

Tuberous Sclerosis Gene Panel, Varies

Reporting Title: Tuberous Sclerosis Gene Panel

Performing Location: Rochester

#### **Ordering Guidance:**

Targeted testing (also called site-specific or known variant testing) is available for variants identified in this gene. See FMTT / Familial Variant, Targeted Testing, Varies.

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

### **Additional Testing Requirements:**

All prenatal specimens must be accompanied by a maternal blood specimen; order MATCC / Maternal Cell Contamination, Molecular Analysis, Varies on the maternal specimen as this must be a different order number than the prenatal specimen.

### **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. For instructions for testing patients who have received a bone marrow transplant, call 800-533-1710.

Submit only 1 of the following specimens:

Specimen Type: Whole blood

Container/Tube: Lavender top (EDTA) or yellow top (ACD)

Acceptable: Any anticoagulant Specimen Volume: 3 mL Collection Instructions:

1. Invert several times to mix blood.

Send whole blood specimen in original tube. Do not aliquot.Specimen Stability Information: Ambient (preferred)/Refrigerated

Specimen Type: Skin biopsy

Supplies: Fibroblast Biopsy Transport Media (T115)

Container/Tube: Sterile container with any standard cell culture media (eg, minimal essential media, RPMI 1640). The

solution should be supplemented with 1% penicillin and streptomycin.

Specimen Volume: 4-mm punch

Specimen Stability Information: Refrigerated (preferred)/Ambient

Additional Information: A separate culture charge will be assessed under CULFB / Fibroblast Culture for Biochemical or

Molecular Testing. An additional 3 to 4 weeks is required to culture fibroblasts before genetic testing can occur.

Specimen Type: Cultured fibroblasts

Container/Tube: T-25 flask



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Specimen Volume: 2 Flasks

Collection Instructions: Submit confluent cultured fibroblast cells from a skin biopsy from another laboratory.

Specimen Stability Information: Ambient (preferred)/Refrigerated (<24 hours)

Additional Information: A separate culture charge will be assessed under CULFB / Fibroblast Culture for Biochemical or

Molecular Testing. An additional 3 to 4 weeks is required to culture fibroblasts before genetic testing can occur.

Specimen Type: Blood spot

Supplies: Card-Blood Spot Collection (Filtration Paper) (T493)

Container/Tube:

Preferred: Collection card (Whatman Protein Saver 903 Paper)

Acceptable: PerkinElmer 226 (formerly Ahlstrom 226) filter paper or blood spot collection card (T493)

Specimen Volume: 5 Blood spots

Collection Instructions:

- 1. An alternative blood collection option for a patient older than 1 year is a fingerstick. For detailed instructions, see How to Collect Dried Blood Spot Samples.
- 2. Let blood dry on the filter paper at ambient temperature in a horizontal position for a minimum of 3 hours.
- 3. Do not expose specimen to heat or direct sunlight.
- 4. Do not stack wet specimens.
- 5. Keep specimen dry.

Specimen Stability Information: Ambient (preferred)/Refrigerated

Additional Information:

- 1. Due to lower concentration of DNA yielded from blood spot, it is possible that additional specimen may be required to complete testing.
- 2. For collection instructions, see Blood Spot Collection Instructions
- 3. For collection instructions in Spanish, see Blood Spot Collection Card-Spanish Instructions (T777)
- 4. For collection instructions in Chinese, see Blood Spot Collection Card-Chinese Instructions (T800)

Specimen Type: Saliva

Patient Preparation: Patient should not eat, drink, smoke, or chew gum 30 minutes prior to collection.

Supplies: Saliva Swab Collection Kit (T786)

Specimen Volume: 1 Swab

Collection Instructions: Collect and send specimen per kit instructions.

Additional Information: Due to lower concentration of DNA yielded from saliva, it is possible that additional specimen may

be required to complete testing.

Specimen Stability Information: Ambient 30 days

#### Prenatal Specimens

Due to its complexity, consultation with the laboratory is required for all prenatal testing; call 800-533-1710 to speak to a genetic counselor.

Specimen Type: Amniotic fluid

Container/Tube: Amniotic fluid container

Specimen Volume: 20 mL

Specimen Stability Information: Refrigerated (preferred)/Ambient

Additional information:

1. A separate culture charge will be assessed under CULAF / Culture for Genetic Testing, Amniotic Fluid.
2. All prenatal specimens must be accompanied by a maternal blood specimen; order MATCC / Maternal Cell

Contamination, Molecular Analysis, Varies on the maternal specimen.

Specimen Type: Chorionic villi

Container/Tube: 15-mL tube containing 15 mL of transport media



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Specimen Volume: 20 mg

Specimen Stability Information: Refrigerated

Additional Information:

1. A separate culture charge will be assessed under CULFB / Fibroblast Culture for Biochemical or Molecular Testing.

2. All prenatal specimens must be accompanied by a maternal blood specimen; order MATCC / Maternal Cell

Contamination, Molecular Analysis, Varies on the maternal specimen.

Acceptable:

Specimen Type: Confluent cultured cells

Container/Tube: T-25 flask Specimen Volume: 2 flasks

Collection Instructions: Submit confluent cultured cells from another laboratory.

Specimen Stability Information: Ambient (preferred)/Refrigerated

Additional Information: All prenatal specimens must be accompanied by a maternal blood specimen; order MATCC /

Maternal Cell Contamination, Molecular Analysis, Varies on the maternal specimen.

#### 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. Molecular Genetics: Neurology Patient Information
- 3. If not ordering electronically, complete, print, and send one of the following with the specimen:
- -Neurology Specialty Testing Client Test Request (T732)
- -Cardiovascular Test Request Form (T724)

Specimen Type	Temperature	Time	Special Container
Varies	Varies		

### Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Туре	Reportable
CULAF	CG767	Reason for Referral	Plain Text	No
CULFB	CG770	Reason for Referral	Plain Text	No
CULFB	CG899	Specimen	Plain Text	No

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#### **Result Codes:**

Result ID	Reporting Name	Туре	Unit	LOINC®
616538	Test Description	Alphanumeric		62364-5
616539	Specimen	Alphanumeric		31208-2
616540	Source	Alphanumeric		31208-2
616541	Result Summary	Alphanumeric		50397-9
616542	Result	Alphanumeric		82939-0
616543	Interpretation	Alphanumeric		69047-9
616544	Resources	Alphanumeric		In Process
616545	Additional Information	Alphanumeric		48767-8
616546	Method	Alphanumeric		85069-3
616547	Genes Analyzed	Alphanumeric		48018-6
616548	Disclaimer	Alphanumeric		62364-5
616549	Released By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

## **Supplemental Report:**

Supplemental

### **CPT Code Information:**

81406

81407

81265-Maternal cell contamination (if appropriate) 88233-Tissue culture, skin, solid tissue biopsy (if appropriate) 88235-Amniotic Fluid culture (if appropriate) 88240-Cryopreservation (if appropriate) 81479 (if appropriate for government payers)

### **Reflex Tests:**

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
MATCC	Maternal Cell Contamination, B			No	Yes
CULFB	Fibroblast Culture for Genetic Test			No	Yes

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Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
CULAF	Amniotic Fluid Culture/Genetic Test			No	Yes
_STR1	Comp Analysis using STR (Bill only)			No	No (Bill only)
_STR2	Add'l comp analysis w/STR (Bill Only)			No	No (Bill only)

## **Result Codes for Reflex Tests:**

Test ID	Result ID	Reporting Name	Туре	Unit	LOINC®
MATCC	53285	Result Summary	Alphanumeric		50397-9
MATCC	53286	Result	Alphanumeric		40704-9
MATCC	53287	Interpretation	Alphanumeric		69047-9
MATCC	53288	Reason for referral	Alphanumeric		42349-1
MATCC	53289	Specimen	Alphanumeric		31208-2
MATCC	53290	Source	Alphanumeric		31208-2
MATCC	55150	Method	Alphanumeric		85069-3
MATCC	53291	Released By	Alphanumeric		18771-6
CULFB	52327	Result Summary	Alphanumeric		50397-9
CULFB	52329	Interpretation	Alphanumeric		69965-2
CULFB	52328	Result	Alphanumeric		82939-0
CULFB	CG770	Reason for Referral	Alphanumeric		42349-1
CULFB	CG899	Specimen	Alphanumeric		31208-2
CULFB	52331	Source	Alphanumeric		31208-2
CULFB	52332	Method	Alphanumeric		85069-3
CULFB	54625	Additional Information	Alphanumeric		48767-8
CULFB	52333	Released By	Alphanumeric		18771-6
CULAF	52304	Result Summary	Alphanumeric		50397-9
CULAF	52306	Interpretation	Alphanumeric		69965-2
CULAF	52305	Result	Alphanumeric		82939-0
CULAF	CG767	Reason for Referral	Alphanumeric		42349-1
CULAF	52307	Specimen	Alphanumeric		31208-2



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Test ID	Result ID	Reporting Name	Туре	Unit	LOINC®
CULAF	52308	Source	Alphanumeric		31208-2
CULAF	52309	Method	Alphanumeric		85069-3
CULAF	54641	Additional Information	Alphanumeric		48767-8
CULAF	52310	Released By	Alphanumeric		18771-6

## **Reference Values:**

An interpretive report will be provided.