

**Reporting Title:** Apolipoprotein E Genotyping, B**Performing Location:** Rochester**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.

Specimen Type: Whole blood

Container/Tube:

Preferred: Lavender top (EDTA) or yellow top (ACD)

Acceptable: Any anticoagulant

Specimen Volume: 3 mL

Collection Instructions:

1. Invert whole blood several times to mix blood. Do not aliquot.
2. Send specimen in original tube.

**Specimen Minimum Volume:**

1 mL

**Forms:**

1. New York Clients-Informed consent is required. Document on the request form or electronic order that a copy is on file.

-Informed Consent for Genetic Testing (T576)

-Informed Consent for Genetic Testing-Spanish (T826)

2. Molecular Genetics: Neurology Patient Information

3. If not ordering electronically, complete, print, and send a Neurology Specialty Testing Client Test Request (T732) with the specimen.

Specimen Type	Temperature	Time	Special Container
Varies	Ambient (preferred)		
	Frozen		
	Refrigerated		

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**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
53198	Result Summary	Alphanumeric		50397-9
53199	Result	Alphanumeric		42315-2
53200	Interpretation	Alphanumeric		69047-9
53201	Reason for Referral	Alphanumeric		42349-1
53202	Specimen	Alphanumeric		31208-2
53203	Source	Alphanumeric		31208-2
53204	Released By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

**Supplemental Report:**

No

**CPT Code Information:**

81401-APOE (apolipoprotein E) (eg, hyperlipoproteinemia type III, cardiovascular disease, Alzheimer disease), common variants (eg, \*2, \*3, \*4)