

TEST CHANGE

Genome Sequencing, Familial Comparator

3019951, WGS FM

Specimen Requirements:

Patient Preparation:

Collect: Preferred: Whole blood in lavender (EDTA) or pink (EDTA)
Acceptable: Oragene(TM) saliva collection kit, or equivalent saliva collection device, collected in accordance with manufacturer instructions. Saliva in collection device suitable for human DNA extraction.
New York State Clients: ARUP cannot facilitate testing for New York patients. Please work directly with a New York-approved laboratory.

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

Transport Temperature: Refrigerated.

Unacceptable Conditions:

Remarks: Refer to Genome Sequencing (ARUP test code 3019943) for proband specimen requirements.

This test is used for parental or other familial comparator samples associated with a proband sample submitted for Genome Sequencing (ARUP test code 3019943). Comparator samples must be submitted within 7 days of the proband's sample. Please list the name/DOB of submitted familial comparators on the proband's Genome Sequencing Intake Form.

~~If reporting of secondary findings is desired for comparator individual(s), indicate opt-in status on the proband's Genome Sequencing Intake Form (additional charges apply).~~

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

Methodology: Qualitative Massively Parallel Sequencing

Note: Parental or other familial comparator samples are used to aid interpretation of the proband's genome sequencing data.

Contact ARUP's genetic counselors at 800-242-2787 ext. 2141 with questions about test submission.

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:
