

Required Information For Huntington Disease DNA Testing

Knight Diagnostic Laboratories is committed to performing clinically useful testing for inherited diseases when it will provide overall benefit to the patient. Because pre-symptomatic testing for Huntington Disease may raise serious dilemmas, several organizations, including the World Federation of Neurology, the International Huntington Association, and the Huntington Disease Society of America, have recommended that testing be limited to certain clinical situations. Please refer to the GeneClinics web site for further clinical testing information (www.geneclinics.org/profiles/huntington).

The laboratory will perform Huntington Disease (HD) DNA testing on patients **only** when they meet one of the following criteria:

1. Patients with symptoms or clinical signs of HD who are suspected by their physician to have clinical disease.
- OR
2. Patients without symptoms and clinical signs of HD if
--they have a family history of HD
- AND --they have entered a multi-disciplinary protocol including each of the following:
- Pre-test evaluation and counseling by a mental health professional familiar with the issues of pre-symptomatic testing for a disorder with no effective treatment.
 - Genetic counseling by a qualified Medical Geneticist or Genetic Counselor
 - Post-test counseling and psychological support.
- AND --they are 18 years or older.

To locate a center near you that can provide these services to your patient, consult <http://www.nsgc.org/> (select Resource Link); or <http://www.HDSA.org/> (select Getting Help) or 1-800-345-HDSA. Also, the OHSU Medical Genetics Clinic routinely provides these services: contact Karen Kovak at (503)494-5606.

The laboratory will proceed with testing only when it receives the following ordering physician certification that the patient satisfies one of the above criteria. Samples received but not accompanied by a signed certification will be processed to extract DNA, but will not be tested for HD. If certification is not received by six (6) weeks following sample receipt, the DNA will be discarded and a charge for DNA extraction will be made. Note: prolonged DNA storage can be arranged for an additional fee on request by calling our client services department at 855-KDL-1LAB (535-1522).

Ordering Physician statement:

I certify that my patient satisfies one of the above criteria for HD testing.

Patient name _____ meets criteria (circle one): **1** or **2***

Birth date _____ /Age _____ *must be 18 years or older

Medical record number _____

Signed: _____ Date: _____

Printed name: _____