Reporting Title: Fibroblast Culture for Genetic Test
Performing Location: Rochester

Specimen Requirements:

Provide a reason for referral with each specimen. The laboratory will not reject testing if this information is not provided, but appropriate testing and interpretation may be compromised or delayed.

Forms: If not ordering electronically, submit a Cytogenetics/AFP Congenital Disorders Request Form (Supply T238) with the specimen.
Advise Express Mail or equivalent if not on courier service.

Submit only 1 of the following specimens:

Specimen Type: Autopsy
Container/Tube: Sterile container with sterile Hank's balanced salt solution (Supply T132), Ringer's solution, or normal saline
Specimen Volume: 4-mm diameter
Collection Instructions:
1. Wash biopsy site with an antiseptic soap.
2. Thoroughly rinse area with sterile water.
3. Do not use alcohol or iodine preparations.
4. Biopsy specimens are best taken by punch biopsy to include full thickness of dermis.

Specimen Type: Chorionic villi
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 (Supply T095).
3. Using a stereomicroscope and sterile forceps, assess the quality and quantity of the villi and remove any blood clots and maternal decidua.

Specimen Type: Products of conception or stillbirth
Container/Tube: Sterile container with sterile Hank's balanced salt solution (Supply T132), Ringer's solution, or normal saline
Specimen Volume: 1 cm(3) of placenta (including 20 mg of chorionic villi) and a 1 cm(3) biopsy specimen of muscle/fascia from the thigh
Collection Instructions: If a fetus cannot be specifically identified, collect 50 mg villus material or tissue that appears to be of fetal origin.
Additional Information: Do not send entire fetus.
Forms: Final Disposition of Fetal/Stillborn Remains form (if fetal specimen is sent) in Special Instructions.

Specimen Type: Skin biopsy
Container/Tube: Sterile container with sterile Hank's balanced salt solution (Supply T132), Ringer's solution, or normal saline
Specimen Volume: 4-mm diameter
Collection Instructions:
1. Wash biopsy site with an antiseptic soap.
2. Thoroughly rinse area with sterile water.

3. Do not use alcohol or iodine preparations.
4. A local anesthetic may be used.
5. Biopsy specimens are best taken by punch biopsy to include full thickness of dermis.

Specimen Type	Temperature	Time
Tissue	Refrigerated (preferred)	
	Ambient	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
FBC	CG030	Source: • Autopsy • Chorionic Villi • Products of Conception or Stillbirth	Answer List	Yes
FBC	CG033	Reason for Referral	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
16167	Specimen	Alphanumeric		31208-2
16337	Specimen ID	Alphanumeric		N/A
CG030	Source	Alphanumeric		N/A
16168	Order Date	Alphanumeric		N/A
CG033	Reason For Referral	Alphanumeric		42349-1
16172	Method	Alphanumeric		In Process
16175	Interpretation	Alphanumeric		69965-2
16176	Amendment	Alphanumeric		In Process
16177	Consultant	Alphanumeric		N/A
16178	Report Date	Alphanumeric		N/A

CPT Code Information:

88233-Tissue culture, skin, or solid tissue biopsy
88240-Cryopreservation

Reference Values:

Not applicable