultured amniocytes: Two T-25 flasks at 80 percent confluency. If the client is unable to culture, order test Cytogenetics Grow and Send (ARUP test code 0040182) in addition to this test and ARUP will culture upon receipt (culturing fees will apply). If you have any questions, contact ARUP's Genetics Processing at 800-522-2787 ext. 3301. AND Maternal cell contamination specimen: Lavender (EDTA), pink (K2EDTA), or yellow (ACD solution A or B).

Specimen Preparation: Amniotic fluid: Transport 10 mL amniotic fluid in a sterile container. (Min: 5 mL) OR Cultured amniocytes: Transport two T-25 flasks at 80 percent confluency filled with culture media. Backup cultures must be retained at the client's institution until testing is complete. Maternal cell contamination specimen: Transport 3 mL whole blood. (Min: 1 mL) Whole blood (parental genotyping): Transport 3 mL whole blood. (Min: 1 mL)

Transport Temperature: Amniotic fluid, cultured amniocytes: CRITICAL ROOM TEMPERATURE. Must be received within 48 hours of shipment due to lability of cells. Whole blood or maternal cell contamination specimen: Refrigerated.

Unacceptable Conditions: Frozen specimens in glass collection tubes.

Remarks:

Stability: Fetal specimens Amniotic fluid or cultured amniocytes: Ambient: 48 hours; Refrigerated: Unacceptable; Frozen: Unacceptable Whole blood or maternal cell contamination specimen: Ambient: 72 hours; Refrigerated: 1 week; Frozen: 1 month

Methodology: Polymerase Chain Reaction (PCR)/Fluorescence Monitoring/Fragment Analysis

Performed: Varies

Reported: 7-14 days

Note: Please submit maternal specimen if amniotic fluid is bloody. Maternal specimen is recommended for proper test interpretation; order Maternal Cell Contamination, Maternal Specimen.

CPT Codes: 81105; 81106; 81107; 81108; 81109; 81110; 81112; 81265
Fetal Cell Contamination (FCC)

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

Interpretive Data:

Reference Interval:

Test Number	Components	Reference Interval
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HOTLINE NOTE: Refer to the Hotline Test Mix for interface build information.