

Reporting Title: Beta Globin Cluster Locus Del/Dup,B
Performing Location: Rochester

Specimen Requirements:
Only orderable as a reflex. For more information see:
-HAEV1 / Hemolytic Anemia Evaluation, Blood
-HBEL1 / Hemoglobin Electrophoresis Evaluation, Blood
-MEV1 / Methemoglobinemia Evaluation, Blood
-REVE2 / Erythrocytosis Evaluation, Blood
-THEV1 / Thalassemia and Hemoglobinopathy Evaluation, Blood and Serum

Specimen Type: Whole blood
Collection Container/Tube:
Preferred: Lavender top (EDTA)
Acceptable: Yellow top (ACD)
Specimen Volume: 4 mL
Collection Instructions:
1. Invert several times to mix blood.
2. Send specimen in the original tube. **Do not aliquot.**

Specimen Type	Temperature	Time	Special Container
Whole Blood EDTA	Refrigerated		

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
48356	Beta Globin Cluster Locus Del/Dup	Alphanumeric		50397-9
48355	Reviewed by	Alphanumeric		18771-6
48357	Interpretation	Alphanumeric		59466-3

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:
No

CPT Code Information:
81363-HBB (hemoglobin, beta, beta-globin) (eg, beta thalassemia), duplication/deletion analysis

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An interpretive report will be provided.