

**GALACTOSE-1-PHOSPHATE URIDYLTRANSFERASE BIOCHEMICAL
PHENOTYPING, ERYTHROCYTES
#80341**

EXPLANATION: Due to backordered reagent, this test will be down until further notice. The specimens will be stabilized and held in the laboratory until testing resumes. Test #80341 is normally ordered in conjunction with test #8333, Galactose-1-Phosphate Uridyltransferase, Blood. Test #8333 will continue to be performed during this test down period.

POSSIBLE ALTERNATIVE TEST: If your physician does not want to wait until testing is resumed, the following alternative Molecular test is available. To change to or add-on this alternative test, please call Mayo Laboratory Inquiry at 800-533-1710.

#84366, Galactosemia Gene Analysis (6-Mutation Panel).

SPECIMEN REQUIREMENTS: "Molecular Genetics - Biochemical Disorders Patient Information Sheet" (Supply T527 or see Special Instructions) and documentation of enzymatic studies is required for all orders. If not ordering electronically, please submit the above information sheet along with a "Molecular Genetics Request Form" (Supply T245) with the specimen. An "Informed Consent for DNA Testing" (Supply T576) is available. See Special Instructions for a copy of the form.

Specimen must arrive within 96 hours of collection.

Draw blood in a lavender-top (EDTA) tube, and send 3 mL of EDTA whole blood in original VACUTAINER. Invert several times to mix blood. Forward unprocessed whole blood promptly at ambient temperature.

LIST FEE: \$509.60

CPT CODE: 83890/Molecular isolation or extraction
83896/x6 Nucleic acid probe, each
83898/x6 Amplification, target, each nucleic acid sequence
83912/Interpretation and report

ANALYTIC TIME: 5 days

DAY(S) SET-UP: Tuesday, Thursday; 2 p.m.

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager or
Sara Siewert, Mayo Medical Laboratories' Technologist Support
Telephone: 800-533-1710