INSTRUCTIONS FOR THE AVAGEN GENETIC TEST

Review the administration instructions for the keratoconus risk factor and corneal dystrophies test

- TEST REQUISITION FORM (TRF)
- PATIENT PREPARATION
- SAMPLE COLLECTION
- SHIPPING PROCEDURE
TEST REQUISITION FORM (TRF)

Note: The Test Requisition Form (TRF) is located in the test supply box. All sections must be completed in full. Once completed, the top page is sent with the patient sample to Avellino Labs for testing. The bottom copy of the TRF is retained by the clinic along with the patient’s medical records.

Section 1

Physician to select test ordered (check box).
One of the two test options must be checked.

Section 2

Physician to complete the clinic account information.
This includes clinic name, address, phone number, and email. The ordering physician must review statement in orange box and indicate agreement by printing name and signing in the provided sections.

Section 3

Physician to provide sample collection information.
Provide the date the sample was collected from the patient and the condition the sample is stored in at the clinic during the period following collection from the patient to when the sample is shipped to Avellino Labs. In this section, provide clinical information known about the patient. Check the box “Unknown” if this information is not available. Comments section may be used if clinic wishes to convey information or instructions to the test lab.

Section 4

Physician to provide patient identification number.
The TRF and the vial MUST have the identical patient identifier and date of birth. The patient identifier can be the patient identification number that you use in your clinic or the patient’s name. The identifier and date of birth used on the TRF must also be written exactly the same way on the vial label. The patient’s gender, email address, and state of residence must also be provided.

Patient to review and sign consent section.
In order for patient to receive the use of genetic counseling services, patient must review the Consent section. Authorization is provided by patient printing name with signature and date. Information on Avellino Labs’ privacy policy and practices may be found on the website: www.avellino.com/genetic-data-policy.

PATIENT PREPARATION

View video training: www.avellino.com/avagen/video

If the patient has consumed fatty foods, soft drinks, alcohol, butter, cheese, chocolate, or chewed gum recently, a mouth rinse with warm water prior to sample collection is required to remove residue that may interfere with testing.
SAMPLE COLLECTION FROM PATIENT
See the instructions: www.avellino.com/avagen/instructions

1. Check both buccal swab and iSWAB collection vial expiration dates to confirm they are not expired.

2. Unscrew the cap from the vial to allow the swab access to the sample suspension solution. Use care not to tip the vial, thereby losing the solution.

3. Take a new swab pouch. Peel and remove swabs. Box contains two pouches, each pouch containing two swabs for a total of four swabs.
   **NOTE:** Do not touch the swab tip or allow the swab tip to be in contact with any other object.

4. For each swab apply tip against one side of the cheek and rub against it for at least 20-30 seconds.
   **Swab Collection Tips:**
   a) Rotate swab tip during collection
   b) Try to cover the whole side of the cheek from top to bottom and from side to side
Insert the swab by twisting downward into the vial with a screw-like motion (clockwise).

Remove the swab from the vial by twisting the swab upwards in an unscrew-like motion (counterclockwise).

Shake the tip of the swab in the solution for 10 times by moving the tip up and down but not above the insert.

Repeat steps 3 to 7 (a total of four times) with a new swab applied to the other side of the cheek. Keep repeating until all four swabs provided in the kit are used, while rotating between the left and right cheeks.

**PLEASE USE ALL 4 SWABS**
SHIPPING PROCEDURE
Get shipping instructions: www.avellino.com/avagen/shipping

Place vial into provided sealable biohazard bag containing absorbent pad.

Place biohazard bag (with contents) and top page of completed Test Requisition Form (TRF) into shipping box.

Seal box by removing pull-off strip from box flap, and press onto side of box to assure it is securely closed.

Mail by USPS Express Service.