

Reporting Title: HCV Genotype, S**Performing Location:** Rochester**Shipping Instructions:**

Ship specimen frozen on dry ice only. If shipment will be delayed for more than 3 days, freeze serum at -20 degrees C or colder (up to 42 days) until shipment on dry ice.

Specimen Requirements:

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

Collection Container/Tube: Serum gel

Submission Container/Tube: Plastic vial

Specimen Volume: 5 mL

Collection Instructions:

1. Centrifuge blood collection tube per collection tube manufacturer's instructions (eg, centrifuge and aliquot within 2 hours of collection for BD Vacutainer tubes).

2. Aliquot serum into plastic vial.

Additional Information:

1. Specimens should contain a recommended minimum hepatitis C virus viral load of 500 IU/mL.

2. Serum specimens previously submitted to other laboratories for non-microbiology tests are not acceptable for add-on test requests due to possible sample-to-sample carryover from automation used for those tests.

Specimen Minimum Volume:

1.5 mL

Forms:

If not ordering electronically, complete, print, and send 1 of the following:

-Gastroenterology and Hepatology Test Request (T728)

-Microbiology Test Request (T732)

Specimen Type	Temperature	Time	Special Container
Serum SST	Frozen (preferred)	42 days	ALIUOT TUBE
	Refrigerated	72 hours	ALIUOT TUBE

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
81618	HCV Genotype, S	Alphanumeric		32286-7

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

87902

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
HCVGR	HCV Genotype Resolution, S			No	No

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
HCVGR	64655	HCV Genotype Resolution, S	Alphanumeric		82512-5

Reference Values:

Undetected