



CYSTIC FIBROSIS (CF) TESTING

ordering recommendations

Cystic Fibrosis (*CFTR*), 165 Pathogenic Variants (2013661)

Cystic Fibrosis (*CFTR*), 165 Pathogenic Variants, Fetal (2013662)

0050608—Maternal sample is recommended to exclude maternal cell contamination.

Cystic Fibrosis (*CFTR*) Sequencing (0051110)

Cystic Fibrosis (*CFTR*), 165 Variants with Reflex to Sequencing (2013663)

Cystic Fibrosis (*CFTR*) Sequencing with Reflex to Deletion/Duplication (0051640)

Cystic Fibrosis (*CFTR*), 165 Variants with Reflex to Sequencing and Reflex to Deletion/Duplication (2013664)

Tests for 165 pathogenic variants.

Order for the following indications:

- Carrier testing in a healthy patient
- Patient has symptoms of CF
- Patient has family history of CF

Tests cultured amniocytes for 165 pathogenic variants.

Order for fetal samples with the following indications:

- Both parents have *CFTR* variants which are known to be included on the panel
- Echogenic or cystic dilatation of the fetal bowel

Detects 97% of the more than 2,000 described *CFTR* gene variants.

Order for patients with symptoms of classic CF or a *CFTR*-related disorder without two variants identified by the CF 165 pathogenic variants test.

Tests for 165 pathogenic variants. If two *CFTR* variants are not identified, sequencing is performed to detect 97% of the more than 2,000 described *CFTR* variants.

Order for patients with the following indications if not previously tested using the CF 165 pathogenic variants test:

- Patients with symptoms of classic CF
- Patients with a positive sweat chloride test
- Patients with symptoms of a *CFTR*-related disorder

Tests for more than 2,000 *CFTR* gene variants. If two pathogenic *CFTR* variants are not identified by sequencing, deletion/duplication testing is performed; clinical sensitivity is 99%.

Order for patients with symptoms of classic CF or a *CFTR*-related disorder without two variants identified by the CF 165 pathogenic variants test.

Tests for 165 pathogenic *CFTR* pathogenic variants. If two pathogenic *CFTR* variants are not identified, sequencing is performed. If two *CFTR* variants are not identified by sequencing, deletion/duplication testing is performed; clinical sensitivity is 99%.

Order for patients with a clinical diagnosis of CF as a cost-effective method for determining the causative variants present.



aruplab.com/genetics
arupconsult.com