NHS Genomic Medicine Service, WGS Test Request Rare Disease, July 2023, v1.4 to be used for WGS golive. This document is subject to version control and is regularly updated. Please confirm you are using the current version by contacting your local Genomic Laboratory Hub.

Genomic Medicine Service

Whole Genome Sequencing (WGS) Test Request PLEASE DO NOT USE FOR NON-WGS TESTS

RARE AND INHERITED DISEASES



Requesting org	ganisation:												
GLH laboratory	<i>y</i> :												
Proband's first name				Life status Ethnicity									
riobalia silistilanie				Life status Ethnicity □ Alive □ Deceased									
Proband's last name													
1 Tobalia 3 last hame				Family test ☐ Singleton ☐ Trio ☐ Other (provide number):									
Date of birth (da	//mm/www Hospital	number			Relevant clinical information								
	,,,,,,,					ase include any				ith date(s) and	any othe	er pertinent	
Gender Please state in clinical information				clin	nical information								
☐ Male ☐	Female □ Oth	box if karyot sex differ fro		or phenotypic gender									
Postcode													
NHS number													
			7										
Danas a NUIC No		1											
	umber not availab gible for NHS number (e		tional)										
	provide reason):	0 0	,										
Test request													
Clinically urge	nt 🗌				Tes	t Directory	Clinica	al Inc	lication & c	ode (reaso	n for t	esting)	
-	urgent WGS pathway,												
considered urgent.	ses. Please provide deta	alls of wny this	referr	aris									
_													
					Proband's age of onset years months								
Additional pane	l(s) (if relevant; m	nandatory	for F	R89)	Disease penetrance Specific rare or inherited diseases that								
	l type 'GMS Rare Diseas	se Virtual' -											
http://panelapp.geno	micsengland.co.uk)				- Complete								
					Incomplet	е							
Family members to be tested (not required for proband o				nly r	eferrals)			T			T		
First name	Last name	Date of birth		Number ostcode if	Gend	der Deceased	Sta	itus		Ethnicity		Relationship to proband	
			not	known)		+ +							
Samples being	sent to GLH DNA	extraction	lab (only requ	iired	if also using	this fo	orm fo	or sample co	llection)	T		
First name	Last name	Date of b	nirth	Sample	ID	Collection Sample type Sample		Comments					
This flame	Edst Hame	Dute of k	J.I. C.I.	Sample		date / time Sample type volume		volume					
Dosponsible sliv	isian / sansultar					Asia soutosi	• /:£ al:	££		ماداد مادد	-:/		
Responsible clinician / consultant				Main contact (if different from responsible clinician/consultant)									
Name:				Name:									
Department address:					D	epartment	addre	ess:					
Phone				Dhama									
Phone:				Phone:									
Email:				Email:									

☐ I have attached a copy of the Record of Discussion form for all individuals

☐ Patient conversation taken place; Record of Discussion form to follow

Version 1.4 Page 1 of 2

Proband first name	band first name Proband last name Date of birth (dd/mm		NHS number									

HPO terms are important for the analysis and interpretation of WGS data.

Please enter valid HPO terms present in the proband/family members being tested

HPO terms can be copied from the lists below

	111 0 ter	ms can be copied	mom the lists ben	J 10		
HPO Terms - Please ensure those given match those available at						
(https://hpo.jax.org/app/)	Present Absent		Present	Absent	Present	Absent

Intellectual disability, developmental and
metabolic
Intellectual disability - mild
Intellectual disability - moderate
Intellectual disability - profound
Intellectual disability - severe
Autistic behaviour
Global developmental delay
Delayed fine motor development
Delayed gross motor development
Delayed speech and language development
Generalized hypotonia
Feeding difficulties
Failure to thrive
Abnormal facial shape
Abnormality of metabolism/homeostasis
Microcephaly
Macrocephaly
Tall stature

Craniosynostosis	
Bicoronal synostosis	
Unicoronal synostosis	
Metopic synostosis	
Sagittal craniosynostosis	
Lambdoidal craniosynostosis	
Multiple suture craniosynostosis	

Skeletal dysplasia	
Disproportionate short stature	
Proportionate short stature	
Short stature	
Skeletal dysplasia	

Diabetes

Diabetes
Neonatal insulin-dependent diabetes mellitus
Transient neonatal diabetes mellitus
Renal
Multiple renal cysts
Nephronophthisis
Hepatic cysts
Enlarged kidney
Renal insufficiency

Neurology
Muscular dystrophy
Myopathy
Myotonia
Fatigable weakness
Peripheral neuropathy
Distal arthrogryposis
Arthrogryposis multiplex congenita
Cognitive impairment
Parkinsonism
Spasticity
Chorea
Dystonia
Ataxia
Cerebellar atrophy
Cerebellar hypoplasia
Dandy-Walker malformation
Olivopontocerebellar hypoplasia
Diffuse white matter abnormalities
Focal White matter lesions
Leukoencephalopathy
Cortical dysplasia
Heterotopia
Lissencephaly
Pachygyria
Polymicrogyria
Schizencephaly
Holoprosencephaly
Hydrocephalus
Neurodegeneration
Dementia

Demenua
Epilepsy
Seizures
Generalized seizures
Focal seizures
Epileptic spasms
Infantile encephalopathy
Atonic seizures
Generalized myoclonic seizures
Generalized tonic seizures
Generalized tonic-clonic seizures
EEG with focal epileptiform discharges
EEG with generalized epileptiform discharges
Multifocal epileptiform discharges

Cardiology
Hypertrophic cardiomyopathy
Dilated cardiomyopathy
Cardiomyopathy

Eye Disorders
Cataract
Retinal dystrophy
Macular dystrophy
Microphthalmia
Anophthalmia
Coloboma
Developmental glaucoma
Aniridia
Abnormal anterior eye segment morphology
Nystagmus

•
Immune Disorders
Immunodeficiency
Abnormal lymphocyte morphology
Abnormal lymphocyte physiology
Abnormal lymphocyte count
Abnormality of neutrophils
Abnormality of humoral immunity
Abnormal inflammatory response
Abnormality of complement system

Version 1.4 Page 2 of 2