Genomic Medicine Service
National Genomic Test Directory Clinical Indication R387 Reanalysis Test Request
Please refer to "Reanalysis of genomic sequencing data for rare disease patients in the Genomic Medicine Service" national guidance to determine eligibility

Please complete this form and email to your local laboratory

Please indicate the reason for requesting reanalysis: Reanalysis should only be requested for patients in whom there is immediate clinical need and a high likelihood that reanalysis may identify a genetic diagnosis

☐ Significant change in clinical presentation for the patient (evolving phenotype, regression or new result from clinical or laboratory investigations) or family member
Please provide details:

☐ Newly identified affected sibling or family member with the same clinical presentation
Please provide details:

☐ New pregnancy Please state gestation:

☐ Patient is recently deceased and a genetic diagnosis would have management implications for the family

☐ Significant new treatment and or clinical management implication for the patient. Please provide details:

Patient first name:	Life status: ☐ Alive ☐ Deceased	☐ Urgent: Provide reason
Patient last name:	Family test: ☐ Trio ☐ Duo ☐ Singleton	Consanguinity: ☐ Yes ☐ No ☐ Unknown
Date of birth: dd/mm/yyyy / Hospital number:	Family members tested:	
Gender (if phenotypic sex is different please state): ☐ Male ☐ Female ☐ Other:		
NHS number (or postcode if not known)		

Reanalysis requested:

☐ Reanalysis of gene panels originally requested

☐ Change in penetrance setting

☐ New gene panel(s) analysis required, please provide R code:

☐ Change in affection status of one of the family members sequenced

Additional information to support the reanalysis (please include any differential diagnoses or candidate genes suspected):

Clinician details

Responsible clinician Name, Department, Hospital	Email address for report: (nhs.net) Telephone number: