





Center for Medical Genetics – Ghent University Hospital - MRB – De Pintelaan 185 – B-9000 Ghent, Belgium Department Chair: Prof. A. De Paepe – Supervisor Connective Tissue Lab: Prof. P. Coucke Receipt of samples: Tel: 0032-(0)9-332 24 77 – Fax: 0032-(0)9-332 65 49

Website: http://medgen.ugent.be – e-mail: connective tissue@medgen.ugent.be

CLINICAL INFORMATION SHEET Skeletal dysplasias

Patient information Name: First Name(s): Sex: Date of Birth (dd/mm/yyyy): Address: Referring Physician: Referring Center: SAMPLE: EDTA blood DNA Chorionic villi Skin biopsy **RNA** Aortic biopsy Heparin blood Amniocytes Fibroblasts Paraffin embedded material Buccal swab Other: **Date** (dd/mm/yyyy): Sample arrived: Suspected diagnosis Achondrogenesis type 2 / Hypochondrogenesis Platyspondylic lethal skeletal dysplasia, type Torrance (PLSD-T) Spondyloperipheral dysplasia (SPD) Spondyloepiphyseal dysplasia congenita (SEDC) Spondylometaphyseal dysplasia, type Strüdwick (SEMD) Kniest dysplasia Stickler syndrome type 1 Czech dysplasia metatarsal type Avascular necrosis of the femoral head Other:

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CLINICAL SUMMARY PEDIGREE







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Phenotypic features

Measurements ☐ NE (not examined)			Age	:			
Height: cm							
Weight: kg							
Head circumference:	cm						
Other:							
Ophthalmological NE	Yes	No	NE		Yes	No	NE
Myopia: If yes, degree: Cataract: Glaucoma: Retinal tear: Retinal detachment: Chorioretinal atrophy Perivascular pigmentation Sheathing of peripheral Posterior perivascular				Type 1(*) va Type 2 (**) va Optically empty vitreous Vitreous veils and bands			

(*) type 1 = an apparently vestigial vitreous gel occupies the immediate retrolental space and is bordered by a distinct folded membrane.

Snead MP, Yates JRW. Clinical and molecular genetics of Stickler syndrome. J Med Genet 1999;36:353-359.

(**) type 2 = with sparse and irregularly thickened bundles of fibres throughout the vitreous cavity. Snead MP, Yates JRW. Clinical and molecular genetics of Stickler syndrome. J Med Genet 1999;36:353-359.







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Orofacial NE	Yes	No	NE	
Cleft palate Submucous cleft Bifid uvula Flat face/midfacial hypoplasia Micrognathia Low nasal bridge				
Ears (please provide copy of a	udiogran Yes	n) No	NE	
Conductive hearing loss Sensorineural hearing loss				
Musculoskeletal				
□ NE	Yes	No	NE Beighton score (***) Age	
Joint hypermobility Degenerative arthropathy Joint replacement surgery Other muscloskletal problems				
side of the body on which the patient ca on the table, (2) passively appose the the beyond 10 degrees, and (4) hyperexten	an (1) passion thumb to the and the knee as rest flat on	ely dors flexor as beyond	nt Beighton score, which assigns one point for each siflex the 5th finger >90 degrees with the forearm fla aspect of the forearm, (3) hyperextend the elbow 10 degrees and one point for forward flexion of the or. Beighton P. McKusick's heritable disorders of	ť
Skeletal X-rays NE				
Please provide radiographs in ca Minimal requirements: skull AP left hand pelvis Al knees AI	and latera AP P	al	re or radiological abnormalities. and lateral	







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Family			
-	Yes	No	NE
Family history positive			
If Yes, please provide copy of f	family ped	igree.	
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