



DEPARTMENT OF CLINICAL GENETICS
SECTION GENOME DIAGNOSTICS (GD)

REQUISITION FORM FOR MOLECULAR GENETIC TESTING

The section GD is NEN-EN-ISO
15189:2012 accredited by the Dutch
Accreditation Council. The scope for
accreditation number M007 can be
found at www.rva.nl.



Surname and Initials*

Name spouse

Street name and number*

Postal code and city* Country*

Date of birth* (yyyy/mm/dd)

Sex*

* REQUIRED FIELDS

Patient information / Fill out completely

Postal address:

LUMC, Building 2
KG, Genome diagnostic S-06-P
Visiting address: Einthovenweg 20,
Replay number 10392
2300 RC Leiden
The Netherlands

Administration:

Tel: 071-5269800
Email: genoomdiagnostiek@lumc.nl
Website: www.LUMC.nl/klingen

PROCEDURE: Always consult us prior to sending material other than blood or DNA. Tel: +31715269800.

All materials must be clearly labelled with number, name and date of birth of the patient.

MATERIAL: **DNA TESTING:** 8-10 ml EDTA blood (neonates ≥ 2.5 ml), DNA (at least 15 μ g), tissue, chorionic villi (20 mg) or amniotic fluid (15 ml). *Please note for FSHD & Hemophilia 2 tubes EDTA blood.*

RNA TESTING: Use the "RNA ANALYSIS form".

TRANSPORT: EDTA blood and DNA can be sent at room temperature by post to the address above. Use an overnight courier for priority samples and cooled material.

FORM: Please fully complete the form (**one form per person**).

PATIENT INFORMATION: Please give to the patient, this can be found at <https://www.lumc.nl/over-het-lumc/afdelingen/klinische-genetica/aanvraagformulieren/>

For diagnostic turnaround times, our current criteria for diagnostic requests and opening hours, see our website.

Objection to other use of remaining material: yes no

Due to incomplete applications there is a possibility of delay

REFERRING PHYSICIAN :	Telephone :
Hospital/Institution :	Department :
Address :	Your ref. no. :
Postal code / City :	Email :
Date of collection :	

REASON FOR REFERRAL

- | | |
|--|--|
| ☐ carrier testing (for recessive diseases only) | ☐ prenatal testing (only after consultation) |
| ☐ confirmation / exclusion of clinical diagnosis | ☐ request for interpretation of variant in index patient |
| ☐ predictive / presymptomatic testing | ☐ storage, reason: |
| ☐ testing for family members | |

GENE(S) / TEST:

(see next pages for overview)

Did you previously send us material from this patient, a family member or spouse?

☐ NO ☐ YES (patient) ☐ YES (family members, fill in table)

Known mutation: yes:

LDGA Family number (F-No.):

CLINICAL INFORMATION and/or **PEDIGREE** (draw pedigree after print or add separately, indicate index with arrow):

Information of tested family members:

No. In pedigree	Name (full)	Date of birth	Sex	Relation to current patient

TO BE FILLED OUT BY PATIENT SECRETARY:

Datum ontvangst:

Paraaf ontvangst:

Materiaal en aantal: Bloed / DNA / Vlokken / Vruchtwater/Weefsel

Familienummer:

☐ Alleen formulier

Gene panels

See next pages for request of individual genes

- o Breast and ovarium cancer panel
- o Cerebral angiopathies / adult-onset leukoencephalopathies
(including CADASIL)
- o Coffin-Siris / Nicolaidis-Baraitser syndrome
- o Colorectal carcinoma
- o Episodic Ataxia
- o FAMMM (Familial Atypical Multiple Mole-Melanoma)
- o Familial pancreatic carcinoma
- o Short stature, basic gene panel
- o Hereditary Multiple Osteochondromas
- o LYNCH syndrome
- o Lipodystrophy
- o Migraine, familial hemiplegic
- o MODY (Maturity Onset Diabetes of the Young)
- o Muscular dystrophies / myopathies
- o Paragangliomas and/or pheochromocytomas
- o Polyglutamin repeat disorders
- o Polyposis coli, adenomatous*
- o Polycystic kidney disease
- o Skeletal Muscle Channelopathies

Alias

- HBOC panel**
- CHA panel**
- CSS panel**
- CRC panel**
- EA panel**
- Melanoma panel**
- PACA panel**
- Growth panel**
- HMO panel**
- LYNCH panel**
- LIPO panel**
- FHM panel**
- Diabetes panel/ MODYScan**
- Muscle panel/ MuscleScan**
- PGL panel**
- PolyQ**
- Polyp panel**
- PKD panel**
- Channelopathies**

For an overview of all genes in the gene panels see: <https://www.lumc.nl/over-het-lumc/afdelingen/klinische-genetica/genpanels/>

NB. NGS is performed by GenomeScan B.V.

Genome analysis

- o Mental retardation or developmental delay, with or without multiple congenital defects
- o Microdeletion syndrome (specify)
- o Growth disorders
- o Carrier detection as a result of array finding

Test

- o CNV analysis (genome wide)
- o CNV analysis (genome wide)
- o CNV analysis (genome wide)
- o CNV analysis (genome wide)

Disorder/Referral	Type	Gene/Test
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Blood diseases

- | | | |
|---|--------|-------|
| o Hemochromatosis | Type 1 | o HFE |
| o Hemoglobinopathies / Thalassemia | | |
| Please use "Requisition form Hemoglobinopathy analysis" | | |
| o Hemophilia (<i>Please send in 2 tubes EDTA blood</i>) | Type A | o F8 |
| | Type B | o F9 |

Cancer genetics

*Requests only by a consultant clinical geneticist

- | | | |
|--|-----|--|
| o Breast- and ovarian cancer, hereditary * | | ATM
BARD1
BRCA1
BRCA2
BRIP1
CHEK2
PALB2
RAD51C
RAD51D |
| o Clear cell meningioma/ Familial Multiple Meningioma* | CCM | o SMARCE1
o SMARCB1 |
| o FAMMM (Familial Atypical Multiple Mole-Melanoma)* | | o CDKN2A
o CDK4
o POT1
o BAP1
o MITF
o SDHA |
| o Gastrointestinal Stromal Tumors
(GIST, Carney-Stratakis syndrome) | | |
| o Hyperparathyroidism-jaw tumor syndrome (HPT-JT/HRPT2) | | o CDC73 |
| o Lynch syndrome (HNPCC)* | | o MLH1 |
| | o | MSH2 (incl. EPCAM) |
| | | o MSH6 |
| | | o PMS2 |
| o Myeloproliferative diseases (MPDs, somatic mutation) | | o JAK2
(p.Val617Phe) |
| | o | MPN-combi:
JAK2 exon 12 &
exon 14 p.(Val617Phe),
MPL exon 10 and
CALR exon 9 |

Disorder/Referral	Type	Gene/Test
o Parangliomas and/or pheochromocytomas		o MAX o SDHA o SDHAF2 o SDHB o SDHC o SDHD o TMEM127
o Polyposis coli, adenomatous*	FAP1 MAP NAP PPAP PPAP FAP4	APC (incl. GREM1) o MUTYH o NTHL1 o POLD1 o POLE o MSH3 o SDHB
o Renal Cell Carcinoma (RCC), hereditary		o SMARCB1
o Rhabdoid tumor predisposition syndrome (RTPS)*	RTPS1 RTPS2	o SMARCA4 o SMARCA4 o SMARCB1 o SMARCB1
o Small cell carcinoma of the ovary, hypercalcemic type*	SCCOHT SCCOHT	
o Schwannomatosis*		

Channelopathies

o Hyperkalemic periodic paralysis (HYPP)		o SCN4A
o Hypokalemic periodic paralysis (HOKPP)	Type 1 Type 2	o CACNA1S o SCN4A
o Myotonia congenita (Thomsen, Becker disease)		o CLCN1
o Myotonia permanens/fluctuans		o SCN4A
o Paramyotonia congenita		o SCN4A

Diabetes

o Hyperproinsulinemia		o INS
o Insulin dependent diabetes		o INS
o MIDD (Maternally Inherited Diabetes and Deafness)		o m.3243A>G tRNALEU/UUR

Disorder/Referral	Type	Gene/Test
o MODY (Maturity Onset Diabetes of the Young)	Type 1	o HNF4A
	Type 2	o GCK
	Type 3	o HNF1A
	Type 4	o PDX1 (IPF1)
	Type 5	o HNF1B
	Type 6	o NEUROD1
	Type 10	o INS
o PNDM (Permanent Neonatal Diabetes Mellitus)		GCK
		o INS
		o KCNJ11
o Persistent hyperinsulinemic hypoglycemia of infancy (PHHI)		o GCK
		o KCNJ11

Growth and skeletal defects

o Achondroplasia	o FGFR3
o Acromesomelic dysplasia Type Maroteaux	o NPR2
o Hereditary Multiple Osteochondromas	o EXT1
	o EXT2
o NPR2- related tall stature	o NPR2
o Hypochondroplasia	o FGFR3
o Langer mesomelic dysplasia (Leri-Weill dyschondrosteosis)	o SHOX
o Multiple epiphyseal dysplasia	o COMP
o Pseudoachondroplastic dysplasia	o COMP
o Short stature (proportionate)	o GH1
	o GHR
	o GHSR
	o IGF1
	o IGF1R
	o IGFALS
	o STAT5B
o Short stature (osteochondritis dissecans)	o ACAN
o Tall stature	o NPR2
o Thanatophoric dysplasia	o FGFR3
o Van Buchem disease	o VBCH

Disorder/Referral	Type	Gene/Test
Immune system		
o Chilblain lupus	Type 1	o TREX1
o Granulomatous disease, chronic, X-linked		o CYBB
o Lymphoproliferative syndrome, X-linked		o XLP
o Mediterranean fever, familial (FMF)		o MEFV
o Wiskott-Aldrich syndrome		o WAS
Metabolic diseases		
o Adrenal hypoplasia, congenital		o NR0B1 (DAX1)
o Cystinuria		o SLC3A1
		o SLC7A9
Muscular dystrophies/ Myopathies		
Slow-channel congenital myasthenic syndrome-4A (CMS4A)	Type 4A	CHRNE
Congenital myasthenic syndrome-5 (CMS5)	Type 5	COLQ
Congenital myasthenic syndrome-9 (CMS9)	Type 9	MUSK
associated with AChR deficiency		
Congenital myasthenic syndrome-10 (CMS10)	Type 10	DOK7
Congenital myasthenic syndrome-11 (CMS11)	Type 11	RAPSN
associated with acetylcholine receptor deficiency		
Congenital myasthenic syndrome-14 (CMS14)	Type 14	ALG2
Congenital myasthenic syndrome-15 (CMS15)	Type 15	ALG14
Duchenne and Becker		DMD MLPA only
		DMD Sequencing only
		DMD MLPA, if negative directly followed by sequencing
Emery-Dreifuss (X-linked)		EMD
Facioscapulohumeral (FSHD)	Type 1	Rearrangement
(Please send in 2 tubes of EDTA blood)		chromosome 4
	Type 2	SMCHD1
		LRIF1
		DNMT3B

Disorder/Referral	Type	Gene/Test
o Limb Girdle	Myofibrillar myopathy	o MYOT
	Emery–Dreifuss muscular dystrophy (EDMD)	o LMNA
	Rippling muscle disease	o CAV3
	LGMD D4 / R1	o CAPN3
	LGMD R2	o DYSF
	LGMD R5	o SGCG
	LGMD R3	o SGCA
	LGMD R4	o SGCB
	LGMD R6	o SGCD
	LGMD R7	o TCAP
	LGMD R8	o TRIM32
	LGMD R9	o FKRP
	LGMD R12	o ANO5
o Miyoshi (MMD3)		o ANO5
o Myopathy with extrapyramidal signs		o MICU1
Neurogenetics		
o Aicardi-Goutières syndrome	Type 1	o TREX1
o Alternating Hemiplegia of Childhood	Type 2	o ATP1A3
o CADASIL		o NOTCH3
o CARASIL/ CADASIL	Type 2	o HTRA1
o Cerebral hemorrhage with amyloidosis (HCHWA-D)		o APP
o Dentatorubral-pallidoluysian atrophy (DRPLA)		o ATN1
o Episodic ataxia	Type 2	o CACNA1A
o Huntington disease		o HTT
o Huntington, disease-like 2 (HDL2)		o JPH3
o Hyperekplexia (familial Startle disease)		o GLRA1
		o GLRB
		o SLC6A5
		o ATP1A2
o Migraine, familial hemiplegic (FHM)		o CACNA1A
		o SCN1A
		o SGCE
o Myoclonus dystonia syndrome		

Disorder/Referral	Type	Gene/Test
o Neuronal ceroid lipofuscinosis (NCL) Juvenile	Late infantile	o CLN3
	Late infantile	o TPP1 (CLN2)
	Late infantile	o CLN6
	Late infantile	o CLN8
	Late infantile / adult	o PPT1 (CLN1)
o Paroxysmal torticollis		o CACNA1A
• Polyglutamin repeat disorders		o CACNA1A, TBP, ATXN1, ATXN7, ATXN2, ATXN3 and ATN1
o Retinal vasculopathy with cerebral leukodystrophy (RVCL)		o TREX1
Polycystic kidney disease		
o Autosomal dominant Polycystic kidney disease (ADPKD)	Dominant	o PKD1
	Dominant	o PKD2
o Autosomal dominant Polycystic kidney and liver disease (ADPKD)	Dominant	o GANAB
o Autosomal recessive Polycystic kidney (ARPKD)	Recessive	o PKHD1
o Renal cysts and diabetes syndrome (RCAD)	Dominant	o HNF1B
Syndromes		
o Coffin-Siris syndrome		o ARID1A
		o ARID1B
		o SMARCA4
		o SMARCB1
		o SMARCE1
o Ellis van Creveld syndrome		o EVC
		o EVC2
o Filippi syndrome		o CKAP2L
o Marshall-Smith syndrome		o NFIX
o Nicolaides-Baraitser syndrome		o SMARCA2

Disorder/Referral	Type	Gene/Test
o Peters Plus syndrome		o B3GLCT (B3GALTL)
o Pitt-Hopkins syndrome		o TCF4
o Rubinstein - Taybi syndrome		o CREBBP
		o EP300
o Sotos syndrome		o NSD1
o Sotos-like syndrome		o DNMT3A
		o NFIX
		o SETD2
		o HIST1H1E
o TAR (thrombocytopenia-absent radius) syndrome		o 1q21.1 deletion and RBM8A SNP
o Weaver syndrome		o EZH2
Other		
o Hypocalciuric Hypercalcemia, Familial (FHH)		o CASR
		o GNA11
		o AP2S1
o Keratosis follicularis spinulosa decalvans (KFSD)		o MBTPS2
o TSH deficiency and macroorchidism, X-linked		o IGSF1