

Test Definition: F81P

Hemophilia A F8 Gene, Intron 1 Inversion Known Mutation Analysis, Prenatal

Reporting Title: HA F8 Intron 1 Inversion, AF or CVS **Performing Location:** Rochester

Additional Testing Requirements:

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

All prenatal specimens must be accompanied by a maternal blood specimen. Order MATCC / Maternal Cell Contamination, Molecular Analysis, Varies on the maternal specimen.

Shipping Instructions:

Advise Express Mail or equivalent if not on courier service.

Necessary Information:

Hemophilia A Patient Information (T712) is required. Testing may proceed without the patient information, however, the information aids in providing a more thorough interpretation. Ordering providers are strongly encouraged to fill out the form and send with the specimen.

Specimen Requirements:

Results will be reported and telephoned or faxed, if requested.

Submit only 1 of the following specimens:

Specimen Type: Amniotic fluid

Container/Tube: Amniotic fluid container

Specimen Volume: 5-10 mL

Collection Instructions:

1. Optimal timing for specimen collection is during 14 to 18 weeks of gestation, but specimens collected at other weeks of gestation are also accepted.

2. Discard the first 2 mL of amniotic fluid. If the culture will be performed in conjunction with chromosome analysis and alpha-fetoprotein, a total of approximately 25 to 30 mL will be needed for the combined studies.

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

- 1. Place the tubes in a Styrofoam container.
- 2. Fill remaining space with packing material.
- 3. Unavoidably, about 1% to 2% of mailed-in specimens are not viable.
- 4. Bloody specimens are undesirable.

5. If the specimen does not grow in culture, you will be notified within 7 days of receipt.

6. A separate culture charge will be assessed under CULAF / Culture for Genetic Testing, Amniotic Fluid.

7. 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 Supplies: CVS Media (RPMI) and Small Dish (T095) Hemophilia A F8 Gene, Intron 1 Inversion Known Mutation Analysis, Prenatal

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Container/Tube: 15-mL tube containing 15 mL of transport media Specimen Volume: 20-30 mg Collection Instructions: 1. Collect specimen by the transabdominal or transcervical method. 2. Transfer the chorionic villi specimen to a Petri dish containing transport medium. 3. Using a stereomicroscope and sterile forceps, assess the quality and quantity of the villi and remove any blood clots and maternal decidua. Specimen Stability Information: Refrigerated (preferred) <24 hours/Ambient Additional Information: 1. 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. 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: Confluent cultured cells

Container/Tube: T-25 flask

Specimen Volume: 2 Flasks approximately 90% confluent

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Collection Instructions: Submit confluent cultured cells from another laboratory.

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

Specimen Minimum Volume:

Amniotic fluid: See Specimen Required Chorionic villi: 5 mg

Forms:

1. Hemophilia A Patient Information (T712) is required

2. 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)

3. If not ordering electronically, complete, print, and send a Coagulation Test Request (T753) with the specimen.

Specimen Type	Temperature	Time	Special Container
Varies	Varies		



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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

Result Codes:

Result ID	Reporting Name	Туре	Unit	LOINC®
35138	HA F8 Int1 KM Reason for Referral	Alphanumeric		42349-1
35004	HA F8 Intron 1 Inversion, AF or CVS	Alphanumeric		82342-7
35005	F81P Interpretation	Alphanumeric		69047-9
35006	HA F8 Int1 KM Reviewed By	Alphanumeric		18771-6

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

81403

Reflex Tests:

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



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Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Туре	Unit	LOINC®
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
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
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
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



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Reference Values:

An interpretive report will be provided.