

CHECKLIST: HOW TO SEND A PRENATAL SAMPLE FOR MICROARRAY

TEL 509.474.6840 / FAX 509.474.6839
TOLL FREE 1.877.SigChip (744.2447)
www.signaturegenomics.com / info@signaturegenomics.com



Signature Genomics recognizes that sending a prenatal sample for testing can be a complex process. We are committed to obtaining timely and quality results for you and your patient. To facilitate rapid turn-around time, use this checklist to coordinate sending a prenatal sample to Signature Genomics.



WHEN THE PATIENT IS IN YOUR OFFICE:

Complete Signature Genomics' New Two-Page Prenatal Requisition Form:

All information on the requisition form must be completed for timely and accurate analysis of results. If you have questions regarding the testing offered at Signature Genomics, including microarray options, MCC studies, or the need for parental samples, our Genetic Counselors are happy to speak with you. Call us at 877-SigChip (744-2447) with questions.



REQUISITION FORM, PAGE 1:

INFORMED CONSENT SIGNATURE:

For patients who are New York state residents or for samples drawn or sent through a New York laboratory, the ordering health care provider must attest that informed consent has been received by signing the Informed Consent statement at the top of the requisition form.

PATIENT DEMOGRAPHICS AND SAMPLE TYPE INFORMATION.

The following items must be completed:

- **Fetal sex, indication for study, referring physician and contact information.**
- **Test requested:** In order to address the needs of the patient and health care provider, Signature Genomics offers a choice of microarray options, including the Signature PrenatalChip@TE (Targeted Enhanced) and the Signature PrenatalChip@OS (High Density). Both are oligonucleotide-based, whole genome arrays. Our genetic counselors are available to discuss the differences between these two options with health care providers.
- **Maternal cell contamination studies** (recommended): Some institutions or laboratories that perform karyotyping may already perform MCC studies. If not, this can be organized at Signature Genomics. If MCC studies are desired, please obtain 3-5cc maternal blood in EDTA (purple top tube) or 5µg extracted DNA and send with the prenatal sample.
- **Sample information:** Accepted specimen types include: cultured CVS cells, direct amniotic fluid, cultured amniocytes, products of conception (direct specimen or cultured cells), blood, and DNA. More information about specimen requirements may be found in the Sample Information section on page 1 of the requisition form.
- **Parental samples:** Signature Genomics recommends sending parental samples with all prenatal samples. For each parent, submit 3-5cc EDTA (purple top tube) and 3-5cc NaHep (green top tube). These may be submitted in advance of the prenatal sample or with the prenatal sample. The new prenatal requisition form allows you to document the parents' information and the prenatal information all on one form. Write in the prenatal information at the top of the form and the information on the parents in the lower left of the requisition form. In the event that the parental bloods are sent separately from the prenatal sample, simply send a copy of the requisition form with the prenatal sample and a copy with the parental sample(s). If there is a charge to analyze the parental samples, Signature Genomics will contact the clinician to obtain authorization to proceed. A new billing form (Page 2 of the requisition form) with new signatures may be required.

(Continued on reverse)



WHEN THE PATIENT IS IN YOUR OFFICE, continued:

REQUISITION FORM, PAGE 2:

SELECT ONE OF THREE BILLING OPTIONS:

1. Signature Genomics can bill private insurance.
 - Guide the patient to sign on the yellow lines (required) to accept financial responsibility for their account and to give Signature Genomics authorization to contact their health insurance company. Signature Genomics cannot proceed with benefits investigation without these signatures.
 - Some insurance companies require a letter of medical necessity and/or clinic notes in order to communicate accurate coverage and benefits information. In order to allow Signature Genomics to obtain benefits and coverage information prior to testing, you may submit this information prior to shipping the sample. Fax these documents plus the completed two-page requisition form with signatures and a copy of the insurance card to Signature Genomics at 509.474.6839. Alternatively, you may choose to submit this paperwork with the sample.
 - Signature Genomics offers a discount to patients with financial need, based on family size and income. The patient's family may write in this information at the bottom of the requisition form under the Patient Financial Assistance heading. This requires a patient signature.
2. Some institutions/laboratories have a contract with Signature Genomics. Contact us, your institution, or the laboratory that performs your karyotyping for specific billing practices.
3. Self-payment is available. These patients will qualify for additional discounts.



AT THE TIME OF SAMPLE SUBMISSION:

Include the following documents with shipment:

- Two-page requisition form
- Letter of medical necessity and clinic notes if Signature Genomics is to bill insurance directly
- Prenatal sample
- Samples from parents

Ship overnight at ambient temperature to:

Signature Genomics
2820 N. Astor Street
Spokane, WA 99207