





How To Use Your Kit:



1 Fill out form



2 Collect sample



3 Return form & sample kit



4 Results available in ~21 days

## SUBMISSION INSTRUCTIONS



1. **Clearly label the sample** with PATIENT NAME and DOB using the label(s) provided below.
  2. Insert the labeled tube(s) into provided clear bag and place securely in the foam slot(s) in the box.
  3. Place **completed paperwork** on top of tube(s) and close the box.
    - Signed test requisition form
    - Signed informed consent document
    - Supporting clinical documents
    - Copy of insurance card (if submitting to insurance)
  4. Once labeled tube(s) and paperwork are in the box, place the box into the provided pre-labeled and pre-paid envelope.
    - Mail to: PerkinElmer Genomics 250 Industry Drive, Pittsburgh, PA 15275 USA
- REQUIRED SAMPLE VOLUMES: Infants (<2 years): 2 to 3 mL; Children (>2 years): 3 to 5 mL; Older children and adults: 5 to 10 mL.

PEEL HERE  
(one label per sample)

Questions? Call 1-866-354-2910 or e-mail [genomics@perkinelmer.com](mailto:genomics@perkinelmer.com)



Handling Instructions  
COOL Packs

**Phase Change Material**

**Precautions:**  
Solv-ENRG COOL Packs are designed and manufactured for life-saving products and are used in the range of 1 to 10°C during emergencies.

**Use and Precautions During Cooling:**

- Set the refrigeration setting to 1°C (33°F) when the COOL Packs are not in use. Do not check to see what the pack is or a blood stain. Remove all of the water.
- Position the tray in the refrigerator. Make sure the tray is level and the tray is not touching the sides of the refrigerator. Do not use the tray for anything else and do not use the tray for anything else.
- At the COOL Pack, use the COOL Pack to store the sample. Do not use the COOL Pack to store anything else.

**Use Precautions During Heating:**

- Store COOL Packs at room temperature.
- Do not use COOL Packs for anything else.
- COOL Packs will not be used for anything else.
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**How To Use Your Kit:**

- Fill out form
- Collect sample
- Return form & sample kit
- Results available in ~21 days

**SUBMISSION INSTRUCTIONS**

- Clearly label the sample with patient name and DOB using the labels provided below.
- Send to lab and return to you.
- Place completed paperwork in the bag and place in the provided pre-labeled bag.
  - Patient Information (Name, DOB)
  - Shipping Address (if different to insurance)
  - Copy of insurance card (if applicable to insurance)
- Only return (mail) and shipment is to be done in a secure container and must be in the original packaging.
  - Mail to: Pennaceler Genesee 250 Industry Drive, Pittsburgh, PA 15275 USA
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QUESTIONS? Call 1-800-333-2118 or e-mail [genesee@pennaceler.com](mailto:genesee@pennaceler.com)

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PITTSBURGH PA 15275

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RETURNS MON-SAT  
PRIORITY OVERNIGHT

15275

PA-US

Solv-ENRG  
Cool Pack  
CHANGING FROM 10°C TO 1°C

[www.fgenes.com](http://www.fgenes.com)