CGC genetics

MOLECULAR GENETICS

CGC is a CLIA certified Lab, affiliated with IGM, Rutgers NJMS

Study(ies) identification Label(s)

Identification All fields are mandatory

use this space to paste the Label

Name:		
Date of Birth:	Sex: M / F	ID/Social Security Number:
Address:		Zip code:
Referring Center:		
Ordering Physician:		
Address:		Zip code:
Phone:	Fax:	Email:

Specimen

☐ Blood ☐ Amniotic Fluid ☐ CVS ☐ Tissue Type:	☐ Other:
Collection Date:	Time of collection:

Exam request – These are the most common tests, for further analysis see www.cgcgenetics.com

☐ Achondroplasia (*FGFR3* seqencing)
☐ Adenomatous Polyposis Coli *
☐ Alström Syndrome (*ALMS1* sequencing)
☐ Alzheimer disease (*APOE* genotyping) *
☐ Alzheimer disease(*PSEN1*, *PSEN2* and *APP genes*) *
☐ Angelman Syndrome (*UBE3A* sequencing)
☐ Antithrombin III deficiency (*SERPINC1* sequencing)
☐ Array CGC - Mol. Diag. of Bardet-Biedl Syndrome
☐ Array CGC - Mol. Diag. of Congenital Deafness (Nonsyndromic)
☐ Array CGC - Mol. Diag. of Congenital Deafness (Syndromic)
☐ Array CGC - Mol. Diag. of Craniosynostosis
☐ Array CGC - Mol. Diag. of Fraser Syndrome
☐ Array CGC - Mol. Diag. of Metabolic Diseases
☐ Array CGC - Mol. Diag. of Sekletal Dysplasias
☐ Array CGC - Mol. Diag. of Thrombophilia & Warfarin Pharmacogenetics
☐ Array CGH
☐ Bardet-Biedl Syndrome (mutation M390R, *BBS1*)
☐ Breast Cancer (*BRCA1* and *BRCA2*) *
☐ Breast Cancer (*BRCA2*, IGM panel) *
☐ Charcot-Marie-Tooth disease Type 1A (microsatellites analysis) *
☐ Charcot-Marie-Tooth disease Type 1B (*MPZ* sequencing) *
☐ Charcot-Marie-Tooth disease Type 1C (*LITAF* sequencing) *
☐ Charcot-Marie-Tooth disease Type 1E (*PMP22* sequencing) *
☐ Charcot-Marie-Tooth disease Type 2B1 (*LMNA* sequencing) *
☐ Charcot-Marie-Tooth disease Type 2E/1F (*NEFL* sequencing) *
☐ Charcot-Marie-Tooth disease Type 2I/2J (*MPZ* sequencing) *
☐ Charcot-Marie-Tooth disease Type 2K/4A (*GDAP1* sequencing) *
☐ Charcot-Marie-Tooth disease X-linked (*GJB1* sequencing) *
☐ Cohen Syndrome (mutation c.3348_3349delCT)
☐ Cystic Fibrosis and CBAVD (*CFTR* sequencing)
☐ Cystic Fibrosis and CBAVD (frequent mutations, IGM Panel)
☐ Detection of Periodontal Pathogens
☐ Dilated Cardiomyopathy *
☐ Duchenne/Becker Muscular Dystrophy (MLPA) *
☐ Emery-Dreifuss Dystrophy (*LMNA* sequencing) *
☐ Facioscapulohumeral Dystrophy *
☐ Familial Hypercholesterolemia (*LDLR*+APOB)
☐ Familial Mediterranean Fever (12 mutations)
☐ Fragile-X Syndrome
☐ Gilbert Syndrome [mutation (TA)7TAA]
☐ HNPCC - large rearrangments (MLPA) *
☐ HNPP/Tomaculous Neuropathy - delection 17q11.2 (MLPA) *
☐ HPV Genotyping (detection of 18 high and low risk genotypes)
☐ Hypertrophic Cardiomyopathy *
☐ Hypocondroplasia
☐ Li-Fraumeni Syndrome (p53) *
☐ Miotonic Dystrophy (Steinert diasease) *
☐ Muenke Syndrome
☐ NonSyndromic Congenital Deafness (*GJB2*)
☐ NonSyndromic Congenital Deafness (*GJB6*)
☐ NonSyndromic Congenital Deafness (*OTOF*)
☐ NonSyndromic Congenital Deafness (*POU3F4*)
☐ Noonan syndrome (frequent mutations *PTPN11*)
☐ Prader-Willi/Angelman Syndrome (methylation test)
☐ Progeria (*LMNA*)
☐ Protein C deficiency (*PROC* sequencing)
☐ Protein S deficiency (*PROS1* sequencing)
☐ Pycnodysostosis (*CTSK* sequencing)
☐ Renal Glucosuria (*SLC5A2* sequencing)
☐ Spinal Muscular Atrophy (Werdnig-Hoffman Disease) *
☐ Susceptibility to Periodontitis (*IL1* polymorphisms)
☐ Von-Hippel Lindau disease
☐ Warfarin sensitivity (*CYP2C9* and *VKORC1)*
☐ Y chromosome microdelections

☐ Medical Genetic Counseling: _____
☐ Cytogenetic Analysis: _____
☐ Other *: _____

*** Tests for the pre-symptomatic diagnosis of monogenic diseases and genetic susceptibility tests in healthy people will only be conducted with informed consent.**

Informed consent:

I wish to make the tests above indicated, and I assure that I was properly and fully informed, so I give my consent. I also authorize the report to be sent to my physician and my sample to be used for research purposes.

Signature

Clinical Indications for the test (s) / Clinical Information

Family Tree