healthincode
> Cardiology

+34 881 60 00 03
customercare@healthincode.com

STUDY REQUISITION FORM

1 Patient and sample information

Patient
First and last name

Date of birth
DD/MM/YY

Sex ○ Female ○ Male

☐ Blood
Peripheral blood from 3 to 5 ml in EDTA tubes

☐ Saliva
Using the indicated saliva kit

☐ DNA*
Minimum 5 µg and concentration 50 ng/mL for DNA-derived from blood, saliva, tissue (fresh or frozen).
Minimum10 µg and concentration 50 ng/mL for DNA-derived from paraffin-embedded tissue.
***DNA source:**
Blood, frozen blood, saliva, fresh tissue, frozen tissue, paraffin-embedded tissue, etc.

Sample collection date

Sample reference: use the same reference on the collection tube

2 Information of the requesting physician

First and last name

Hospital/Institution

Address

City

Province / Region / State

Country

Zip code

Phone

Email

3 Authorized person(s) to receive the results

First and last name

E-mail
to receive results

First and last name

E-mail
to receive results

In compliance with the Spanish and European personal data protection laws, the results will only be delivered to the persons duly identified in this requisition form.

4 Invoicing details

☐ **Hospital / Institution**

☐ **Self-pay patient**
Payment method: ○ Bank transfer ○ Credit card

Name of the hospital or patient
name that should appear on the invoice

National ID / Tax number

Address

City

Province / Region / State

Country

Zip code

Phone

E-mail
to send the invoice

Contact person

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5 Genetic study requested

General NGS panels

- ☐ S-201906396 Cardiomyopathies General Panel [204 genes]
- ☐ S-201906399 Cardiomyopathies, Arrhythmias, and Sudden Death General Panel [251 genes]
- ☐ S-201906397 Arrhythmias and Sudden Death without Structural Cardiopathy General Panel [90 genes]
- ☐ S-201907189 Cardiovascular Diseases General Panel [405 genes]

Specific NGS panels

Cardiomyopathies

- ☐ S-201906389 Hypertrophic Cardiomyopathy. Basic Panel [18 genes]
- ☐ S-201906390 Hypertrophic Cardiomyopathy. Extended Panel [118 genes]
- ☐ S-201906391 Dilated Cardiomyopathy [121 genes]
- ☐ S-201906392 Arrhythmogenic Cardiomyopathy [26 genes]
- ☐ S-201906394 Non-compaction Cardiomyopathy [48 genes]
- ☐ S-201906393 Restrictive Cardiomyopathy [23 genes]
- ☐ S-201906395 RASopathies (Noonan, Costello, LEOPARD) [26 genes]
- ☐ S-201805389 Mitochondrial Genome Sequencing [37 genes]
- ☐ S-202008652 Mitochondrial Nuclear Genes Comprehensive Panel [400 genes]
- ☐ S-201601169 Fabry Disease [sequencing of the GLA gene]
- ☐ S-201702765 Familial Amyloidosis [sequencing of the TTR gene]

Channelopathies and Cardiac Arrhythmias:

- ☐ S-201906402 Long QT Syndrome. Basic Panel [11 genes]
- ☐ S-201906403 Long QT Syndrome. Extended Panel [32 genes]
- ☐ S-201906401 Short QT Syndrome [9 genes]
- ☐ S-201906405 Catecholaminergic Polymorphic Ventricular Tachycardia [10 genes]
- ☐ S-201906404 Brugada Syndrome/J-Wave Syndrome [27 genes]
- ☐ S-201906449 Cardiac Conduction Disease [44 genes]
- ☐ S-201906450 Atrial Fibrillation [46 genes]

Aortic, vascular, and connective tissue disorders

- ☐ S-201906109 Aortic, Vascular, and Connective Tissue Disorders [64 genes]
- ☐ S-201906569 Ehlers-Danlos Syndrome [35 genes]

Congenital Heart Diseases and Pulmonary Hypertension:

- ☐ S-201601108 Congenital Heart Diseases [114 genes]
- ☐ S-202007949 Pulmonary Artery Hypertension [25 genes]

Other genetic tests

- ☐ S-202109976 Massive sequencing with CNVs

Whole exome:

- ☐ S-202110014 Whole-exome - sequencing only (fastq)
- ☐ S-202110013 Whole-exome - annotation of variants
- ☐ S-202110336 Whole-exome - with report tool
- ☐ S-202110015 Whole-exome - with clinical report
- ☐ S-202109977 Targeted exome
  Gene/genes:
- ☐ S-202110133 Trio clinical exome
- ☐ S-202109983 MLPA and methylation-specific MLPA:
  Gene/genes:

SNP array:

- ☐ S-201601485 Index case
- ☐ S-201702726 Family study or confirmation of CNVs

Array CGH:

- ☐ S-202008036 Prenatal array (37K)
- ☐ S-202109987 Postnatal array (60K)
- ☐ S-202109988 Postnatal array (180K)
- ☐ S-202109998 Variant segregation/Family studies
  Variant:
- ☐ S-202109989 Inherited Cardiovascular Diseases NGS Kit
- ☐ Other services:

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6 Clinical data

We recommend attaching a clinical report to ensure the correct interpretation of the findings

7 Statement of the existence of informed consent

☐ The patient identified in this requisition (or his/her legal representative) is aware of the information included in it and authorizes that his/her sample be submitted for genetic testing and that a report is issued with the corresponding results.

☐ It is possible to obtain unexpected information during the sample analysis process, which the patient identified in this requisition (or his/her legal representative) has agreed to be informed about.

☐ In addition, the patient identified in this requisition (or his/her legal representative) authorizes that his/her biological sample be stored for subsequent studies and/or confirmation tests.

☐ The patient identified in this requisition (or his/her legal representative) also authorizes that his/her biological sample be used for research purposes approved by the relevant ethical committee, always maintaining the patient's anonymity.

Physician's signature

Date

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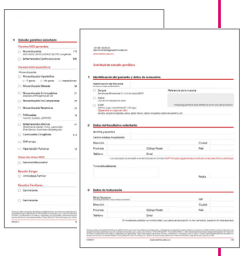
8 Sample requirements and shipping



STUDY REQUISITION

The sample for genetic testing must be sent together with a correctly filled requisition form.

Available at healthincode.com or by request at customercare@healthincode.com

SAMPLE COLLECTION

Peripheral blood*

3 to 5 ml in EDTA tubes

Genomic DNA*

NGS > 5-10 µg (A260/280 = 1.8-1.9)
Sanger > 1 µg (A260/280 = 1.8-1.9)

Saliva sample

Please use the indicated kit for sample collection.

You can request it at customercare@healthincode.com

**For delivery in over 48 h, controlled-temperature shipment (4-8 ºC) is recommended*

SAMPLE PACKAGING

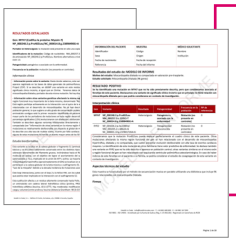
Each primary container (sample tube**) must be placed inside a secondary container (sealed plastic bag or Falcon tube) with enough absorbent material. Secondary recipients must be secured inside a rigid package or box with appropriate cushioning material.

** Please make sure that the sample tube is labeled with the patient's details or reference.

SAMPLE SHIPMENT

Schedule your shipment so that sample reception takes place Monday to Thursday between 8:00 and 17:00.

HEALTH IN CODE S. L.
Edificio O Fortín, As Xubias s/n. Campus de Oza. 15006 A Coruña, Spain
Tel: +34 881 600 003
If you wish, you can request our sample pick-up service at customercare@healthincode.com



RESULTS

We will deliver our report via:

- Certified email
- Health in Code Client Portal

OUR STUDIES ALWAYS INCLUDE THE POSSIBILITY OF PRE-TEST AND POST-TEST COUNSELLING

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