## IMPORTANT COMMUNICATION FROM THE SOUTH WEST GENOMIC LABORATORY HUB: DO NOT REPLY

Re: The NHS Genomic Medicine Service response to COVID-19

Dear Colleague

We are writing to you because you are a previous or current user of the diagnostic services at the Bristol or Exeter Genetics Laboratories. These laboratories now work in a partnership as the South West Genomic Laboratory Hub (SW GLH) which is the designated NHS provider of genomic laboratory services in the SW of England.

In response to the COVID-19 emergency, the SW GLH have made some important changes to genomic laboratory services in accordance with national recommendations from NHSE:

Genomic diagnostic services will now be prioritized for rare disease and cancer patients with urgent clinical need (appendix).

- **For high priority indications**, the SW GLH aims to maintain the current diagnostic service and turn-around times.
- For medium and low priority indications, clinicians are invited to first consider whether genomic testing is necessary at this time. For necessary tests, please send clinical samples and completed request forms to the SW GLH as per normal practice. All samples will be processed to ensure that diagnostic material can be stored safely. However, for medium and low priority indications, the SW GLH can no longer guarantee current turnaround times for genomic analysis.

The SWGLH recognizes that specific clinical circumstances may require genetic tests to be performed irrespective of the general priority guidance. Please let us know by contacting the Bristol Genetics Laboratory (Nbn-tr.geneticsenquiries@nhs.netor 0117 414 6168 or the Exeter Genomics Laboratory (rde-tr.MolecularGeneticsAdmin@nhs.net or 01392 408229). More information about the services offered by the SWGLH is at https://www.nbt.nhs.uk/south-west-genomic-laboratory-hub

Samples from terminally ill patients should continue to be taken, the DNA extracted & stored.

We are able to accept patient samples with confirmed or possible COVID-19 infection.

The SW GLH will continue its development programme of improving genomic testing with initiatives such as extended somatic panel testing for solid tumours and whole genome

sequencing for some cancers and rare diseases. Because of the COVID19 emergency, we anticipate launch of these new services later than initially planned.

Yours sincerely

Professor Rachel Butler SW GLH Operations Director

Professor Sian Ellard SW GLH Scientific Director

Professor Andrew Mumford SW GLH Medical Director

## Appendix: Priorities for genetic testing during COVID19 emergency

High priority indications	
CANCER	Testing to inform cancer diagnosis
CANCER	Testing necessary to inform cancer treatment selection
CANCER	Testing for urgent minimal residual disease monitoring (eg acute leukaemia)
RARE DISEASE	All prenatal diagnosis tests
RARE DISEASE	Urgent carrier testing relating to pregnancy (eg cystic fibrosis,
	haemoglobinopathy)
RARE DISEASE	Testing to inform urgent clinical management (eg neonatal diabetes and
	congenital hyperinsulinism testing, germline BRCA testing to inform
	chemotherapy options)
RARE DISEASE	Rapid exome service for NICU/PICU
RARE DISEASE	New-born screening programme (eg cystic fibrosis, MCADD testing)
Medium priority indications	
CANCER	Testing for non-urgent minimal residual disease monitoring (eg CML)
CANCER	Testing for diagnosis of myeloproliferative neoplasms
Low priority indications	
RARE DISEASE	Testing for elective investigation of rare diseases