

## **Test Definition: CDH1K**

CDH1 Gene, Known Mutation

Reporting Title: CDH1 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®
51613	Reason for Referral	Alphanumeric		In Process
51614	Result	Alphanumeric		In Process
51615	Interpretation	Alphanumeric		In Process
51616	Method	Alphanumeric		In Process
51617	Amendment	Alphanumeric		In Process
51618	Specimen	Alphanumeric		In Process
51619	Source	Alphanumeric		In Process
51620	Reviewed By	Alphanumeric		In Process
51621	Release Date	Alphanumeric		In Process



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### **CPT Code Information:**

81403-CDH1 known familial variant

### **Reference Values:**

An interpretive report will be provided.