## Lab Dept: Anatomic Pathology

## Test Name: CGH WITH SNP

### *General Information*

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| **Lab Order Codes:** | SNPA |
| **Synonyms:** | CGH with Single Nucleotidase Polymorphism Array; Comparative Genomic Hybridization (CGH) with Single Nucleotide Polymorphism (SNP array); Chromosomal Microarray (Copy Number/SNP); Congenital/Constitutional SNP |
| **CPT Codes:** | 81229 – Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants for chromosomal abnormalities<br><br>88230 – Tissue culture for non-neoplastic disorders; lymphocyte<br><br>88233 |
| **Test Includes:** | An interpretive report of findings. |

### *Logistics*

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| **Test Indications:** | For detection of small duplications and deletions in patients with normal G-banded karyotypes. For characterization of abnormalities detected by G-banding. |
| **Lab Testing Sections:** | Anatomic Pathology – Sendouts |
| **Referred to:** | University of Medical Center Fairview Cytogenetics (UM Test Code: LAB6575/CGHSNP) |
| **Phone Numbers:** | MIN Lab: 612-813-6280<br><br>STP Lab: 651-220-6550 |
| **Test Availability:** | Daily |
| **Turnaround Time:** | Results within 28 days |
| **Special Instructions:** | For optimal testing results the specimen must arrive within 24 hours of collection. |

### *Specimen*

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| **Specimen Type:** | Whole blood<br><br>Cord blood, Products of Conception or Skin are also acceptable specimen types. |
| **Container:** | Green (NaHeparin; no gel) top tube AND Purple (EDTA) top tube<br>**Note: Both tubes are required.**<br><br>Alternate: Yellow (ACDA) can be used instead of the EDTA. |
| **Draw Volume:** | **Optimal volume:** 10 mL blood:<br>5 mL blood in Green NaHeparin (no gel) **AND** 5 mL blood in Purple (EDTA)<br><br>**Minimum volume:** 6 mL blood:<br>3 mL blood in Green NaHeparin (no gel) **AND** 3 mL blood in Purple (EDTA)<br><br>(Note: 1-3 mL in each tube will be accepted for infants and small children)<br><br>**Products of Conception (POC)/Skin**: Portion of placenta at least 1 cm3 containing 35-55 mg of Villi in sterile plastic leakproof container.<br><br>**Skin, cord or fetal tissue**: 3-4 mm punch skin biopsy If obtained at autopsy, at least 1 cm3 including dermis in sterile plastic leakproof container. |
| **Processed Volume:** | Same as Draw Volume |
| **Collection:** | Routine venipuncture |
| **Special Processing:** | Lab Staff: Do Not Centrifuge. Blood specimen should remain in the original collection container. Store and ship at ambient temperature. Avoid freezing. |
| **Patient Preparation:** | None |
| **Sample Rejection:** | Clotted or frozen specimen; mislabeled or unlabeled specimens; incorrect container type |

## *Interpretive*

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| **Reference Range:** | An interpretive report will be provided. |
| **Critical Values:** | N/A |
| **Limitations:** | Post-natal specimens only.<br><br>Specimens must be received in the Cytogenetics Laboratory Mon-Fri by 5:30 pm; weekends and holidays by 4:30 pm. Specimens received after these cutoffs will be processed the following day. |

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| **Methodology:** | Copy Number and SNP Chromosomal Microarray (CMA) |
| **References:** | Fairview Diagnostic Laboratories January 2023 |
| **Updates:** | 7/21/2017: CPT update<br>3/13/2023: Updated synonyms, CPT codes, minimum volumes, specimen viability/stability, acceptable specimen types and reference laboratory receiving limitations. |