ARUP LABORATORIES

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

PATIENT HISTORY FOR VERY LONG CHAIN ACYL-CoA DEHYDROGENASE (VLCAD) DEFICIENCY

Patient Name _____ Date of Birth_____ /_____/_____ Gender [ ] F [ ] M

Physician _____ Physician Phone (_____)_____Practice Specialty_____

Genetic Counselor _____ Counselor Phone (_____)_____

PATIENT ETHNICITY (check all that apply)

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

SYMPTOMS of VLCAD? [ ] No [ ] Yes [ ] Unknown

If yes, check all that apply

[ ] Hypoglycemia [ ] Hepatomegaly
[ ] Cardiomyopathy [ ] Liver failure
[ ] Encephalopathy [ ] Lethargy
[ ] Reye-like syndrome [ ] Coma
[ ] Rhabdomyolysis [ ] Other _____

ABNORMAL NEWBORN SCREEN? [ ] No [ ] Yes [ ] Unknown

LABORATORY FINDINGS

Plasma acylcarnitine profile [ ] Normal [ ] Abnormal [ ] Not performed [ ] Unknown
Urine organic acids [ ] Normal [ ] Abnormal [ ] Not performed [ ] Unknown

Plasma carnitine (**without supplements**):
Free / Total: [ ] Normal [ ] Abnormal [ ] Not performed [ ] Unknown

FAMILY HISTORY OF VLCAD DEFICIENCY? [ ] No [ ] Yes [ ] Unknown

If yes, describe relationship(s) to the patient _____

Has DNA testing for VLCAD 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 VLCAD test you intend to order

2004212 Very Long-Chain Acyl-CoA Dehydrogenase Deficiency (ACADVL) Sequencing and Deletion/Duplication: Clinical sensitivity may be as high as 95%; sequencing and deletion/duplication analysis of the *ACADVL* coding regions and intron/exon boundaries.

2002001 Very Long-Chain Acyl-CoA Dehydrogenase Deficiency (ACADVL) Sequencing: Clinical sensitivity 80-90%; sequencing of the *ACADVL* coding regions and intron/exon boundaries.

2004208 Very Long-Chain Acyl-CoA Dehydrogenase Deficiency (ACADVL) Deletion/Duplication: Clinical sensitivity may be as high as 10%; deletion/duplication analysis of the *ACADVL* coding regions.

2001961 Familial Mutation, Targeted Sequencing: Targeted sequencing for a *ACADVL* mutation previously identified in a family member.

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

Master Label