

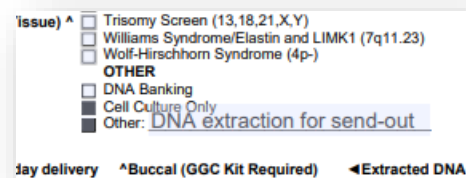
Cell Culture and DNA Extraction for Send Out

Specimen Collection & Requirements

- **Skin punch biopsy:**
 - o Using sterile technique, obtain 2-2.5 mm of tissue and place in a sterile collection tube or container containing transport media.
 - o If tissue culture media is not available, sterile solutions such as balanced salt solution may be used.
 - o The container should have enough culture media or other sterile solution to prevent tissue from drying out in case the package gets turned upside down in transit.
 - o Please be sure container is closed and sealed tightly to prevent any leaks. If all the liquid leaks and the tissue becomes dried out, it will no longer be viable for culture.
- **Shipping/Transport:**
 - o Specimen should be kept at room temperature if it will be transported immediately.
 - o If specimen is not being immediately transported to the laboratory, it may be refrigerated; *do not freeze*. Specimen should be sent by courier or overnight mail to arrive at the laboratory within 24 hours.
- **Skin punch biopsy kits:**
 - o Kits are available upon request. Kits include box, biohazard bag, absorbent material, and return shipping. Kits do NOT include sterile collection tube or transport media.
 - o Please email labgc@ggc.org to request kits. Kits are sent by FedEx ground and typically arrive within a week. If expedited shipping is needed, please indicate this in your email.

Requisition form

- Use the Cytogenetics Requisition Form found here: <https://ggc.org/wp-content/uploads/2020/12/GGC-Cytogenetic-Requisition.pdf>
 - o Mark "Cell Culture Only" and "Other" (bottom right of page 1).
 - o Write "DNA extraction for send-out" next to "Other."
 - o Fill out the requisition form completely.
- Include a copy of the requisition form for other lab to be sent with DNA.
- All DNA extracted will be sent to the specified lab unless DNA banking is selected.
 - o We have created an End-of-Life DNA banking form for patients who wish to designate who has access to their banked DNA in the event of their death. This form is not required for DNA banking, and is completely optional. This form can be requested by emailing labgc@ggc.org.



issue) ^ ☐ Trisomy Screen (13,18,21,X,Y)
☐ Williams Syndrome/Elastin and LIMK1 (7q11.23)
☐ Wolf-Hirschhorn Syndrome (4p-)
OTHER
☐ DNA Banking
☒ Cell Culture Only
☒ Other: DNA extraction for send-out

day delivery ^ Buccal (GGC Kit Required) ◀ Extracted DNA

Getting DNA to the Other Labs

- Shipping to Invitae: Greenwood Diagnostic Labs will ship the extracted DNA to Invitae at no additional charge to the patient.
- Shipping to other labs: We will contact the receiving lab to request that shipping be covered. If the receiving lab does not cover shipping, the patient may incur an additional charge.

- We do not routinely notify providers when samples are sent to the designated send-out lab. If this is information you need, please write “Please notify [your name] by [preferred contact method] upon shipment of sample to send-out lab” on the Ultrasound findings line.

Price and Billing information

Indication for Study & Clinical Information: Please attach pedigree	
<input type="checkbox"/> ICD10 Code(s):	
<input type="checkbox"/> Symptomatic, specific findings:	
<input type="checkbox"/> Family History	
Is the patient currently pregnant? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, provide LMP: _____ or EDD: _____ Gestational Age: _____	
Ultrasound findings <u>Please notify name by email when sample is shipped to send-out lab</u>	

- **Insurance (for South Carolina patients only):**
 - o CPT Codes: 88233 and 81479
 - o Price: \$522
 - o The billing department can assist with obtaining preauthorization and doing benefits investigation for SC patients when insurance will be billed.
 - o This process must be done before the specimen is received as the lab is not able to put cell cultures on hold.
 - o If the specimen is received at the same time as the request for a PA and/or BI, the patient will be responsible for any applicable balances not covered by insurance.
- **Institutional Billing**
 - o CPT Code: 88233 and 81479
 - o Price: \$522
- **Self-pay**
 - o 40% discount is applied: \$313.20
 - o Payment required upfront when specimen is received.
 - Send check or credit card information on requisition.
 - Alternatively, provide the patient’s contact information, and the lab will call for payment when the specimen arrives.