

Zentrum für Humangenetik · D-93042 Regensburg

Request for DNA testing



Zentrum für
Humangenetik
Regensburg

Version: 19.11.2013 B

Patient data					
<p>_____</p> <p>Last Name, First Name DOB</p> <p>_____</p> <p>Street</p> <p>_____</p> <p>ZIP code City/Country</p>	<p><input type="checkbox"/> female <input type="checkbox"/> male</p> <p>_____</p> <p>Ethnic origin</p> <tr> <th colspan="2">Billing information</th> </tr> <tr> <td colspan="2"> <p><input type="checkbox"/> VISA/ MasterCard (see also separate form)</p> <p><input type="checkbox"/> E112 (applicable within European Union)</p> <p><input type="checkbox"/> confirmation of payment from government office / insurance company (attach copy)</p> <p><input type="checkbox"/> bill hospital (provide exact billing address)</p> </td> </tr>	Billing information		<p><input type="checkbox"/> VISA/ MasterCard (see also separate form)</p> <p><input type="checkbox"/> E112 (applicable within European Union)</p> <p><input type="checkbox"/> confirmation of payment from government office / insurance company (attach copy)</p> <p><input type="checkbox"/> bill hospital (provide exact billing address)</p>	
Billing information					
<p><input type="checkbox"/> VISA/ MasterCard (see also separate form)</p> <p><input type="checkbox"/> E112 (applicable within European Union)</p> <p><input type="checkbox"/> confirmation of payment from government office / insurance company (attach copy)</p> <p><input type="checkbox"/> bill hospital (provide exact billing address)</p>					

Clinical Data	
<p>Clinical Diagnosis: _____</p> <p>Family History: <input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Unknown</p> <p>If positive, please provide pedigree</p> <p>_____</p> <p><input type="checkbox"/> Infectious sample: HIV, Hepatitis or other, please state _____</p>	

Referring Institution	
<p>_____</p> <p>Name of referring physician (please print)</p> <p>_____</p> <p>Phone</p> <p>_____</p> <p>Email address</p> <p>_____</p> <p>Signature referring physician</p>	<p>Signature of patient (in case of minors, the parents): With this signature I confirm, that I was fully informed about the nature and extend of the planned DNA diagnostic testing. I explicitly consent to the testing and the blood taking.</p> <p>_____</p> <p>City, date Signature (patient/parents)</p> <p>Alternatively, confirmation of the referring physician: Herewith, I confirm that the patient has consented to the DNA testing and the blood taking after the nature and extend of the DNA testing was explained.</p> <p>_____</p> <p>City, date Signature (patient/parents)</p>

Request for diagnostic genetic testing^α	
Please send 5 – 10 ccm EDTA blood	
Craniofacial and Skeletal Disorders	Brain Malformations/ Muscular Dystrophies
<input type="checkbox"/> Achondrogenesis IA (<i>TRIP11</i>) <input type="checkbox"/> Antley-Bixler syndrome (<i>POR, FGFR2</i>) <input type="checkbox"/> Basal cell nevus syndrome (<i>PTCH1¹</i> , on request <i>PTCH2</i>) <input type="checkbox"/> Branchiootorenal syndrome (<i>EYA1¹, SIX1, SIX5</i>) <input type="checkbox"/> Branchiooculofacial syndrome (<i>TFAP2A</i>) <input type="checkbox"/> Craniofrontonasal syndrome (<i>EFNB1¹</i>) <input type="checkbox"/> EEC3 syndrome/split-hand/foot malformation 4 (<i>p63</i> partial) <input type="checkbox"/> Ellis-van Creveld syndrome ² (<i>EVC, EVC2</i>) <input type="checkbox"/> <i>FGFR</i> associated Craniosynostosis, syndromal: Pfeiffer, Crouzon, Apert, Jackson-Weiss, Muenke Syndrome (<i>FGFR1, 2</i> and <i>3</i> partial) <input type="checkbox"/> <i>FGFR</i> associated skeletal disorders: Hypo- and Achondroplasia, Thanatophoric dysplasia (<i>FGFR3</i> partial); Osteoglyphonic Dysplasia (<i>FGFR1</i>) <input type="checkbox"/> <i>FLNA</i> associated OPD spectrum skeletal disorders: FMD, OPD1+2, MNS, TOD (<i>FLNA</i> partial) <input type="checkbox"/> <i>FLNB</i> associated skeletal disorders: BD, AOI, AOIII, Larsen syndrome, SCT <input type="checkbox"/> <i>Gli3</i> associated disorders ¹ : Pallister-Hall syndrome, Greig syndrome <input type="checkbox"/> Lacrimoauriculodentodigital Syndrome (<i>FGFR2, FGFR3, FGF10</i>) <input type="checkbox"/> Mandibulofacial dysostosis with microcephaly (<i>EFTUD2</i>) <input type="checkbox"/> Microphthalmia syndromal (<i>SOX2¹, OTX2</i>) <input type="checkbox"/> Microtia, syndromal with cleft palate (<i>HOXA2</i>) <input type="checkbox"/> Miller-Syndrome (<i>DHODH</i>) <input type="checkbox"/> Nager-Syndrome (<i>SF3B4</i>) <input type="checkbox"/> Otofaciocervical syndrome (<i>EYA1¹</i>) <input type="checkbox"/> Saethre-Chotzen syndrome (<i>FGFR3</i> : p.Pro250Arg, <i>TWIST1</i>) <input type="checkbox"/> Simpson-Golabi-Behmel syndrome (<i>GPC3¹</i>) <input type="checkbox"/> <i>SLC26A2</i> associated skeletal dysplasias: ACG1B, AOII; DTD, EDM4 <input type="checkbox"/> Treacher Collins-Franceschetti syndrome (<i>TCOF1¹, POLR1D, POLR1C</i>) <input type="checkbox"/> Van der Woude/Popliteal Pterygium syndrome (<i>IRF6¹</i>)	<input type="checkbox"/> NGS panel HPE (15 HPE-associated genes + 16 overlapping phenotypes) ^{HPE, 4} <input type="checkbox"/> NGS Panel Neuronal migration disorders (107 genes associated with lissencephaly, Double cortex, mikrocephaly, PMG) ^{NM, 4} <input type="checkbox"/> Andermann syndrome/Agnesis of the corpus callosum with peripheral neuropathy (<i>KCC3 = SLC12A6²</i>) <input type="checkbox"/> ARXopathies ^{NM} : XLAG, Partington syndrome, XMESID, ISSX, X-linked West syndrome (<i>ARX</i>) <input type="checkbox"/> Cerebral cavernous malformations (<i>CCM1¹, CCM2¹, CCM3¹</i>) <input type="checkbox"/> Complex cortical dysplasia with other brain malform. ^{NM} (<i>TUBB3</i>) <input type="checkbox"/> Cong. muscular dystrophies WWS/MEB ^{1, 2, NM} (<i>FKRP, LARGE, FKTN, POMT1, POMT2, POMGnT1, ISPD, COL4A1, GTDC2, TMEM5, B3GNT1, DAG1</i>) <input type="checkbox"/> Double cortex/lissencephaly X-linked ^{NM} (<i>DCX¹</i>) <input type="checkbox"/> <i>FOXP1</i> -associated encephalopathy/Rett syndrome, cong. variant ^{NM} <input type="checkbox"/> Heterotaxia with cardiac and brain malformations (<i>ZIC3, NODAL</i>) <input type="checkbox"/> Holoprosencephaly ^{1, HPE} (<i>SHH, SIX3, ZIC2, TGIF, Gli2, PTCH, NODAL</i>) <input type="checkbox"/> Hydranencephaly/ proliferative vasculopathy (<i>FLVCR2</i>) <input type="checkbox"/> Hydrocephalus, X-linked ^{NM, HSP} (<i>L1CAM¹</i>) <input type="checkbox"/> Infection-induced acute encephalopathy-3 (<i>RANBP2</i> partial) <input type="checkbox"/> Limb-girdle muscle dystrophies ^{2, NM} : <i>FKRP, POMT1, FKTN, POMT2, POMGnT1</i>) <input type="checkbox"/> Lissencephaly, autosomal dominant ^{NM} (<i>LIS1¹=PAFAH1B1, TUBA1A, TUBG1</i>) <input type="checkbox"/> Mental retard., X-linked, with cerebellar hypoplasia (<i>OPHN1¹</i>) ^{NM} <input type="checkbox"/> Microcephaly, primary autosomal recessive ^{2, NM} : MCPH5 (<i>ASPM¹</i>), MCPH2 (<i>WDR62</i>), MCPH1 (<i>Microcephalin</i>) <input type="checkbox"/> Periventricular nodular heterotopia ^{NM} (<i>FLNA¹, ARFGF2²</i>) <input type="checkbox"/> Polymicrogyria, bilateral asymmetric ^{NM} (<i>TUBB2B</i>) <input type="checkbox"/> Polymicrogyria, bilateral ^{NM} (<i>GPR56², SRPX2, TUBA8</i>) <input type="checkbox"/> Porencephalie (<i>COL4A1</i>) <input type="checkbox"/> Schizencephaly ^{HPE} (<i>SHH¹, SIX3¹, EMX2</i>) <input type="checkbox"/> Septooptic dysplasia ^{HPE} (<i>HESX1, SHH¹, SIX3¹</i>)
Neurodegenerative Disorders	Metabolic Disorders
<input type="checkbox"/> NGS panel Spastic Paraplegia (37 HSP genes + 32 overlapping movement disorders) ^{HSP, 3} <input type="checkbox"/> Andermann syndrome/Agnesis of the corpus callosum with peripheral neuropathy (<i>KCC3 = SLC12A6²</i>) <input type="checkbox"/> CADASIL syndrome (<i>NOTCH3¹</i>) <input type="checkbox"/> Cerebral cavernous malformations (<i>CCM1¹, CCM2¹, CCM3¹</i>) <input type="checkbox"/> Frontotemporal Dementia +/- Parkinsonism (<i>MAPT¹</i>) <input type="checkbox"/> Leukoencephalopathy diffuse with Spheroids (<i>CSF1R</i>) <input type="checkbox"/> Metachromatic leukodystrophy (<i>ARSA</i>) <input type="checkbox"/> Spastic Paraplegia 1, X-linked/MASA syndrome (<i>L1CAM¹</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 3a, autosomal dominant (<i>Atlastin¹</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 4, autosomal dominant (<i>Spastin¹</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 31, autosomal dominant (<i>REEP1¹</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 5a, autosomal recessive (<i>CYP7B1²</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 7, autosomal recessive (<i>Paraplegin²</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 11, autosomal recessive (<i>Spatacsin²</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 15, autosomal recessive (<i>Spastizin²</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia 20/Troyer Syndrome, autosomal recessive (<i>Spartin²</i>) ^{HSP} <input type="checkbox"/> Spastic Paraplegia complicated, autosomal-recessive ² Linkage analysis for SPG5a, 7, 11, 14, 15, 20, 21 ^{HSP, 26}	<input type="checkbox"/> NGS panel Liver disorders/Cholestasis (84 genes) ^{CHOL, 3} <input type="checkbox"/> Cystic Fibrosis (<i>CFTR</i> : 36 mutations, on request sequencing) <input type="checkbox"/> Glucose-6-Phosphat Dehydrogenase-Deficiency (<i>G6PD</i>) <input type="checkbox"/> IPEX syndrome (Immunodysregulation, Polyendocrinopathy, and Enteropathy, X-linked: <i>FOXP3</i>) <input type="checkbox"/> Intrahepatic cholestasis of pregnancy (<i>ABCB4, ATP8B1</i>) <input type="checkbox"/> Progressive familial/Benign recurrent intrahepatic cholestasis ^{2, CHOL} (<i>ATP8B1, ABCB11, ABCB4</i>) <input type="checkbox"/> Surfactant metabolism dysfunction (<i>SFTPB, ABCA3, SFTPC, CSF2RA</i>) <input type="checkbox"/> Trimethylaminuria (<i>FMO3</i>)
Ektodermal Dysplasias	Reproductive Genetics
<input type="checkbox"/> EEC3 syndrome (<i>p63</i> partial) <input type="checkbox"/> Ectodermal an-/hypohidrotic dysplasia, autosomal dominant or recessive (<i>EDAR¹</i>) <input type="checkbox"/> Ectodermal an-/hypohidrotic dysplasia, X-linked (<i>EDA¹</i>) <input type="checkbox"/> Hay-Wells Syndrome/AEC Syndrome (<i>p63</i> partial)	<input type="checkbox"/> Adrenal Hyperplasia, 11 β -hydroxylase deficiency (<i>CYP11B1</i>) <input type="checkbox"/> Adrenal Hyperplasia, 21-hydroxylase deficiency (<i>CYP21A2¹</i>) <input type="checkbox"/> Adrenal Hyperplasia, 3 β -hydroxysteroid dehydrogenase deficiency (<i>HSD3B2</i>) <input type="checkbox"/> Adrenocortical insufficiency, <i>NR5A1</i> associated (<i>NR5A1</i>) <input type="checkbox"/> Androgen insensitivity syndrome (<i>AR¹</i>) <input type="checkbox"/> Kallmann syndrome (<i>KAL1¹, FGFR1¹, PROK2¹, PROKR2¹</i>) <input type="checkbox"/> Leydig cell hypoplasia/LH resistance (<i>LHCGR</i>) <input type="checkbox"/> Ovarian hyperstimulation syndrome, spontaneous (<i>FSHR</i>)
^α Human Genetics Laboratory PD Dr. Hehr ² optional prior linkage analysis for suitable families	¹ in addition MLPA to detect exon deletions/duplications ³ Targeted NGS disease panels currently not accredited

Request for diagnostic genetic testing^β

Please send 5 - 10 ml EDTA-blood

Retinal disorders ^β	Hereditary cancer syndromes ^{β, 4}
<ul style="list-style-type: none"> <input type="checkbox"/> Achromatopsia, autosomal recessive (<i>CNGA3, CNGB3, GNAT2</i>) <input type="checkbox"/> Atrophia gyrata, autosomal recessive (<i>OAT</i>) <input type="checkbox"/> Bietti crystalline dystrophy, autosomal recessive (<i>CYP4V2</i>) <input type="checkbox"/> Choroideremia, X-chromosomal (<i>CHM</i>)⁴ <input type="checkbox"/> Familial exudative vitreoretinopathy (<i>FZD4, LRP5, NDP, TSPAN12, ZNF408</i>) <input type="checkbox"/> Congenital stationary night blindness <ul style="list-style-type: none"> <input type="radio"/> Autosomal dominant (<i>GNAT1, RHO, PDE6B</i>) <input type="radio"/> X-chromosomal (<i>NYX</i>) <input type="checkbox"/> Maculopathies <ul style="list-style-type: none"> <input type="radio"/> Stargardt disease, autosomal recessive (<i>ABCA4</i>) <input type="radio"/> Fundus albipunctatus, autosomal recessive (<i>RDH5</i>) <input type="radio"/> Best disease, autosomal dominant (<i>BEST1</i>) <input type="radio"/> Adult vitelliform macular dystrophy, autosomal dominant (<i>BEST1, PRPH2</i>) <input type="radio"/> Pattern dystrophy, autosomal dominant (<i>PRPH2</i>) <input type="radio"/> Bestrophinopathy, autosomal recessive (<i>BEST1</i>) <input type="radio"/> Vitreoretinchoroidopathy, autosomal dominant (<i>BEST1</i>) <input type="radio"/> Doyme honeycomb dystrophy, autosomal dominant (<i>EFEMP1</i>) <input type="radio"/> Choroidal dystrophy, central areolar, autosomal dominant (<i>PRPH2, GUCY2D</i>) <input type="radio"/> Sorsby fundus dystrophy, autosomal dominant (<i>TIMP3</i>) <input type="radio"/> Macular dystrophy with hypotrichosis, autosomal recessive (<i>CDH3</i>) <input type="checkbox"/> Norrie syndrome, X-chromosomal (<i>NDP</i>) <input type="checkbox"/> Opticus atrophy, autosomal dominant (<i>OPA1</i>)⁴ <input type="checkbox"/> Retinitis pigmentosa, autosomal dominant (<i>PRPF31, PRPH2, RHO, RP1</i>) <input type="checkbox"/> Retinitis pigmentosa, X-chromosomal (<i>RP2, RPGR inkl. ORF 15</i>) <input type="checkbox"/> Retinoschisis, X-chromosomal (<i>RS1</i>) <input type="checkbox"/> Usher Syndrom Typ IIA, autosomal recessive (<i>USH2A</i>) <input type="checkbox"/> Cone dystrophy with supernormal rod responses, autosomal recessive (<i>KCNV2</i>) <p>Gene panel diagnostics⁵</p> <ul style="list-style-type: none"> <input type="checkbox"/> Gene panel Stargardt disease/macular dystrophy (<i>ABCA4, CNGB3, ELOVL4</i>) <input type="checkbox"/> Gene panel Leber congenital amaurosis (LCA) (<i>AIPL1, CEP290, CRB1, CRX, GUCY2D, RDH12, RPE65, RPGRIP1</i>) <input type="checkbox"/> Gene panel Cone dystrophy/Cone-rod-dystrophy (<i>ABCA4, ADAM9, AIPL1, CERKL, CDHR1, CNGB3, CRX, C8ORF37, GUCA1A, GUCY2D, KCNV2, PROM1, PRPH2, RDH5, RAB28, RAX2/RAXL1, RIMS1, RPGR inkl. ORF 15, RPGRIP1, SEMA4A</i>) 	<ul style="list-style-type: none"> <input type="checkbox"/> Cowden syndrome (<i>PTEN</i>), autosomal dominant <input type="checkbox"/> Familial adenomatous polyposis (FAP1), autosomal dominant (<i>APC</i>) <input type="checkbox"/> Familial adenomatous polyposis 2 (FAP2), autosomal recessive (<i>MUTYH</i>) <input type="checkbox"/> Hereditary melanoma (<i>CDKN2A</i>), autosomal dominant <input type="checkbox"/> Li-Fraumeni syndrome (<i>TP53</i>), autosomal dominant <input type="checkbox"/> Von-Hippel-Lindau syndrome (<i>VHL</i>), autosomal dominant <input type="checkbox"/> Familial breast and ovarian cancer, autosomal dominant⁶ <ul style="list-style-type: none"> <input type="radio"/> (<i>BRCA1</i>) <input type="radio"/> (<i>BRCA2</i>) <input type="checkbox"/> Hereditary non-polyposis colorectal cancer (HNPCC), autosomal dominant⁶ <ul style="list-style-type: none"> <input type="radio"/> (<i>MSH2, MSH6</i>) <input type="radio"/> (<i>MLH1, PMS2</i>) <p>Sonstige^β</p> <ul style="list-style-type: none"> <input type="checkbox"/> Primary failure of tooth eruption (<i>PTH1R</i>), autosomal dominant <input type="checkbox"/> Familial amyloidosis (<i>TTR</i>), autosomal dominant <input type="checkbox"/> Carrier status (known familial mutation, report required) <p>_____</p> <p>_____</p> <p><input type="checkbox"/> _____</p> <p>_____</p> <p>_____</p>
	<p>^β Institut für Humangenetik der Universität Regensburg, Prof. Dr. B. Weber in Kooperation mit Praxis für Humangenetik, Dr. I. Schönbuchner; tests are performed via Sanger sequencing (accredited DIN EN ISO 15189)</p> <p>⁴ + MLPA</p> <p>⁵ Gene panel diagnostics are performed via NGS (not accredited) and Sanger sequencing (accredited DIN EN ISO 15189)</p> <p>⁶ Diagnostics are performed via NGS (not accredited) and Sanger sequencing (accredited DIN EN ISO 15189)</p>