Test Definition: APO1K

Apolipoprotein A-I (APOA1) Gene, Known Mutation

Reporting Title: APOA1 Gene, Known Mutation
Performing Location: Rochester

Specimen Requirements:

This test can only be performed if a mutation has previously been identified in a family member of this individual.

Specimen must arrive within 96 hours of draw.

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. 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.
2. Molecular Genetics-Congenital Inherited Diseases Patient Information Sheet (Supply T521) in Special Instructions

Specimen Type	Temperature	Time
Varies	Ambient (preferred)	
	Frozen	
	Refrigerated	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
33393	Specimen	Alphanumeric		
33394	Specimen ID	Alphanumeric		
33395	Source	Alphanumeric		
33396	Order Date	Alphanumeric		
33397	Reason For Referral	Alphanumeric		
33398	Method	Alphanumeric		
33399	Result	Alphanumeric		
33400	Interpretation	Alphanumeric		
33401	Amendment	Alphanumeric		

Result ID	Reporting Name	Type	Unit	LOINC®
33402	Reviewed By	Alphanumeric		
33403	Release Date	Alphanumeric		

Components:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
Billing only	MOLECULE ISOLATE	1	83890		
Billing only	MOLECULE NUCLEIC AMPLI EACH	1	83898		
Billing only	NUCLEIC ACID HIGH RESOLUTE	2	83909		
Billing only	GENETIC EXAMINATION	1	83912		

Reference Values:

An interpretive report will be provided.