



Renal Disorders Gene List
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سپاهی خاص
شماره ثبت: ۴۱۰۴۵

تاریخ:
شماره:
پیوست:

ABCC6	BBS9	COL4A1	FAN1	GPC3	KAL1	NEK1	PKHD1	SALL1	SRCAP	WDR35
ACAT1	BCS1L	COL4A3	FANCA	GRHRP	KANSL1	NEK8	PLAZG2A	SALL4	STAT3	WFS1
ACE	BDNF	COL4A4	FANCB	GRIP1	KAT6B	NF1	PLCE1	SARS2	STRA6	WNK1
ACTN4	BICC1	COL4A5	FANCC	GSN	KCNJ1	NIPBL	PLEKHM1	SCARB2	STX16	WNK4
ADAMTS13	BMP4	COQ2	FANCD2	GYG1	KCNJ10	NLRP3	PLG	SCNN1A	SUCLA2	WNT3
AGL	BMPER	COQ6	FANCE	GYS1	KCNJ5	NME1	PMM2	SCNN1B	TAT	WNT4
AGT	BRCA2	COQ9	FANCF	GYS2	KCNQ1OT1	NOTCH2	POLG	SCNN1G	TCIRG1	WNT5A
AGTR1	BRIP1	COX14	FANCG	H19	KIF1B	NPHP1	POR	SDCCAG8	TCTN3	WT1
AGXT	BSND	COX6B1	FANCI	HBA1	KL	NPHP3	PORCN	SDHB	TFAP2A	XDH
AHI1	BUB1B	CPT1A	FANCL	HBA2	KRAS	NPHP4	PQBP1	SDHD	TFE3	XPNPEP3
AKT1	C3	CPT2	FANCM	HLA-DPB1	LAMB2	NPHS1	PRCC	SEMA3E	THBD	XYLT1
AKT3	CA2	CTNS	FAT4	HMGA2	LCAT	NPHS2	PROC	SERPINH1	TLR2	XYLT2
ALDOA	CASR	CTSA	FGA	HNF1A	LDHA	NR3C2	PROK2	SETBP1	TMEM127	ZFPM2
ALDOB	CC2D2A	CUBN	FGF10	HNF1B	LDHB	NRAS	PROKR2	SF3B4	TMEM138	ZMPSTE24
ALMS1	CCBE1	CYP11B1	FGF20	HOGA1	LMBRD1	NSD1	PRPS1	SI	TMEM216	ZNF423
ALPL	CCDC28B	CYP11B2	FGF23	HOXA13	LMX1B	NSDHL	PTEN	SIX1	TMEM231	
AMN	CCND1	DGKE	FGFR1	HPD	LPIN1	OCRL	PTPN11	SIX5	TMEM237	
ANKS6	CD2AP	DHCR7	FGFR2	HPRT1	LRP2	ODC1	PTPRJ	SLC12A1	TMEM67	
ANLN	CD46	DHODH	FGFR3	HPS1	LRP4	OFD1	PTPRO	SLC12A3	TNFRSF11A	
APC	CD96	DIRC2	FH	HPSE2	LYZ	OGG1	PYGL	SLC22A12	TNFRSF1A	
APOA1	CDG73	DIS3L2	FLCN	HRAS	MAFB	OSTM1	PYGM	SLC22A5	TNFSF11	
APOL1	CDKN1B	DKC1	FLNB	HSD11B2	MAX	PALB2	RAB40AL	SLC26A3	TP53	
APRT	CDKN1C	DMP1	FN1	HSD17B4	MBTPS2	PAX2	RAD51C	SLC2A2	TP63	
AQP2	CEP164	DSTYK	FOXC2	HSD3B2	MEFV	PAX6	RAI1	SLC2A9	TREX1	
ARL13B	CEP290	DYNC2H1	FRAS1	IFNG	MET	PC	REN	SLC34A1	TRIM32	
ARL6	CEP83	EGF	FREM1	IFT122	MKKS	PDGFRL	RET	SLC34A3	TRP	
ASL	CFB	EIF2AK3	FREM2	IFT140	MKS1	PDSS2	RNF139	SLC36A2	TRPC6	
ATP6V0A4	CFH	ELANE	FXD2	IFT43	MLH3	PEX1	RNU4ATAC	SLC37A4	TRPM6	
ATP6V1B1	CFHR1	ENO3	G6PC	IFT80	MLL2	PEX5	ROBO2	SLC3A1	TSC1	
ATP7B	CFHR3	ENPP1	G6PC3	IGF2	MMAA	PFKM	ROR2	SLC4A1	TSC2	
ATRX	CFHR5	EPO	GAA	IKBKAP	MMAB	PGAM2	RPGRIP1L	SLC4A4	TTC21B	
AVP	CFI	ERBB3	GALNT3	IKBKG	MMACHC	PGK1	RPL11	SLC5A1	TTC8	
AVPR2	CHD7	ERCC6	GALT	IL2RG	MMADHC	PGM1	RPL35A	SLC5A2	TTR	
AXIN2	CISD2	ERCC8	GATA3	INF2	MNX1	PHEX	RPL5	SLC6A19	UMOD	
B3GALTL	CLCN	ESCO2	GATA4	INPP5E	MTHFR	PHKA1	RPS10	SLC6A20	UPK3A	
B9D2	CLCN5	ETFA	GBE1	INSL3	MTR	PHKA2	RPS17	SLC7A7	VDR	
BBS1	CLCN7	ETFB	GDNF	INVS	MTRR	PHKB	RPS19	SLC7A9	VEGFA	
BBS10	CLCNKA	ETFDH	GLA	IQCB1	MUC1	PHKG2	RPS24	SLC9A3R1	VHL	
BBS12	CLCNKB	EYA1	GLI3	IRF4	MUT	PIGL	RPS26	SLX4	VIPAS39	
BBS2	CLDN16	FAH	GLIS2	ITGA8	MVK	PIGN	RPS7	SMARCAL1	VPS33B	
BBS4	CLDN19	FAM20A	GNA11	ITGB3	MYCN	PIK3CA	RRM2B	SMARCB1	WAS	
BBS5	CNNM2	FAM20C	GNAS	JAG1	MYH9	PKD1	RXFP2	SMPD1	WDPCP	
BBS7	COA5	FAM58A	GNAS-AS1	JAM3	MYO1E	PKD2	SAA1	SOX17	WDR19	



تاریخ:
شماره:
پیوست:

Important Notes:

- 1- Only known exons of these genes will be examined
- 2- Repeat expansion disorders will not be covered
- 3- Genomic regions beside exons of protein-coding genes, genes that are not listed here, repeat expansions and mutations in the upstream and downstream regulatory regions will not be investigated.

Additional Comments:

- Although next generation sequencing (NGS) is a method of choice for high throughput sequencing purposes, **NGS has not been approved for clinical and diagnostic use**; therefore, Sanger sequencing must be done to confirm the sequencing data, particularly on identified mutations.
- Genetic counseling is recommended to explain risks and potential pitfalls of the experiment.
- It is of utmost importance for all clinicians involved in the care of families requesting molecular genetic diagnostic tests and the families themselves to be aware of the risk of errors in DNA analysis. Incorrect analysis may result from 1) incorrect data and clinical diagnosis 2) incomplete family studies and history 3) mix-up of DNA samples and mislabeling 4) rare molecular events 5) new or spontaneous mutations 6) paternity problems, adaptation, IVF, egg donor, bone marrow transplantation, recent blood product transfusion 7) maternal DNA contamination of CVS or amniotic fluid samples 8) technical errors. The risk of errors from various reasons mentioned above and several others is about 0.5%, while the chance of technical errors of all types is estimated to be around 0.5%. The risk of errors due to DNA recombination in diagnosis is approximately 0.3%. We take no responsibility about patient identity and possible mis-labeling of the DAN samples. Any feedback from our colleagues in the clinical field would be most welcomed. Comments can be given in writing or by calling my number listed below or by e-mail to:
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