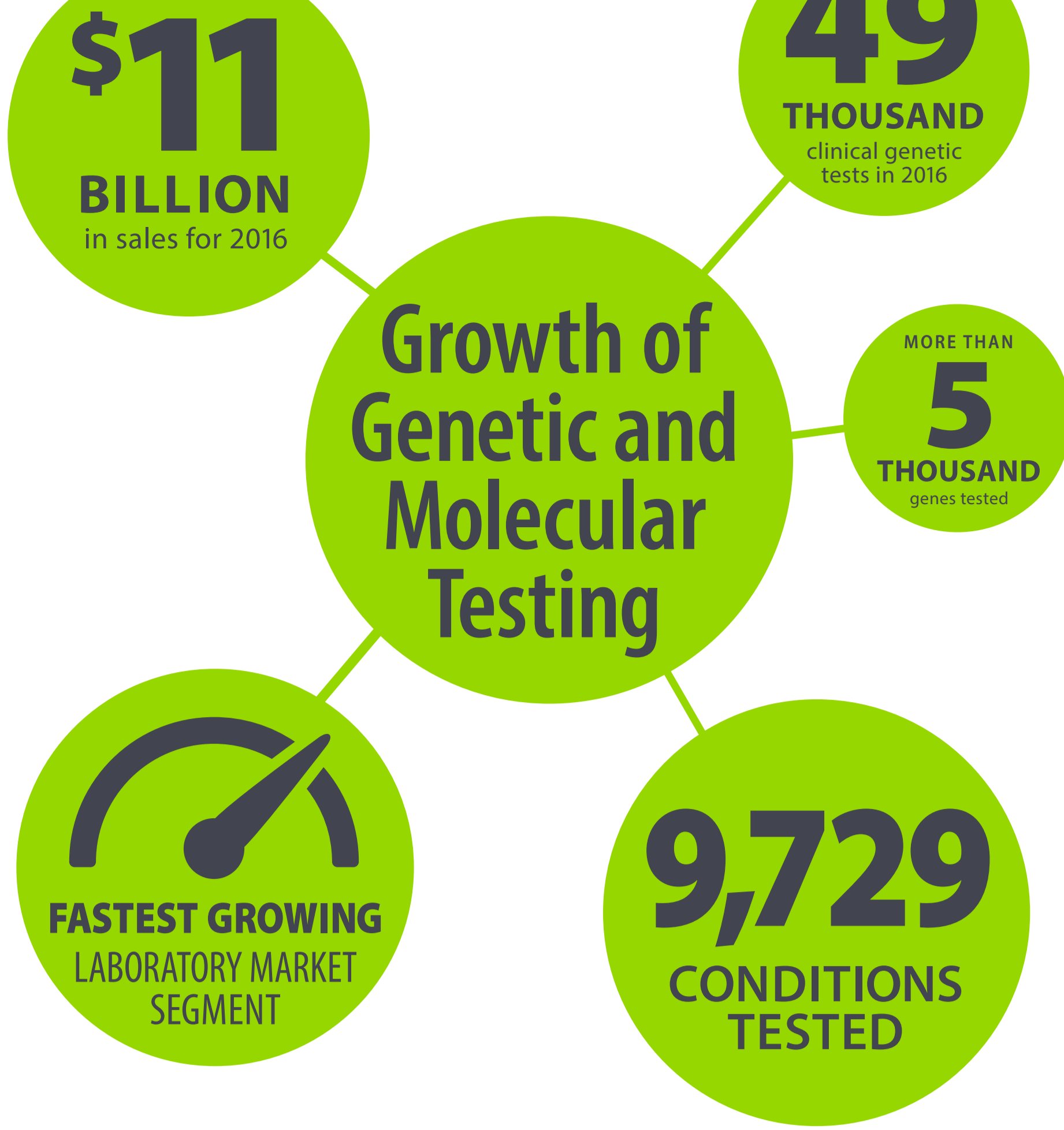


ADDING GENETIC TESTING TO A CLINICAL LAB



Growth of Genetic and Molecular Testing



GROWTH OF DATA & LITERATURE



CLINICAL TESTING	VS	MOLECULAR TESTING
2-3 STEPS	PROCESS COMPLEXITY	10-20 STEPS
INFREQUENT	RATE OF PROCESS CHANGE	FREQUENT SOFTWARE MUST CHANGE, TOO
FEW	PROCESS DECISIONS	MANY IF/THEN, GO/NO-GO
1-2	CONTAINERS PER SAMPLE	MANY
LOW FEW STEPS, FEW PEOPLE, FEW SUPPLIES	COST TO RUN A TEST	HIGH MORE STEPS, MORE PEOPLE, MORE SUPPLIES
IN USE FOR YEARS	LAB INSTRUMENTS	OUTDATED IN MONTHS
CONSISTENT	REIMBURSEMENT	CHANGING A FAILED OR UNREIMBURSED MOLECULAR TEST CAN COST FROM \$250 TO MORE THAN \$6,000



NO SPREADSHEETS!

REQUIREMENTS

- Consistent, standardized, integrated processes for accuracy
- Audit trail is easily understood
- Deliver high clinical value
- Quick turnaround for time-sensitive testing
- Scalable, use informatics to automate processes for efficiency

WHAT TO LOOK FOR

- CHAIN OF CUSTODY
- SCALABILITY
- WIDE BODY OF ACCESSIBLE VARIANT KNOWLEDGE
- END-TO-END: FROM SAMPLE ACCESSIONING TO CLINICAL REPORTS
- ALERTS TO CLINICIANS UPON VARIANT RECLASSIFICATION
- VALIDATION OF CLINICAL TESTING PROTOCOLS
- STANDARDS AND INTEROPERABILITY



YOU CAN'T BE AN **INNOVATIVE, EFFECTIVE PATHOLOGY LAB & A HIGH-QUALITY SOFTWARE DEVELOPMENT SHOP AT THE SAME TIME.**



LEARN MORE IN OUR FREE WHITE PAPER:

"Build or Buy: Optimizing Informatics for Genetic Testing."

<http://info.sunquestinfo.com/build-or-buy>

Sources: **sunquest.**

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