ARUP LABORATORIES

THIS IS NOT A TEST REQUEST FORM.
The information below is required to perform *ABCD1* genetic testing.
Please fill out this form and submit it with the test request form or electronic packing list.

PATIENT HISTORY FOR X-LINKED ADRENOLEUKODYSTROPHY (*ABCD1*) GENETIC TESTING

Patient Name _____ **Date of Birth**_____ /_____/_____ **Gender [ ] F [ ] M**

Physician _____ **Physician Phone (_____)** _____ **Practice Specialty**_____

Genetic Counselor _____ **Counselor Phone (_____)** _____

Patient's Ethnicity (check all that apply)

[ ] African American [ ] Ashkenazi Jewish [ ] Asian [ ] Caucasian
[ ] Hispanic [ ] Middle Eastern [ ] Native American [ ] Other_____

Does the patient have SYMPTOMS? [ ] No [ ] Yes (check all that apply)

[ ] Ataxia [ ] Paralysis [ ] Addison disease/adrenal insufficiency
[ ] Seizures [ ] Hearing loss [ ] Behavioral disturbance
[ ] Spasticity [ ] Visual impairment [ ] Cognitive impairment
[ ] Abnormal brain MRI (describe): _____
[ ] Other symptoms: _____

Age of onset of symptoms: _____

LABORATORY FINDINGS

Very Long Chain Fatty Acids [ ] Normal [ ] Abnormal (result: _____) [ ] Not performed [ ] Unknown
Beta-oxidation of C26:0 in Fibroblasts [ ] Normal [ ] Abnormal (result: _____) [ ] Not performed [ ] Unknown

Does the patient have a FAMILY HISTORY OF X-LINKED ADRENOLEUKODYSTROPHY? [ ] No [ ] Yes [ ] Unknown
If yes, describe relationship(s) to the patient _____

Has DNA testing for *ABCD1* been performed for these family member(s)? [ ] No [ ] Yes [ ] Unknown
- If yes, please attach a copy of the laboratory result (REQUIRED for familial mutation testing)

Circle the X-LINKED ADRENOLEUKODYSTROPHY test you intend to order.

Biochemical Testing

2004250 Very Long-Chain and Branched-Chain Fatty Acids Profile: Initial test to screen for disorders of peroxisomal biogenesis and/or function, including X-linked adrenoleukodystrophy.

Molecular Testing

2011906 Adrenoleukodystrophy, X-linked (*ABCD1*) Sequencing and Deletion/Duplication: Sequencing of the *ABCD1* coding regions and deletion/duplication analysis. Clinical sensitivity for X-linked adrenoleukodystrophy is approximately 99 percent.

2011902 Adrenoleukodystrophy, X-linked (*ABCD1*) Sequencing: Sequencing of the *ABCD1* coding regions. Clinical sensitivity for X-linked adrenoleukodystrophy is approximately 93 percent.

2011880 Adrenoleukodystrophy, X-linked (*ABCD1*) Deletion/Duplication: For patients with negative ABCD1 sequencing results. Clinical sensitivity X-linked adrenoleukodystrophy is approximately 6 percent.

2001961 Familial Mutation, Targeted Sequencing: Targeted sequencing for an ABCD1 mutation previously identified in a family member; copy of relative's lab result is REQUIRED

For questions, contact an ARUP genetic counselor at (800) 242-2787, ext. 2141

Master Label