

**Reporting Title:** Comprehensive Nephrology Gene Panel  
**Performing Location:** Rochester

**Ordering Guidance:**  
Targeted testing for familial variants (also called site-specific or known mutations testing) is available for the genes on this panel. See FMTT / Familial Variant, Targeted Testing, Varies. To obtain more information about this testing option, call 800-533-1710.

Customization of this panel and single gene analysis for any gene present on this panel are available. For more information, see CGPH / Custom Gene Panel, Hereditary, Next-Generation Sequencing, Varies.

**Shipping Instructions:**  
Specimen preferred to arrive within 96 hours of collection.

**Specimen Requirements:**  
**Patient Preparation:** A previous bone marrow transplant from an allogenic donor will interfere with testing. Call 800-533-1710 for instructions for testing patients who have received a bone marrow transplant.

**Container/Tube:**  
**Preferred:** Lavender top (EDTA) or yellow top (ACD)  
**Acceptable:** Any anticoagulant  
**Specimen Volume:** 3 mL  
**Collection Instructions:**  
1. Invert several times to mix blood.  
2. Send whole blood specimen in original tube. **Do not aliquot.**  
**Specimen Stability Information:** Ambient (preferred)/Refrigerated

**Forms:**  
**1. New York Clients-Informed consent is required.** Document on the request form or electronic order that a copy is on file. The following documents are available:  
[-Informed Consent for Genetic Testing](#) (T576)  
[-Informed Consent for Genetic Testing \(Spanish\)](#) (T826)  
**2. Hereditary Renal Genetic Testing Patient Information** (T918)

| Specimen Type | Temperature | Time | Special Container |
|---------------|-------------|------|-------------------|
| Varies        | Varies      |      |                   |

**Result Codes:**

| Result ID | Reporting Name   | Type         | Unit | LOINC®  |
|-----------|------------------|--------------|------|---------|
| 618087    | Test Description | Alphanumeric |      | 62364-5 |
| 618088    | Specimen         | Alphanumeric |      | 31208-2 |
| 618089    | Source           | Alphanumeric |      | 31208-2 |
| 618090    | Result Summary   | Alphanumeric |      | 50397-9 |
| 618091    | Result           | Alphanumeric |      | 82939-0 |

|        |                        |              |  |         |
|--------|------------------------|--------------|--|---------|
| 618092 | Interpretation         | Alphanumeric |  | 69047-9 |
| 618093 | Additional Results     | Alphanumeric |  | 82939-0 |
| 618094 | Resources              | Alphanumeric |  | 99622-3 |
| 618095 | Additional Information | Alphanumeric |  | 48767-8 |
| 618096 | Method                 | Alphanumeric |  | 85069-3 |
| 618097 | Genes Analyzed         | Alphanumeric |  | 48018-6 |
| 618098 | Disclaimer             | Alphanumeric |  | 62364-5 |
| 618099 | Released By            | Alphanumeric |  | 18771-6 |

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

Supplemental Report:

Supplemental

CPT Code Information:

- 81401 x 2
- 81404 x 12
- 81405 x 8
- 81406 x 22
- 81407 x 13
- 81408 x 5
- 81479
- 81479 (if appropriate for government payers)

Reference Values:

An interpretive report will be provided.