

Test	Acceptable Sample Type	DBS Card	EDTA	Heparin	Saliva
DMD CK Activity	Dried Blood Spot / Heparin	Y	N	Y	N
Comprehensive DMD Test	Dried Blood Spot / EDTA / Saliva*	Y	Y	N	Y
Targeted DMD Del/Dup	Dried Blood Spot / EDTA / Saliva*	Y	Y	N	Y
NMD 131 Gene Panel	Dried Blood Spot / EDTA / Saliva*	Y	Y	N	Y
Sanger Confirmation	Dried Blood Spot / EDTA / Saliva*	Y	Y	N	Y

* Saliva will not allow for additional enzyme testing if ordered.

SAMPLE TYPES	CODE	REQUIREMENTS
DRIED BLOOD SPOTS <i>PREFERRED SAMPLE TYPE</i>	DBS	<p>Collection Container(s): Dried blood spot card</p> <p>Collection and Processing Instructions: Follow kit instructions to fill all spots. Briefly, allow blood to saturate card until indicated areas are filled and blood has soaked through card. Air dry card at ambient temperature for at least 3 hours.</p> <p>Preferred Sample Condition: Follow kit instructions. Store at ambient temperature.</p> <p>Shipping Instructions: Follow kit instructions. Double bag and ship overnight at ambient temperature.</p>
WHOLE BLOOD EDTA (purple top) HEPARIN (green top) <i>HEPARIN CANNOT BE USED FOR ANY DNA TESTING</i>	WB	<p>Collection Container(s): EDTA (purple top), Heparin (green top)</p> <p>Collection and Processing Instructions: Infants (< 2-years): 2 to 3 mL; Children (>2-years): 3 to 5 mL; Older children and adults: 5 to 10 mL.</p> <p>Preferred Sample Condition: Store at ambient temperature. Do not refrigerate or freeze.</p> <p>Shipping Instructions: Ship overnight at ambient temperature ensuring receipt within 5-days of collection.</p> <p>Comments: Clotted or hemolyzed samples are not accepted.</p>
SALIVA <i>CANNOT BE USED FOR ENZYME ASSAY</i>	SV	<p>Collection Container(s): Oragene™ Saliva Collection Kit</p> <p>Collection and Processing Instructions: Collect saliva on an Oragene™ Saliva Collection Kit according to the manufacturer's instructions.</p> <p>Preferred Sample Condition: Store at ambient temperature. Do not refrigerate or freeze.</p> <p>Shipping Instructions: Ship overnight at ambient temperature.</p>

Notes for sample preparation and shipping:

- Label specimen legibly with the following information, ensuring the identifiers on the specimen match the same information on the requisition:
 - Patient name (first and last)
 - Unique identifying number
 - This number may be the patient's date of birth or medical record number
- Fill out the Test Requisition Form completely, including patient, facility, clinician demographics, specimen and clinical information. Please include ALL relevant clinical information, the referring diagnosis, the clinician's NPI number and the corresponding ICD-10 codes. Please be sure to provide accurate contact information on the TRF as it will be used for communication of results
- Place the specimen, Requisition Forms, and any additional information in the shipping container. Failure to perform this step will likely result in delay of testing.
- Ship the sample within 5 days at room temperature with overnight delivery.
- Specimens should be sent per the shipping label included in the provided PerkinElmer Genomics kit or using your preferred carrier. To assist in this process, the contact information for the major carriers is below:
 - Federal Express: 1-800-GO-FEDEX (800-463-3339)
 - UPS: 1-800-PICK-UPS (800-742-5877)
- Ship specimens to: PerkinElmer Genomics, 250 Industry Dr. Suite 400, Pittsburgh, PA 15275

All DNA testing is performed in sequential order as determined by PerkinElmer Genomics best practices unless client/physician clearly specifies on the requisition form to run the tests concurrently. For specific questions about sequential testing and/or reflex testing, please contact PerkinElmer Client Services at +1 (866) 354-2910

For general questions on the collection and return of sample results, please call: PerkinElmer Genomics at +1 (866) 354-2910 (Monday-Friday, 8:00AM - 5:00PM EST) or by emailing Genomics@perkinelmer.com