

Policy and Procedure

Title: Genetic Testing for Colorectal Cancer -	
Lynch Syndrome	
Approval Date: 6/8/2018	
Effective Date: 6/8/2018	
Review Date: 11/5/2020	
Retired Date:	

PLEASE REFER TO INTERQUAL - MOLECULAR DIAGNOSTIC

REVISION LOG:

REVISIONS	DATE
Creation date	7/20/2017
Annual Review	11/29/2019
Annual Review	11/5/2020

Approved:

Glendon Henry, MD Date:11/5/20

Clinical Medical Director

Approved:

2.3.2021

Sanjiv Shah, MD

Date:

Chief Medical Officer