Medical Genetics

Wake Forest University School of Medicine
Winston Salem NC
Phone: 336-716-4321 Fax: 336-716-2554

Test: Prenatal DNA Analysis - Amniotic Fluid / CVS / Fetal Blood

Molecular Genetic Testing

Purpose of Test: To identify specific DNA anomalies that are specifically associated with a genetic defect and/or clinical syndrome.

Specimen Required: Please provide indications for testing on our referral form with each specimen. Label each sample with the individual's full name. Accurate testing and interpretation may otherwise be compromised. Include the appropriate requisition form and billing instructions

SUBMIT 1 OF THE FOLLOWING SPECIMENS:

Prenatal Specimens - All prenatal specimens must be accompanied by a maternal blood specimen.

Amniotic Fluid - Obtain 20 mL of amniotic fluid. Transfer specimen to 2 screw-capped, sterile centrifuge tubes. Send specimen refrigerated. A separate culture charge will be assessed under "Amniotic Fluid Culture for Genetic Testing".

SPECIMEN CANNOT BE FROZEN.

Chorionic Villus - Obtain 20 mg of chorionic villus specimen. Send specimen refrigerated in transport media in 15-mL centrifuge tube. A separate culture charge will be assessed under "Fibroblast Culture for Genetic Testing". **SPECIMEN CANNOT BE FROZEN.**

Fetal Blood (PUBS) - Draw 1 lavender-top (EDTA) tubes or 1 yellow-top (ACD) tubes of whole blood (1 mL) and send in the original VACUTAINERS. Invert several times to mix blood. Forward unprocessed whole blood promptly at ambient temperature.

Average Turn around Time: 1-2 weeks from receipt of specimen is typical.

CPT Code Information:

83891	DNA extract-purify
83892	Enzyme digestion
83894x2	Electrophoresis
83896	Nucleic acid probe, each
83897	Nucleic acid transfer
83898	Amplification of nucleic acid, each primer pair
83912	Interpretation and report