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**Lab Dept:** Coagulation

**Test Name:** HEMOPHILIA B (F9) SEQUENCING

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***General Information***

**Lab Order Codes:** HEMB

**Synonyms:** Factor IX Sequencing for Hemophilia B; Christmas disease

**CPT Codes:** 81405 – F9, full gene sequencing (Molecular Pathology, Level 6)

**Test Includes:** Bidirectional sequencing of the entire F9 coding region and intron-exon boundaries and proximal promoter.

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***Logistics***

**Test Indications:** Severe deficiency of factor IX clotting activity is associated with spontaneous joint or deep tissue bleeding. Moderate or mild deficiency is associated with prolonged bleeding after tooth extractions, surgery, or injuries and recurrent or delayed wound healing. Counseling and informed consent are recommended for genetic testing.

**Lab Testing Sections:** Coagulation - Sendouts

**Referred to:** ARUP (ARUP Test: 2001578)

**Phone Numbers:** MIN Lab: 612-813-6280

STP Lab: 651-220-6550

**Test Availability:** Daily, 24 hours

**Turnaround Time:** Within 21 days

**Special Instructions:** Fill out Patient History form for Hemophilia A or B. Form is found on: [http://www.aruplab.com/guides/ug/tests/iconpdf\\_48.pdf](http://www.aruplab.com/guides/ug/tests/iconpdf_48.pdf)

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***Specimen***

**Specimen Type:** Whole blood

**Container:** Lavender top (EDTA) tube

Alternate blood tube: Yellow (ACD Solution A or B) top tube or Pink (K2 EDTA) top tube.

<b>Draw Volume:</b>	3 mL (Minimum: 1 mL) blood
<b>Processed Volume:</b>	Same as Draw Volume
<b>Collection:</b>	Routine venipuncture
<b>Special Processing:</b>	Lab Staff: <b>Do Not</b> Centrifuge. Send specimen in original collection container at refrigerated temperature. Forward promptly..
<b>Patient Preparation:</b>	None
<b>Sample Rejection:</b>	Specimen collected in wrong container; mislabeled or unlabeled specimens

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### ***Interpretive***

<b>Reference Range:</b>	Interpretive report
<b>Critical Values:</b>	N/A
<b>Limitations:</b>	Diagnostic errors can occur due to rare sequence variations. Deep intronic mutations and gene duplications will not be detected in patients of either sex; large deletions will not be detected in females.
<b>Methodology:</b>	Polymerase Chain Reaction/Sequencing, Bidirectional sequencing of the entire F9 coding region and intron-exon boundaries and proximal promoter
<b>References:</b>	<a href="#">ARUP website</a> November 2009 (800) 522-2787 Fax (801) 584-5249
<b>Updates:</b>	2/12/2013: CPT update 8/19/2015: No longer forwarded through MML, now direct send