Code	Name	Specimen	Room temperature	Refrigerated	Frozen	Method	Report
Q025	**ChromoTouch Chromosome SNP Microarray, Optima, Products of Conception**	Submit 5 mg (2 mg min.) curretted tissue in normal saline. Give clinical history on chromosomal microarray test request form.	NA	24 hrs.	NA	Chromosome microarray using Affymetrix Optima Suite™	Sample Daily by 4 pm; Report in 10 days
Q024	**ChromoTouch Chromosomal SNP Microarray, Optima, Prenatal**	**Amnotic fluid:** 15 mL (10 mL min.) amniotic fluid in a sterile screw-capped container. **Chorionic villus:** 30 mg (20 mg min.) chorionic villus biopsy collected asceptically in 10 mL transport medium available from LPL. **Umblical Cord blood:** 4 mL (2 mL min.) cord blood in 1 Lavender top (EDTA) tube. Avoid clot formation during sampling. Ship refrigerated immediately. DO NOT FREEZE. Give clinical history on microarray test request form. Consent form for Prenatal genetic testing is mandatory.	NA	24 hrs.	NA	Chromosome microarray using Affymetrix Optima Suite™	Sample Daily by 4 pm; Report in 10 days
Q023	**ChromoFic, Chromosome SNP Microarray, 750K, High resolution**	4 mL (2 mL min.) whole blood in 1 lavender top (EDTA) tube. Ship refrigerated. DO NOT FREEZE. Give clinical history on Genomic Microarray Requisition form.	NA	24 hrs.	NA	Affymetrix CytoScan™ 750K microarray	Sample Daily by 4 pm; Report in 10 days

Reference

1 Schaeffer et al. (2004) Am J Hum Genet; 74:1168-1174.

2. ACOG Committee Opinion No. 581: the use of chromosomal microarray analysis in prenatal diagnosis. Obstet Gynecol 2013 Dec; 122:1374–7.

Dr Lal PathLabs

National Customer Care: 011-3988-5050

Corporate Office: 12th Floor, Tower B, SAS Tower, Medicity, Sec- 38, Gurgaon- 122 001, Haryana
Tel: 0124- 3016 500 | Fax: 0124- 42344668
National Reference Lab: Sector-18, Block-E, Rohini, New Delhi- 110 085
www.lalpathlabs.com
doctorfeedback@lalpathlabs.com

Follow us at www.facebook.com/lalpathlabs www.twitter.com/lalpathlabs

*Price, specimen details, method, reporting time may change,
Please contact Customer Care before sending the samples, to avoid any inconvenience.

*Conditions apply

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A whole genome analysis with High Resolution

Dr Lal PathLabs uses FDA approved technology for enhanced detection of chromosomal abnormalities.

CHROMOTOUCH, CHROMOSOME SNP MICROARRAY, OPTIMA, PRODUCTS OF CONCEPTION

CHROMOTOUCH® SNP MICROARRAY PRODUCTS OF CONCEPTION

The ChromoTouch SNP microarray utilizes 315,608 markers to achieve whole genome coverage at a 75 kilobase (kb) spacing. It additionally covers more than 400 targeted regions, including known recurrent microdeletion / microduplication syndromes, centromere and telomere regions and disease-causing genes.

At least 50% of first trimester miscarriages are caused by a chromosomal imbalance. Chromosomal microarray analysis of uncultured Products Of Conception (POC) samples increases the likelihood of detecting clinically significant genetic imbalances as compared to Conventional G-banded analysis[1].

Clinical Indication

The ChromoTouch SNP Array POC is warranted for the evaluation of any spontaneous pregnancy loss and can provide a diagnosis and recurrence risk for future pregnancies.

Affymetrix Microarrays for enhanced detection of chromosomal abnormalities

Choosing ChromoTouch® POC SNP microarray

- Tissue culture failure is avoided with the use of DNA extracted from uncultured cells, rather than cultured cells
- Detects triploidy, trisomy, monosomy, chromosome deletions and duplications
- This test is a cost effective method to detect chromosomal imbalances, which is important to determine the recurrence risk for future pregnancies
- Chromosomal microarray analysis of uncultured Products Of Conception (POC) samples increases the likelihood of detecting clinically significant genetic imbalances as compared to conventional G-banded analysis

AMERICAN COLLEGE OF OBSTETRICIAN AND GYNECOLOGISTS (ACOG) RECOMMENDATION 2013

The American College of Obstetricians and Gynecologists (ACOG) issued a committee opinion on the use of chromosomal microarray analysis in prenatal diagnosis, which provided the following practice recommendations to replace those set in 2009:[2]

- Chromosomal Microarray Analysis (CMA) is recommended for any patient, undergoing an invasive diagnostic prenatal procedure because of the ultrasound indication of one or more major structural anomalies in the fetus. CMA replaces the need for fetal karyotype.
- CMA or Karyotype can be offered in those patients, undergoing invasive diagnostic prenatal testing if no structural fetal abnormality is noted on ultrasound regardless of maternal age.

DR LAL PATHLABS USES THE FDA APPROVED TECHNOLOGY