

Postnatal Genetic Testing Genetic Test Requisition Form

Visit the UniGen Portal
to explore our test catalogue
and access your results.



PATIENT INFORMATION

Name Date of Birth / /
Medical Record No. Sex ☐ Male ☐ Female

ORDERING PHYSICIAN

Name License Number
Institution Department
Phone E-mail
Date of Request / / City Country

BILLING INFORMATION

VAT No. Address
Postal Code City Country

SAMPLE INFORMATION

Collected at: Collection date: / / Collection time:
Blood: ☐ EDTA ☐ Heparine ☐ Saliva (oragen OGD-600 kit)
☐ Buccal Swab [kit oragen (OGD-100) or copan] ☐ DNA (origin:)

CLINICAL INFORMATION

PHYSICIAN'S STATEMENT

I certify that I have obtained the necessary written informed consent from the patient (or legal representative) to carry out the test(s) I am prescribing here.

I confirm that I have obtained consent for the genetic information to be processed and stored. I confirm that the patient has consented to the retention of any leftover samples, or that I stated in the clinical information that the sample should be discarded.

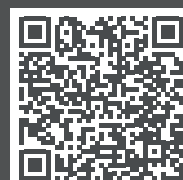
I confirm that the patient has consented for reporting both secondary findings (WES test with active search) and incidental findings (all tests), OR has expressly exercised their right not to be informed of such findings. [SELECT THE APPROPRIATE OPTION]

☐ Yes ☐ No

Physician's Signature*

Date (dd/mm/yyyy)*

*MANDATORY FIELDS



TEST SELECTION

WHOLE EXOME SEQUENCING

☐	Whole exome sequencing - Trio	☐	Expand index WES to WES-Trio (please provide parental samples)	Index ID*	
☐	Whole exome sequencing - Duo	☐	Reanalysis of WES-Trio as Carrier Screen for couple	Partner ID*	
☐	Whole exome sequencing	☐	Reanalysis of WES	☐	Expand panel to WES analysis

☐ Hereditary Pan-cancer Panel	☐ Hearing Loss and Deafness Panel
☐ Cardiovascular Panel	☐ Dyslipidemias Panel
☐ Noonans & RASopathies Panel	☐ Diabetes Panel
☐ Ehlers-Danlos, Marfan and differential diagnoses Panel	☐ Bone diseases Panel
☐ Hematological diseases Panel	☐ Cholestasis Panel
☐ Ophthalmological diseases Panel	☐ Kidney disease Panel
☐ Neuromuscular diseases Panel	☐ Cystic kidney disease Panel (<i>PKD1</i> gene by Long-Range PCR)
☐ Neurodegenerative diseases Panel	☐ Primary Immunodeficiency Monogenic Inflammatory Bowel Disease Autoinflammatory Disorders Panel
☐ Epilepsy Panel	☐ Familial Hyperparathyroidism or Hypocalciuric Hypercalcemia Panel
☐ Alzheimer's and dementias Panel	☐ Hematuria Panel
☐ Parkinson's and movement disorders Panel	☐ Other
☐ Hereditary ataxias Panel	
☐ Ciliopathies Panel	

CYTOGENETIC TESTING

Chromosome Analysis - Karyotype**:	☐ Stimulated cultures	☐ Fibroblasts
☐ Chromosomal Microarray Analysis (aCGH - Cytoscan 750K)	☐ FISH**	
☐ Chromosomal Microarray Analysis (aCGH - Cytoscan HD)	☐ Other	

**≥ 3mL Lithium Heparine

SINGLE GENE TESTING

Fragile X syndrome (<i>FMR1</i> gene):	☐ msTP-PCR (methylation and expansion analysis)	☐ PCR
Cystic Fibrosis (<i>CFTR</i> gene):	☐ Frequent mutations	☐ MLPA
Alpha thalassemia (<i>HBA1/HBA2</i> genes):	☐ MLPA	☐ Sequencing
☐ Spinal Muscular Atrophy (<i>SMN1/SMN2</i> , deletion/duplication of exons 7 and 8)	☐ Beta-Thalassemia (<i>HBB</i> , sequence analysis)	
Gene Name		
☐ Sequencing	☐ Deletion/Duplication	☐ Repeat Expansion
☐ Other		

Familial Variant Test (attach copy of positive genetic test from the affected family member)

Gene(s) and Variant(s)	RefSeq.	c.	p.	transcript
Gene(s) and Variant(s)	RefSeq.	c.	p.	transcript

NOTICE:

1. General description, purpose and risk: The purpose of a genetic test is to examine DNA and look for any specific changes, or variations that could be related to certain diseases or conditions, and the risk of developing certain disorders and conditions. This test might not provide conclusive results about the genotype. While some genetic variants are known in scientific databases to be pathogenic and others are known to be benign, some of the genetic variants detected may be of uncertain significance. In addition, current limitations in genetic testing technologies and/or in scientific/medical knowledge may not identify relevant variants that are associated with a disease or syndrome. However, such results do not rule out the possibility of a genetic disease or predisposition to such a disease. Further tests could be considered in such cases. For detailed information regarding the test portfolio, test methods, gene content, and any limitations of the tests, please refer to the information provided at www.unilabs.pt.

2. Use of data and sample: In order to carry out the test, Unilabs CGC - Centro de Genética Clínica S.A. will collect, process and use personal data relating to health. The policy, followed in accordance with the laws in force, is described at www.unilabs.com