

CustomNext-Neuro (9540) or Reaccessioning (9540-A) **SUPPLEMENTAL ORDERING FORM**

PATIENT INFORMATION			
Last Name	First Name	Middle Initial	DOB (MM/DD/YY)

CUSTOMIZE YOUR PANEL

To create your own panel, add all desired genes below **OR** select one of the following multi-gene tests and add or remove all desired genes below. All genes include sequencing and deletion/duplication analysis.

EpiFirst-Fever: 13 genes for febrile seizures
 EpilepsyNext: 100 genes for epilepsy
 IDNext: 140 genes for intellectual disability
 EpiFirst-IS: 17 genes for infantile spasms
 AutismNext: 48 genes for autism spectrum disorder
 Neurodevelopment-Expanded: All 196 genes in CustomNext-Neuro
 EpiFirst-Focal: 11 genes for non-lesional focal epilepsy

A list of genes for each multi-gene test is available on ambrygen.com

CUSTOM GENE SELECTION (Check "+" to add and "-" to remove)

+	GENE	-	+	GENE	-	+	GENE	-	+	GENE	-	+	GENE	-	+	GENE	-
<input type="checkbox"/>	ABCD1	<input type="checkbox"/>	<input type="checkbox"/>	CREBBP	<input type="checkbox"/>	<input type="checkbox"/>	GNAO1	<input type="checkbox"/>	<input type="checkbox"/>	MAOA	<input type="checkbox"/>	<input type="checkbox"/>	PNPO	<input type="checkbox"/>	<input type="checkbox"/>	SMARCA2	<input type="checkbox"/>
<input type="checkbox"/>	ACSL4	<input type="checkbox"/>	<input type="checkbox"/>	CRH	<input type="checkbox"/>	<input type="checkbox"/>	GOSR2	<input type="checkbox"/>	<input type="checkbox"/>	MBD5	<input type="checkbox"/>	<input type="checkbox"/>	POGZ	<input type="checkbox"/>	<input type="checkbox"/>	SMARCA4	<input type="checkbox"/>
<input type="checkbox"/>	ADNP	<input type="checkbox"/>	<input type="checkbox"/>	CSTB	<input type="checkbox"/>	<input type="checkbox"/>	GPC3	<input type="checkbox"/>	<input type="checkbox"/>	MECP2	<input type="checkbox"/>	<input type="checkbox"/>	POLG	<input type="checkbox"/>	<input type="checkbox"/>	SMARCB1	<input type="checkbox"/>
<input type="checkbox"/>	ALDH7A1	<input type="checkbox"/>	<input type="checkbox"/>	CTCF	<input type="checkbox"/>	<input type="checkbox"/>	GRIA3	<input type="checkbox"/>	<input type="checkbox"/>	MED12	<input type="checkbox"/>	<input type="checkbox"/>	PORCN	<input type="checkbox"/>	<input type="checkbox"/>	SMC1A	<input type="checkbox"/>
<input type="checkbox"/>	ALG13	<input type="checkbox"/>	<input type="checkbox"/>	CTSD	<input type="checkbox"/>	<input type="checkbox"/>	GRIN1	<input type="checkbox"/>	<input type="checkbox"/>	MED23	<input type="checkbox"/>	<input type="checkbox"/>	PPT1	<input type="checkbox"/>	<input type="checkbox"/>	SMC3	<input type="checkbox"/>
<input type="checkbox"/>	ANKRD11	<input type="checkbox"/>	<input type="checkbox"/>	CTSF	<input type="checkbox"/>	<input type="checkbox"/>	GRIN2A	<input type="checkbox"/>	<input type="checkbox"/>	MEF2C	<input type="checkbox"/>	<input type="checkbox"/>	PQBP1	<input type="checkbox"/>	<input type="checkbox"/>	SMS	<input type="checkbox"/>
<input type="checkbox"/>	AP1S2	<input type="checkbox"/>	<input type="checkbox"/>	CUL4B	<input type="checkbox"/>	<input type="checkbox"/>	GRIN2B	<input type="checkbox"/>	<input type="checkbox"/>	MFSD8	<input type="checkbox"/>	<input type="checkbox"/>	PRICKLE1	<input type="checkbox"/>	<input type="checkbox"/>	SNAP25	<input type="checkbox"/>
<input type="checkbox"/>	AP4B1	<input type="checkbox"/>	<input type="checkbox"/>	DCX	<input type="checkbox"/>	<input type="checkbox"/>	GRN	<input type="checkbox"/>	<input type="checkbox"/>	MID1	<input type="checkbox"/>	<input type="checkbox"/>	PRRT2	<input type="checkbox"/>	<input type="checkbox"/>	SPTAN1	<input type="checkbox"/>
<input type="checkbox"/>	ARHGEF9	<input type="checkbox"/>	<input type="checkbox"/>	DDX3X	<input type="checkbox"/>	<input type="checkbox"/>	HCN1	<input type="checkbox"/>	<input type="checkbox"/>	NDP	<input type="checkbox"/>	<input type="checkbox"/>	PTCHD1	<input type="checkbox"/>	<input type="checkbox"/>	ST3GAL3	<input type="checkbox"/>
<input type="checkbox"/>	ARID1B	<input type="checkbox"/>	<input type="checkbox"/>	DEPDC5	<input type="checkbox"/>	<input type="checkbox"/>	HDAC8	<input type="checkbox"/>	<input type="checkbox"/>	NDUFA1	<input type="checkbox"/>	<input type="checkbox"/>	PTEN	<input type="checkbox"/>	<input type="checkbox"/>	STX1B	<input type="checkbox"/>
<input type="checkbox"/>	ARX	<input type="checkbox"/>	<input type="checkbox"/>	DHCR7	<input type="checkbox"/>	<input type="checkbox"/>	HNRNPU	<input type="checkbox"/>	<input type="checkbox"/>	NHLRC1	<input type="checkbox"/>	<input type="checkbox"/>	PTPN11	<input type="checkbox"/>	<input type="checkbox"/>	STXBP1	<input type="checkbox"/>
<input type="checkbox"/>	ATP13A2	<input type="checkbox"/>	<input type="checkbox"/>	DLG3	<input type="checkbox"/>	<input type="checkbox"/>	HOXA1	<input type="checkbox"/>	<input type="checkbox"/>	NHS	<input type="checkbox"/>	<input type="checkbox"/>	PURA	<input type="checkbox"/>	<input type="checkbox"/>	SYN1	<input type="checkbox"/>
<input type="checkbox"/>	ATPIA2	<input type="checkbox"/>	<input type="checkbox"/>	DNAJC5	<input type="checkbox"/>	<input type="checkbox"/>	HPRT1	<input type="checkbox"/>	<input type="checkbox"/>	NIPBL	<input type="checkbox"/>	<input type="checkbox"/>	RAB39B	<input type="checkbox"/>	<input type="checkbox"/>	SYNGAP1	<input type="checkbox"/>
<input type="checkbox"/>	ATP7A	<input type="checkbox"/>	<input type="checkbox"/>	DNM1	<input type="checkbox"/>	<input type="checkbox"/>	HUWE1	<input type="checkbox"/>	<input type="checkbox"/>	NLGN3	<input type="checkbox"/>	<input type="checkbox"/>	RAD21	<input type="checkbox"/>	<input type="checkbox"/>	SZT2	<input type="checkbox"/>
<input type="checkbox"/>	ATRX	<input type="checkbox"/>	<input type="checkbox"/>	DYNC1H1	<input type="checkbox"/>	<input type="checkbox"/>	IDS	<input type="checkbox"/>	<input type="checkbox"/>	NLGN4X	<input type="checkbox"/>	<input type="checkbox"/>	RAI1	<input type="checkbox"/>	<input type="checkbox"/>	TBC1D24	<input type="checkbox"/>
<input type="checkbox"/>	BRWD3	<input type="checkbox"/>	<input type="checkbox"/>	DYRK1A	<input type="checkbox"/>	<input type="checkbox"/>	IQSEC2	<input type="checkbox"/>	<input type="checkbox"/>	NRXN1	<input type="checkbox"/>	<input type="checkbox"/>	RPL10	<input type="checkbox"/>	<input type="checkbox"/>	TBL1XR1	<input type="checkbox"/>
<input type="checkbox"/>	CA8	<input type="checkbox"/>	<input type="checkbox"/>	EEF1A2	<input type="checkbox"/>	<input type="checkbox"/>	KAT6A	<input type="checkbox"/>	<input type="checkbox"/>	NSD1	<input type="checkbox"/>	<input type="checkbox"/>	RPS6KA3	<input type="checkbox"/>	<input type="checkbox"/>	TBR1	<input type="checkbox"/>
<input type="checkbox"/>	CACNA1A	<input type="checkbox"/>	<input type="checkbox"/>	EHMT1	<input type="checkbox"/>	<input type="checkbox"/>	KATNAL2	<input type="checkbox"/>	<input type="checkbox"/>	NSUN2	<input type="checkbox"/>	<input type="checkbox"/>	SATB2	<input type="checkbox"/>	<input type="checkbox"/>	TCF4	<input type="checkbox"/>
<input type="checkbox"/>	CACNA1C	<input type="checkbox"/>	<input type="checkbox"/>	EPM2A	<input type="checkbox"/>	<input type="checkbox"/>	KCNA2	<input type="checkbox"/>	<input type="checkbox"/>	OCRL	<input type="checkbox"/>	<input type="checkbox"/>	SCARB2	<input type="checkbox"/>	<input type="checkbox"/>	TIMM8A	<input type="checkbox"/>
<input type="checkbox"/>	CASK	<input type="checkbox"/>	<input type="checkbox"/>	FGD1	<input type="checkbox"/>	<input type="checkbox"/>	KCNC1	<input type="checkbox"/>	<input type="checkbox"/>	OFD1	<input type="checkbox"/>	<input type="checkbox"/>	SCN1A	<input type="checkbox"/>	<input type="checkbox"/>	TPP1	<input type="checkbox"/>
<input type="checkbox"/>	CC2D1A	<input type="checkbox"/>	<input type="checkbox"/>	FLNA	<input type="checkbox"/>	<input type="checkbox"/>	KCNJ10	<input type="checkbox"/>	<input type="checkbox"/>	OPHN1	<input type="checkbox"/>	<input type="checkbox"/>	SCN1B	<input type="checkbox"/>	<input type="checkbox"/>	TRAPPC9	<input type="checkbox"/>
<input type="checkbox"/>	CDKL5	<input type="checkbox"/>	<input type="checkbox"/>	FMR1 *	<input type="checkbox"/>	<input type="checkbox"/>	KCNQ2	<input type="checkbox"/>	<input type="checkbox"/>	OTC	<input type="checkbox"/>	<input type="checkbox"/>	SCN2A	<input type="checkbox"/>	<input type="checkbox"/>	TSC1	<input type="checkbox"/>
<input type="checkbox"/>	CHD2	<input type="checkbox"/>	<input type="checkbox"/>	FOLR1	<input type="checkbox"/>	<input type="checkbox"/>	KCNQ3	<input type="checkbox"/>	<input type="checkbox"/>	PACS1	<input type="checkbox"/>	<input type="checkbox"/>	SCN8A	<input type="checkbox"/>	<input type="checkbox"/>	TSC2	<input type="checkbox"/>
<input type="checkbox"/>	CHD7	<input type="checkbox"/>	<input type="checkbox"/>	FOXP1	<input type="checkbox"/>	<input type="checkbox"/>	KCNT1	<input type="checkbox"/>	<input type="checkbox"/>	PAK3	<input type="checkbox"/>	<input type="checkbox"/>	SHANK3	<input type="checkbox"/>	<input type="checkbox"/>	TUSC3	<input type="checkbox"/>
<input type="checkbox"/>	CHD8	<input type="checkbox"/>	<input type="checkbox"/>	FOXP2	<input type="checkbox"/>	<input type="checkbox"/>	KCTD7	<input type="checkbox"/>	<input type="checkbox"/>	PCDH19	<input type="checkbox"/>	<input type="checkbox"/>	SIK1	<input type="checkbox"/>	<input type="checkbox"/>	UBE2A	<input type="checkbox"/>
<input type="checkbox"/>	CHRNA2	<input type="checkbox"/>	<input type="checkbox"/>	FTSJ1	<input type="checkbox"/>	<input type="checkbox"/>	KDM5C	<input type="checkbox"/>	<input type="checkbox"/>	PDHA1	<input type="checkbox"/>	<input type="checkbox"/>	SLC13A5	<input type="checkbox"/>	<input type="checkbox"/>	UBE3A	<input type="checkbox"/>
<input type="checkbox"/>	CHRNA4	<input type="checkbox"/>	<input type="checkbox"/>	GABRA1	<input type="checkbox"/>	<input type="checkbox"/>	KIAA2022	<input type="checkbox"/>	<input type="checkbox"/>	PHF6	<input type="checkbox"/>	<input type="checkbox"/>	SLC16A2	<input type="checkbox"/>	<input type="checkbox"/>	UPF3B	<input type="checkbox"/>
<input type="checkbox"/>	CHRN2	<input type="checkbox"/>	<input type="checkbox"/>	GABRB3	<input type="checkbox"/>	<input type="checkbox"/>	KIF1A	<input type="checkbox"/>	<input type="checkbox"/>	PHF8	<input type="checkbox"/>	<input type="checkbox"/>	SLC25A22	<input type="checkbox"/>	<input type="checkbox"/>	VPS13B	<input type="checkbox"/>
<input type="checkbox"/>	CLN3	<input type="checkbox"/>	<input type="checkbox"/>	GABRG2	<input type="checkbox"/>	<input type="checkbox"/>	L1CAM	<input type="checkbox"/>	<input type="checkbox"/>	PIGA	<input type="checkbox"/>	<input type="checkbox"/>	SLC2A1	<input type="checkbox"/>	<input type="checkbox"/>	WDR45	<input type="checkbox"/>
<input type="checkbox"/>	CLN5	<input type="checkbox"/>	<input type="checkbox"/>	GAMT	<input type="checkbox"/>	<input type="checkbox"/>	LAMP2	<input type="checkbox"/>	<input type="checkbox"/>	PIGN	<input type="checkbox"/>	<input type="checkbox"/>	SLC35A2	<input type="checkbox"/>	<input type="checkbox"/>	ZC4H2	<input type="checkbox"/>
<input type="checkbox"/>	CLN6	<input type="checkbox"/>	<input type="checkbox"/>	GATM	<input type="checkbox"/>	<input type="checkbox"/>	LG11	<input type="checkbox"/>	<input type="checkbox"/>	PLCB1	<input type="checkbox"/>	<input type="checkbox"/>	SLC6A1	<input type="checkbox"/>	<input type="checkbox"/>	ZEB2	<input type="checkbox"/>
<input type="checkbox"/>	CLN8	<input type="checkbox"/>	<input type="checkbox"/>	GDI1	<input type="checkbox"/>	<input type="checkbox"/>	LINS	<input type="checkbox"/>	<input type="checkbox"/>	PLP1	<input type="checkbox"/>	<input type="checkbox"/>	SLC6A8	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	CNTNAP2	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	MAN1B1	<input type="checkbox"/>	<input type="checkbox"/>	PNKP	<input type="checkbox"/>	<input type="checkbox"/>	SLC9A6	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

*FMR1 CGG repeat analysis as an additional test bill separately (test code 4544) **ADD**

Total Gene Count (REQUIRED: include total number of genes on your CustomNext-Neuro panel): _____

RE-REQUISITIONING ORDERS (Available within 60 days of original report date for any of the multi-gene panels listed above)

Accession #: _____ Previously reported hereditary Neurological panel: _____

(9540-A) Add the gene(s) selected above to the previously-reported panel for this patient

Medical Professional Signature: _____ Date: _____

Medical Professional Name (Print): _____