WVU Hospital Cytogenetics Laboratory

Chromosomal Microarray Patient Information

Instructions: The accurate interpretation and reporting of genetic results is contingent upon the reason for referral, clinical information provided, and family history. Please supply the information below and send paperwork with the specimen to the laboratory.

Patient Information

Patient Name (Last, First, Middle)	MRN	Birth Date	Ordering Provider

Reason for testing

Clinical Information – Check all that apply

Perinatal History
- ☐ Prematurity
- ☐ IUGR
- ☐ Oligohydramnios
- ☐ Polyhdramnios
- ☐ Other _____

Growth
- ☐ Failure to thrive
- ☐ Overgrowth
- ☐ Short stature
- ☐ Other _____

Cognitive/Developmental
- ☐ Developmental delay
- ☐ Fine motor delay
- ☐ Gross motor delay
- ☐ Speech delay
- ☐ Intellectual disability/MR
- ☐ Learning disability
- ☐ Other _____

Behavioral/Psychiatric
- ☐ ADHD
- ☐ Autism
- ☐ Oppositional-defiant disorder
- ☐ Obsessive-compulsive disorder
- ☐ Other _____

Cutaneous
- ☐ Hyperpigmentation
- ☐ Hypopigmentation
- ☐ Other _____

Neurological
- ☐ Ataxia
- ☐ Cerebral Palsy
- ☐ Encephalopathy
- ☐ Hypotonia
- ☐ Hyertonia
- ☐ Seizures
- ☐ Spasticity
- ☐ Structural brain anomaly
- ☐ Other _____

Cardiac
- ☐ Atrial septal defect
- ☐ AV canal defect
- ☐ Tetralogy of Fallot
- ☐ Ventricular septal defect
- ☐ Other _____

Craniofacial
- ☐ Cleft lip
- ☐ Cleft palate
- ☐ Craniosynostosis
- ☐ Dysmorphic features
- ☐ Ear malformation
- ☐ Macrocephaly
- ☐ Microcephaly
- ☐ Other _____

Hearing/Vision
- ☐ Abnormality of eye movement
- ☐ Abnormality of vision
- ☐ Hearing loss
- ☐ Other _____

Musculoskeletal
- ☐ Club foot
- ☐ Contractures
- ☐ Diaphragmatic hernia
- ☐ Limb anomaly
- ☐ Polydactyly
- ☐ Syndactyly
- ☐ Vertebral anomaly
- ☐ Other _____

Gastrointestinal
- ☐ Anal atresia
- ☐ Gastroschisis
- ☐ Omphalocele
- ☐ Pyloric stenosis
- ☐ Tracheoesophageal fistula
- ☐ Other _____

Genitourinary
- ☐ Ambiguous genitalia
- ☐ Cryptorchidism
- ☐ Hydronephrosis
- ☐ Hypospadias
- ☐ Kidney malformation
- ☐ Other _____

Family History
- ☐ Parents with greater than or equal to two miscarriages
- ☐ Other relatives with similar clinical history (explain below)

Clinical Descriptions – Include any additional relevant clinical information (list karyotype if known)