

RAW DATA ORDER FORM

PANEL AND SINGLE GENE

Required fields are marked with an asterisk (*)

PATIENT INFORMATION*

Patient name:	DOB:	Order ID:
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DELIVERY INFORMATION*

The requesting customer will receive a link via email when the raw data is available for download.

Delivery to patient – tick this box only if the delivery of the data is directly to the patient	
Recipient's name:	Email address:

RAW DATA*

Please choose **one** of the following:

Panel target region raw data – free of charge Blueprint Genetics provides the raw sequence data as unannotated VCF files to the requesting customer in approximately one month. Please note that processing of the raw data starts after the final report has been submitted.		
Expanded region (CES/WES) raw data from panel order – provided with an extra fee (contact support@blueprintgenetics.com for pricing) Please note that processing of the raw data starts after the final report has been submitted.		
Please choose the file format option for expanded region (CES/WES) raw data from panel order:		
	BAM files	VCF files

PAYMENT INFORMATION*

Please fill this section only if you have selected the raw data option with an additional fee (expanded region CES/WES raw data from panel order)

INSTITUTIONAL BILLING Please choose an option: Payment by credit card ¹⁾ Payment by invoice	PATIENT PAYMENT The raw data processing begins once the payment has been collected by Blueprint Genetics. Please choose an option: Payment by credit card ¹⁾ Payment by invoice
Facility Name:	
Street Address:	
City:	State:
Zip/Post Code:	Country:
Contact Person:	
Phone:	Email:
	* Email:
	* Name:
	Phone:

Please contact billing@blueprintgenetics.com or +358 40 2511 372 if you wish to discuss alternative payment options.

¹⁾ Please note that we accept Visa and Mastercard. The payment process begins with receiving a link with payment details to the email address filled out above.

CUSTOMER ACKNOWLEDGEMENT

Please notice that as the Data Controller, the healthcare professional must provide their signature, even if the data is being sent directly to the patient.

The Customer acknowledges that the raw data is not fully restricted by the high-quality demands of the Blueprint Genetics' full diagnostic services. The data can be delivered without fulfillment of Blueprint Genetics' diagnostic performance and quality standards. The Customer acknowledges that there is a risk of false positive and false negative findings persisting in the data. Blueprint Genetics strongly advises against using the data as sole basis for clinical management decisions. Blueprint Genetics cannot assist with interpretation of the data and is not liable for any direct, consequential, indirect or any other damages arising out of utilization of the data.

Signature:	Printed Name:
Date:	Phone:
	Institution:

As the raw data order form includes patient information, please encrypt the file before sending it via email. Alternatively, the form may be sent to us via land mail or fax.