
Reporting Title: Bartter Syndrome Gene Panel**Performing Location: Rochester****Ordering Guidance:**

The genes associated with Gitelman syndrome (SLC12A3) and autosomal dominant familial hypocalciuric hypercalcemia (FHH) (CASR) are not included on this panel. If testing for these disorders and Bartter syndrome on a single panel is desired, order RSCGP / Nephrocalcinosis, Nephrolithiasis, and Renal Electrolyte Imbalance Gene Panel, Varies. It is inappropriate to order both this test and RSCGP on the same patient because the genes on this panel are included on the RSCGP panel.

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

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. 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®
618101	Test Description	Alphanumeric		62364-5
618102	Specimen	Alphanumeric		31208-2
618103	Source	Alphanumeric		31208-2
618104	Result Summary	Alphanumeric		50397-9
618105	Result	Alphanumeric		82939-0
618106	Interpretation	Alphanumeric		69047-9
618107	Additional Results	Alphanumeric		82939-0
618108	Resources	Alphanumeric		99622-3
618109	Additional Information	Alphanumeric		48767-8
618110	Method	Alphanumeric		85069-3
618111	Genes Analyzed	Alphanumeric		48018-6
618112	Disclaimer	Alphanumeric		62364-5
618113	Released By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:
 Supplemental

CPT Code Information:

81404
 81406
 81407
 81479
 81479 (if appropriate for government payers)

Reference Values:

An interpretive report will be provided.