

Division of Laboratory Services

630 Hart Lane Nashville, TN 37216 615-262-6300

https://www.tn.gov/newbornscreeninglab

Newborn Screening Disorder:

Galactokinase Deficiency

Alternate Name(s)	 Galactosemia II GALK deficiency Galactosemia type 2 Hereditary galactokinase deficiency
Analyte(s) Tested	GalactoseGalactose-1-phospate uridylyltransferase
Methodology	Enzyme Immunoassay
TDH Requisition Form	 PH-1582 Form Requests: Contact state lab by email or fax. Include facility name, address, phone number and contact person on your request. Fax: (615) 262-6455 Email: DCLAB.supply@tn.gov
Acceptable Specimen	Dried blood spots on filter paper collected from infants less than 6 months of age
Collection Information	 Optimal specimen: Collect at 24 hours + 1 minute of life Acceptable specimen: Collect 24-48 hours of life If transfused: Recollect 4 days post transfusion
Shipping Information	 Health Departments and Birthing Hospitals Private Clinics and Midwives
Screening Results	 Tennessee Newborn Screening's Secure Remote Viewer (SRV) Healthcare providers must be registered to view and print patient result reports. To Register: Complete and submit SRV Access Form (PH-3909). NBS List of Screened Disorders and Mailer Explanations
Laboratory Location Performing Testing	Nashville, TN