

Test Definition: AXINK

AXIN2 Gene, Known Mutation

Reporting Title: AXIN2 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. Molecular Genetics- Colon Cancer Patient Information Sheet (Supply T521) 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.

Specimen Type	Temperature Time		
Varies	Ambient (preferred)		
	Frozen		
	Refrigerated		

Result Codes:

Result ID	Reporting Name	Туре	Unit	LOINC®
33943	Reason For Referral	Alphanumeric		In Process
33944	Result	Alphanumeric		In Process
33945	Interpretation	Alphanumeric		In Process
33946	Method	Alphanumeric		In Process
33947	Amendment	Alphanumeric		In Process
33948	Specimen	Alphanumeric		In Process
33949	Source	Alphanumeric		In Process
33950	Reviewed By	Alphanumeric		In Process
33951	Release Date	Alphanumeric		In Process



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C	PT	Code	Inform	ation:

81479-Unlisted molecular pathology code

Reference Values:

An interpretive report will be provided.