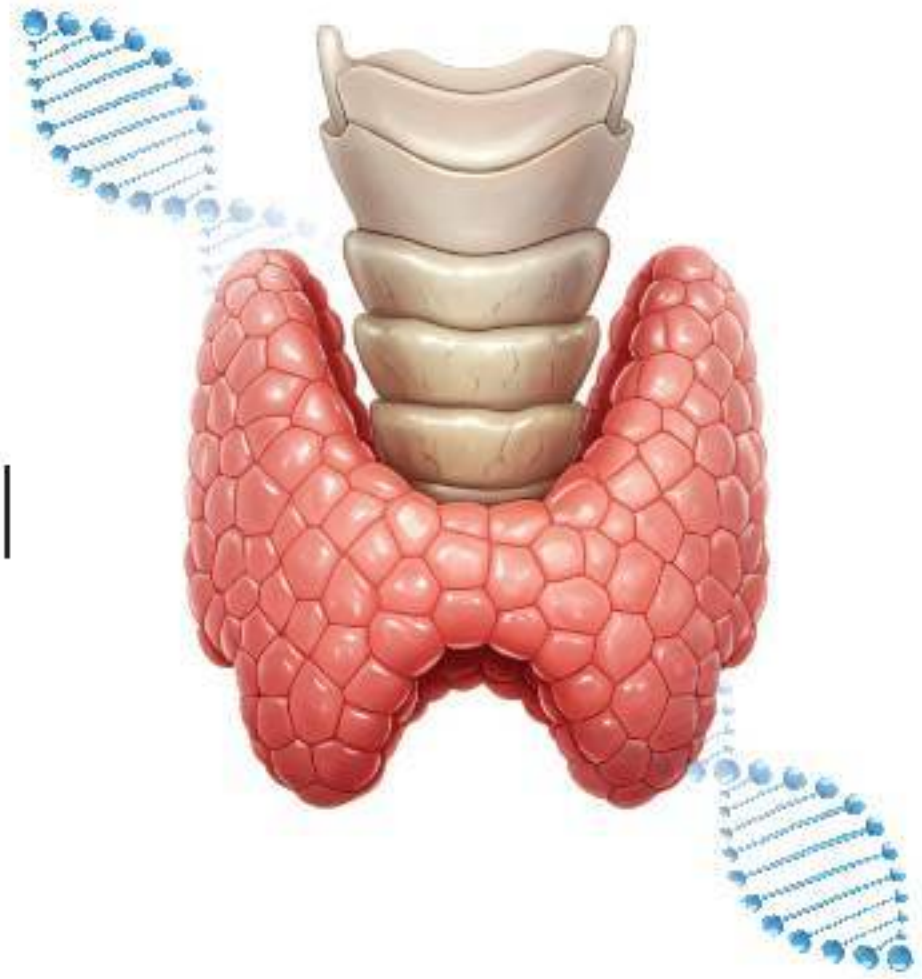
PRIME PATH LAB

Hereditary **THYROID** Disorders Panel



One Gland. **Two Genetic Stories.**

From congenital hypothyroidism to inherited medullary carcinoma — coverage across the full spectrum of heritable thyroid disease.

About the panel

The thyroid fails in two very different genetic ways. In children, defects in gland development and hormone synthesis cause congenital hypothyroidism and dyshormonogenesis. In adults and at-risk families, germline changes drive inherited medullary thyroid carcinoma and multiple endocrine neoplasia. This panel addresses both giving endocrinologists a single test that spans development, function, and cancer predisposition.

Times intervention precisely

In MEN2, the specific RET variant informs the recommended age for risk-reducing thyroidectomy.

Clarifies pediatric hypothyroidism

Identifying the molecular subtype guides hormone management and prognosis.

Protects the whole family

A germline result enables cascade testing and early surveillance for relatives.

Coverage across both clinical arms

Unlock genetic insights with our Advanced Neurological Disorders Risk Panel, analyzing 164 genes linked to hereditary neuropathy, genetic epilepsy syndromes, and other conditions:

GENE(S)	ASSOCIATED CONDITION
ARM 1 — THYROID FUNCTION & DEVELOPMENT	
TSHR	Surfactant dysfunction and pediatric or adult interstitial lung disease.
TG	Thyroglobulin defects causing dyshormonogenesis and congenital goiter.
DUOX2	Impaired hormone synthesis and congenital hypothyroidism.
PAX8	Thyroid dysgenesis and congenital hypothyroidism.
ARM 2 — CANCER PREDISPOSITION	
RET	Medullary thyroid carcinoma and multiple endocrine neoplasia type 2 (MEN2).

Turnaround Time

Results in 7 business days

Fast, reliable results

How the Test Works?

Order Online
Physicians can easily order this test through a paper requisition form or the client portal.

Sample Collection
Non-invasive buocal swab.

Lab Processing
Advanced genetic analysis with cutting -edge sequencing technology.

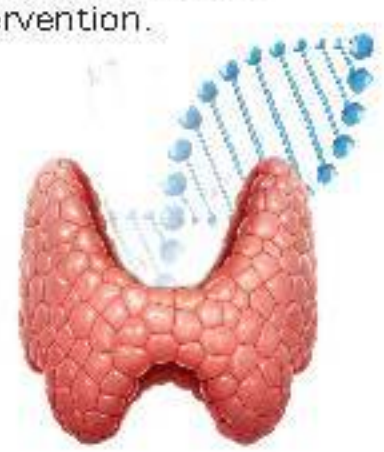
Receive Results
Secure online report delivery with expert genetic interpretation.

The RET imperative

In MEN2, medullary thyroid carcinoma is not a possibility to monitor it is a near-certainty to prevent. Identifying a RET carrier before malignancy develops allows risk-reducing thyroidectomy to be timed to the variant's aggressiveness, turning an inherited cancer syndrome into a scheduled, manageable intervention.

Who should be tested

- Patients with medullary thyroid carcinoma or a personal or family history of MEN2.
- Families with a known RET pathogenic variant.
- Neonates or children with congenital hypothyroidism or congenital goiter.
- Patients with unexplained or familial thyroid dysfunction.
- First-degree relatives of a known variant carrier.



CONTACT & ORDERING INFORMATION

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