

REQUEST FORM CONSTITUTIONAL GENETIC ANALYSIS

version 2/20251001

Print Form

Label sample



Universitair Ziekenhuis Brussel



CENTRE FOR MEDICAL GENETICS

UZ Brussel

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<https://www.uzbrussel.be/web/centrum-voor-medische-genetica/>

BELAC 141-MED accredited according to quality standard ISO15189

Identification patient *

* Mandatory data

Name: Sticker

First name: _____

Date of birth: _____ Gender (M/F): _____

Residential address: identification patient

Invoice address: _____

Email address: _____

Phone: _____

National registry N°: _____

Ethnic origin: _____

Sample data *

Sample type ☐ Blood

☐ Dried blood spots

☐ Biopsy Specify: _____

☐ DNA from Specify: _____

☐ Tissue culture ☐ Fibroblast culture or skin biopsy

☐ Other Specify: _____

☐ Stock sample Reason: _____

Collection date: _____

Indication *

☐ Diagnostic analysis

☐ Check familial DNA variant/chromosomal aberration (1)/(2) required

☐ Presymptomatic analysis 2nd independent sample required

☐ Research Specify: _____

☐ Other Specify: _____

☐ Urgent Reason: _____

Urgent = minimal turn-around-time
Final decision urgency is determined by lab

Clinical information * add in capitals please

☐ Symptomatic ☐ Asymptomatic

Extra data in attachment

☐ Informed consent

☐ Pedigree

☐ Clinical report/checklist

☐ Genetic report (index patient)

Chromosomal analysis

Sampling	Chromosomal analysis	Specification	TAT
H	☐ Conventional karyotyping	:	4-10 weeks
E	☐ Molecular karyotyping	:	2-12 weeks
E	☐ QF-PCR (chr X, Y, 13, 18, 21)	:	2- 6 weeks
H	☐ FISH	:	2-12 weeks

Biochemical analysis

Sampling	Lysosomal storage disease	Enzyme	Specification	TAT
S E	☐ Chitotriosidase activity	chitotriosidase	:	2-3 months
H	☐ Fabry (only analysed for male)	α -galactosidase	:	2-3 months
H	☐ Gaucher	β -glucosidase	:	2-3 months
H	☐ MPS1-Hurler-Scheie	α -L-iduronidase	:	2-3 months
F @/®	☐ Pompe	α -glucosidase	:	2-3 months

Identification referring physician *

Name: Stamp

First name: _____

Referring service: _____

Address: referring physician

Email address: _____

Phone: _____

RIZIV/INAMI number: _____

Signature *: _____

Request date *: _____

Your reference: _____

Copy result to: _____

Address: _____

☐ Genetisch rapport in Nederlands ☐ Genetics report in English

Family data

☐ Family member followed elsewhere Specify: _____

Name family member: _____

First name family member: _____

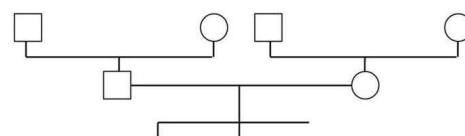
Date of birth family member: _____ Gender (M/F): _____

Relation patient to family member: _____

Clinical findings family member (1): _____

Genetic defect in family member (2) : addition genetic report required

Consanguinity ☐ Between partner and patient
☐ Between parents of patient
☐ Other Specify: _____



☐ man
☐ woman
☐ fetus
☐ normal
☒ carrier
☒ affected
/ deceased

Additional information other family members:

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Identification patient *

Name & first name patient: _____

Date of birth: _____

Gender (M/F): _____

Legend

E EDTA blood min. 4ml

F only fibroblasts

H Na-Hep blood min. 7ml

S tube without additive 5ml (serum)

* mandatory data

IC informed consent required

KV clinical report required

T trio (index+parents) required

/ @ only after phone/mail consult

Print Form

Molecular (DNA) analysis

(Detailed information gene panels see <http://www.brightcore.be/gene-panels>)

Sampling	Blood disorders	Gene	Specification	TAT
E	☐ Hemochromatosis	HFE p.His63Asp & p.Cys282Tyr	Serum ferritine*: _____ Transferrine sat*: _____	2-4 weeks
E	☐ Hemoglobinopathy	☐ HbS ☐ HbC ☐ α -thal ☐ β -thal	α -thal and β -thal: prior Hb-electrophoresis required	1-3 months
Sampling	Blood coagulation problems	Gene (variant)	Specification	TAT
E	☐ Antithrombin deficiency	☐ gene SERPINC1 ☐ targeted	_____	1-3 months
E	☐ Complement factor H	☐ gene CFH ☐ targeted	_____	1-3 months
E	☐ Factor II/Prothrombin	F2 c.*97G>A	_____	2-4 weeks
E	☐ Factor V/APC-cofactor	F5 c.1601G>A p.Arg506Gln	APC resistance*: _____	2-4 weeks
E IC	☐ Protein C deficiency	☐ gene PROC ☐ targeted	_____	1-3 months
Sampling	Cardiac disorders	Gene panel/targeted	Specification	TAT
E IC KV	☐ Cardiomyopathy	☐ gene panel ☐ targeted	_____	2-6 months
E IC KV	☐ Primary cardiac arrhythmia	☐ gene panel ☐ targeted	_____	2-6 months
Sampling	Endocrinological disorders	Gene/gene panel/targeted	Specification	TAT
E	☐ Androgen receptor	☐ gene AR ☐ targeted	_____	1-3 months
E	☐ Calcium-sensing receptor	☐ gene CASR ☐ targeted	_____	1-3 months
E	☐ Combined pituitary hormone deficiency	☐ gene PROP1 ☐ gene POU1F1 ☐ targeted	_____	1-6 months
E IC	☐ Hypogonadotropic hypogonadism	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Obesity, monogenic, early onset	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Thyroid dysgenesis	☐ gene panel ☐ targeted	_____	2-6 months
E	☐ Thyroid hormone resistance	☐ gene THRB ☐ targeted	_____	1-3 months
Sampling	Familial cancer	Gene/gene panel/targeted	Specification	TAT
E IC	☐ Breast and/or ovarium carcinoma	☐ gene panel ☐ targeted	_____	1-3 months
E IC	☐ Colon carcinoma (Lynch/polyposis)	☐ gene panel ☐ targeted	_____	1-3 months
Sampling	Metabolic disorders	Gene/gene panel/targeted	Specification	TAT
E	☐ Aldolase B/fructose intolerance	☐ gene ALDOB ☐ targeted	_____	2-4 weeks
E IC	☐ Congenital defects of glycosylation	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Glycogen storage disease	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Lysosomal storage disease	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Neurotransmitter aandoening	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Organic aciduria	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Peroxisomal disorder	☐ gene panel ☐ targeted	_____	2-6 months
E IC	☐ Metabolic disorder (other)	☐ gene panel ☐ targeted	_____	2-6 months
Sampling	Mitochondrial disorders	Gene/gene panel/targeted	Specification	TAT
E	☐ Aminoglycoside induced deafness	MT-RNR1	_____	2-6 months
E	☐ Leigh or NARP syndrome		_____	2-6 months
E	☐ LHON syndrome	MT-ND1 m.3460, MT-ND4 m.11778, MT-ND6 m.14484	_____	2-4 weeks
E	☐ MERRF/MELAS (incl.MIDD)	MT-TK tRNA ^{Leu} , MT-TL1 tRNA ^{Leu}	_____	2-6 months
E IC KV	☐ Mitochondrial disorder, nuclear	☐ gene panel ☐ targeted	_____	2-6 months
E	☐ MNGIE		_____	2-6 months
E IC	☐ mtDNA deletions		_____	2-6 months
E IC	☐ mtDNA depletion syndrome (MDDS)	☐ gene panel ☐ targeted	_____	2-6 months
E IC KV	☐ mtDNA resequencing	complete mtDNA	_____	2-6 months
E	☐ Polymerase G	☐ gene POLG ☐ targeted	_____	2-6 months
Sampling	Neurological/neurodegenerative disorder	Gene/gene panel/targeted	Specification	TAT
E IC KV	☐ Epilepsy (incl. EIEE)	☐ gene panel ☐ targeted	_____	2-6 months
E	☐ GTP cyclohydrolase I deficiency (Segawa AD)	☐ gene GCH1 ☐ targeted	_____	1-3 months
E	☐ PLA2G6-ass neurodegenerative disorder	☐ gene PLA2G6 ☐ targeted	_____	1-3 months
E	☐ Spinocerebellar ataxia+DRPLA	SCA 1, 2, 3, 6, 7, 8, 17 + ATN1	_____	3-6 months
E	☐ Tyrosine hydroxylase (Segawa AR)	☐ gen TH ☐ targeted	_____	1-3 months
E	☐ Huntington disease	HTT CAG-repeat	_____	2-3 months
E	☐ Kennedy disease	AR CAG-repeat	_____	2-3 months
Sampling	(Neuro)development- and growth disorders	Gene/gene panel/targeted	Specification	TAT
E	☐ Achondroplasia	FGFR3 c.1123G>T, p.Gly375Cys & c.1138G>A, p.Gly380Arg & c.1138G>C, p.Gly380Arg	_____	2-4 weeks
E IC KV	☐ Congenital malformation(s)/MCA	☐ gene panel ☐ targeted	_____	2-6 months
E IC KV	☐ Cortical malformations	☐ gene panel ☐ targeted	_____	2-6 months
E	☐ Fragile-X syndrome	FMR1 CGG-repeat	_____	2-4 weeks
E KV	☐ Hydrocephaly, X-linked	☐ gene L1CAM ☐ targeted	_____	1-3 months
E IC KV	☐ Neurological development disorders	☐ gene panel ☐ targeted	_____	2-6 months
E IC KV	☐ Skelet dysplasia	☐ gene panel ☐ targeted	_____	2-6 months
Sampling	(Neuro)muscular disorders	Gene/gene panel/targeted	Specification	TAT
E	☐ AMP deaminase	☐ gene AMPD1 ☐ targeted	_____	2-4 weeks
E	☐ Becker-Thomsen myotonia	☐ gene CLCN1 ☐ targeted	_____	1-3 months
E	☐ Congenital (para)myotonia	☐ gene SCN4A ☐ targeted	_____	1-3 months
E	☐ Myotonic dystrophy/Steinert disease	DMPK CTG-repeat	_____	2-3 months
E IC	☐ Neuromuscular disorder	☐ gene panel ☐ targeted	_____	2-6 months
E	☐ Spinal muscular atrophy	SMN1 del ex7	_____	2-4 weken
Sampling	Diverse	Gene/gene panel/targeted	Specification	TAT
E	☐ Mucoviscidosis	CFTR frequent variants	_____	2-4 weeks
E	☐ Incontinentia pigmenti	☐ gene IKBKG ☐ targeted	_____	1-3 months
E	☐ X-inactivation		_____	1-3 months
E	☐ Other		_____	1-6 months

We strive to complete the analyses within the set turnaround times (TAT). In exceptional situations, we may deviate from the standard turnaround time.



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D01-E

INFORMED CONSENT FOR GENETIC ANALYSIS AND RESEARCH

IDENTIFICATIE PATIËNT (* verplicht)

[Sticker ID patiënt]

I. PERMISSION FOR:

I consent to a diagnostic genetic test being performed on a blood sample, or other samples for the following condition:

.....

(tick one choice)

- ☐ LIMITED genetic analysis or TARGETED analysis of gene(s)
- ☐ WIDE genetic analysis or NON-TARGETED genome wide analysis

A wide genetic analysis could lead to incidental and/or secondary findings of genetic results unrelated to the condition for which the analysis was originally performed (such as risk for cancer, heart disease, or other conditions for which an appropriate prevention, follow-up or treatment is available).

I realise that such a diagnosis may have consequences for my family as well as for myself.

- ☐ I do not wish to be informed of such incidental and/or secondary genetic results.

II. RIGHT TO CHANGE PERMISSION

I have the right to withdraw my consent at any *time**. The withdrawal of my consent will be recorded in writing and added to my patient record. The healthcare provider will inform me of any possible consequences of withdrawing my consent on my further medical treatment.

**The change, however, does not apply to data and/or results already collected before my request to withdraw my consent.*

III. STORAGE AND EXCHANGE OF DATA/SAMPLES for DIAGNOSTICS and RESEARCH

I understand that:

- my medical data and genetic samples are coded (security method) so that they can be used for diagnostic, and/or scientific research approved by the Ethics Committee.
- the exchange of coded medical and genetic data between experts is important to improve (general) knowledge of genetic disorders and/or development of tests. This could lead to:
 - a better diagnosis for myself and/or others,
 - better healthcare and therapeutic options,
 - better prevention.

In addition, the results may be published in scientific journals or presented at scientific meetings.

- my data can be analysed again and more widely (re-analysis) in the context of improved diagnostics and approved research projects, without having to inform me in advance. Please note that no systematic re-analysis of data currently takes place.

IV. COSTS of diagnostic genetic analysis

If my health insurance does not cover the cost of genetic testing, I will be held liable.

V. VOLUNTARY participation

My participation is entirely voluntary and will in no way provide any financial benefits to me.

NOTES



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To be completed by the PATIENT or REPRESENTATIVE:

- I confirm that I have been properly informed regarding the objectives and nature of the analysis related to my condition.
- I received the necessary info from the healthcare provider and/or I received, read and understood the accompanying information leaflet.
- I have had time and opportunity to ask questions, and I am satisfied with the answers and additional explanations.

I give this consent informed, knowingly and freely.

Date:

Signature:

*If representative:

Relationship to patient:

Name and first name:

To be completed by the professional:

I hereby confirm that I have informed the signed patient/representative and answered questions in the best possible way regarding the possible results, limitations and options for the above genetic testing

Date:

Signature: [Stamp health care provider]

Notes on storage and use of medical (personal) data and bodily material

After genetic testing as part of your diagnostics, some material is often left over (residual material). This material can be stored for possible future use. The possible uses are explained below:

- **Diagnostic testing - new diagnostic test:** Your stored material can be reused later to investigate a genetic cause of a disorder of yourself or your family. Your data will be encrypted to protect your privacy. If an important discovery is made for you and your health, you *may* be informed through your treating physician. This finding will then have to be confirmed for you with an independent test.
- **Scientific research:** The material can also be used for scientific research, for example to develop new knowledge about genetic diseases. This may eventually become important for the treatment of other patients. Results are generally not reported back.
- **General genetic research:** The material may contribute to broader scientific research that helps others, for example in developing new treatments or testing new diagnostic devices in the laboratory. Your material can serve as control material in general research, without directly applying to you as an individual. This can help compare genetic data from patients and healthy individuals.
- **New genetic questions (from you or your relatives):** If new questions arise about the heredity of conditions, the material can be used again for genetic testing.

In conclusion

We hope this explanation will help you make an informed decision about the storage and use of your body material. For more information, please contact the Medical Genetics Centre at UZ Brussel at <https://www.uzbrussel.be/en/web/genetics>

For more information on privacy, please visit: <https://www.uzbrussel.be/web/international>