Test Definition: MSH6M

MSH6 Mutation Screen, Blood

Reporting Title: MSH6 Mutation Screen, B
Performing Location: Rochester

Specimen Requirements:

Specimen must arrive within 96 hours of draw.

Specimen Type: Whole blood
Container/Tube:
Preferred: Lavender top (EDTA) or yellow top (ACD)
Acceptable: Any anticoagulant
Specimen Volume: 3 mL
Collection Instructions:
1. Invert several times to mix blood.
2. Send specimen in original tube.
Forms:
1. Molecular Genetics-Inherited Cancer Syndromes Patient Information Sheet (Supply T519) in Special Instructions
2. New York Clients-Informed consent is required. Please document on the request form or electronic order that a copy is on file. An Informed Consent for Genetic Testing (Supply T576) is available in Special Instructions.
3. If not ordering electronically, submit a Molecular Genetics Request Form (Supply T245) with the specimen.

Specimen Type	Temperature	Time
Varies	Ambient (preferred)	
	Frozen	
	Refrigerated	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
22748	Reason For Referral	Alphanumeric		42349-1
22750	Result	Alphanumeric		In Process
22751	Interpretation	Alphanumeric		69047-9
22749	Method	Alphanumeric		49549-9
22752	Amendment	Alphanumeric		In Process
22744	Specimen	Alphanumeric		N/A
22746	Source	Alphanumeric		31208-2
22753	Reviewed By:	Alphanumeric		N/A
22754	Release Date	Alphanumeric		N/A

Components:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
Billing only	MSH6 GENE DUP/DELETE VARIANT	1	81300		
Billing only	MSH6 GENE FULL SEQ	1	81298		

Reference Values:

An interpretive report will be provided.