white glove service for every specimen.

At Insight, we believe in a personalized approach to genetic testing.

Direct access to our licensed and board-certified genetic counselors, rare disease testing panels, custom gene sequencing and chromosome analyses are just some of the ways we can bring you...well, insight.

Looking for a different kind of lab experience? We’re here to serve you.

Learn more about our lab services at InsightMedicalGenetics.com

visit us at booth #810
WELCOME TO SEATTLE

On behalf of the National Society of Genetic Counselors (NSGC), the Annual Education Conference (AEC) Planning Subcommittee and the NSGC Board of Directors, thank you for joining us!

NSGC is celebrating this landmark time in genomics and the 35th anniversary of our AEC with education and networking designed to support your continued professional growth. Educational sessions will cover a variety of topics at the forefront of genomics such as somatic tumor testing, prenatal cell-free DNA screening and bioinformatics for genetic counselors. Educational highlights you do not want to miss include the pre-conference symposium, *The Genetic Testing Laboratory: Insider View for Genetic Counselors* (page 14) and our opening plenary sessions, *Population Based Screening for Inherited Predisposition to Breast and Ovarian Cancer and Gene to Community and Community to Action: The Power of Social Media* (page 14). Reference pages 14–21 for sessions submitted/sponsored by your NSGC Special Interest Group (SIG).

Maximize your AEC experience by building your schedule around education sessions specific to your professional interests.

Invaluable experiences await you outside of the lecture room walls as well. Take advantage of the Welcome Reception, SIG meetings and the AEConnect area to network with more than 2,000 of your peers. Visit the Exhibitor Suite to see the latest product offerings and services within our profession. Catch up with friends and make new connections during this year’s special 35th Anniversary Reception, program reunions and daily breaks. Attend the State of the Society Address and the SIG Fair to learn more about the latest efforts of your professional organization. Experience all of the incredible activities this week has to offer!

We hope you enjoy your time here in Seattle, absorbing content on the latest innovations and developments in the profession of genetic counseling, all while enjoying this amazing city!

Jason Flanagan, MS, CGC
2016 AEC Subcommittee Chair

Renee Chard, MS, CGC
2016 AEC Subcommittee Vice-Chair

Download the Official AEC Mobile App

NSGC delivers everything AEC directly to your fingertips via the 2016 NSGC AEC mobile app. View conference session descriptions, speakers and scheduling information. Use the interactive maps to navigate the Exhibitor Suite with ease, search the exhibitor directory and stay in the know with conference alerts. On your smartphone or tablet, search for “NSGC 2016 AEC” in your app store or direct your mobile browser to www.nsgc.org/mobileapp. Follow what others are saying or post your own insights on Twitter during the AEC using #NSGC16.
Statement of Purpose
The 35th Annual Education Conference (AEC) focuses specifically on the educational needs of genetic counselors. The AEC addresses a wide variety of genetic counseling practice areas and provides the latest information for the genetic counseling profession. Attendees will gain important information to support and enhance their current practice by attending sessions such as: Patient Safety in the Era of Genomic Medicine and Billing Integrity and Compliance and Legal Liability for the Genetic Counselor. The Exhibitor Suite will provide current information and the opportunity to talk with exhibitors about new developments in genetics. The pre-conference symposia will provide in-depth information on specific topics relevant to the field of genetic counseling.

Continuing Education
NSGC has been approved to offer up to 32.25 Contact Hours at the AEC. CEUs earned through these activities will be accepted by the American Board of Genetic Counseling (ABGC) as Category 1 CEUs for purposes of certification and recertification. Individuals must be certified at the time of participation in the activity in order for it to count towards recertification.

<table>
<thead>
<tr>
<th>Session Type</th>
<th>Earn up to:</th>
<th>Contact Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-conference Symposia</td>
<td>5.00</td>
<td></td>
</tr>
<tr>
<td>AEC General Sessions</td>
<td>21.75</td>
<td></td>
</tr>
<tr>
<td>Sponsored Meal Sessions</td>
<td>5.50</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>32.25</td>
<td>Contact Hours</td>
</tr>
</tbody>
</table>

IMPORTANT: NSGC will only be able to verify the credits you earned for the sessions for which you provide an attendance verification code and complete an evaluation in the online system.

Evaluation Process/Claiming CEUs
Individuals claiming CEUs MUST complete evaluations, however NSGC greatly appreciates feedback from all attendees. An attendance verification code will be provided in each session. See page 56 for a grid to assist you in tracking verification codes for the sessions that you have attended.

To complete your evaluations, follow these steps:
1. Log in to the NSGC website, and go to www.nsgc.org/aecevaluations.
2. Click on the Evaluation link to be directed to the evaluation website.
3. For each session, add the attendance verification code (AVC) that you received in the lecture room and then evaluate the session.
4. Save each session as you go, as the website will log you out after 10 minutes of inactivity. (If this happens, you must go back to the NSGC website and repeat steps 1 and 2 to log back in and re-enter any unsaved information.)

PLEASE NOTE: Although your responses to the individual session evaluation questions will save each time you click "Save and Continue" the AVC will need to be re-entered if you re-enter that session to edit your responses.

5. Once you have completed evaluations for all sessions attended, you will be able to evaluate the overall conference by selecting “Return to Registered Events.”
6. Review your evaluation to make sure you claimed credit for each session you attended. Print and email your final certificate of credit earned for your records. Once you have printed your certificate, you will NOT be able to go back and edit any more sessions.

The deadline to complete your evaluations is December 1, 2016. Please contact the NSGC Executive Office at nsgc@nsgc.org if you need assistance.

NSGC will not be able to issue continuing education certificates if an evaluation is not completed by December 1, 2016. No exceptions will be made.
**Registration Hours**
Washington State Convention Center – Atrium Lobby
- **Tuesday, September 27**
  5:00 PM – 8:00 PM
- **Wednesday, September 28**
  7:00 AM – 7:00 PM
- **Thursday, September 29**
  6:30 AM – 7:00 PM
- **Friday, September 30**
  7:00 AM – 7:00 PM
- **Saturday, October 1**
  7:30 AM – 1:00 PM

**Exhibitor Suite Hours**
Washington State Convention Center – Exhibit Hall 4AB
- **Wednesday, September 28**
  6:00 PM – 8:30 PM
- **Thursday, September 29**
  7:00 AM – 8:00 AM, 5:00 PM – 7:45 PM
- **Friday, September 30**
  7:00 AM – 8:00 AM, 11:15 AM – 3:00 PM, 2:45 PM Passport to Prizes Drawing

**Handouts and Presentations**
NSGC offers electronic versions of AEC session handouts when provided in advance by AEC speakers. A copy of the handouts will be available for reproduction at the attendee’s expense at the FedEx Office Print and Ship Center on Level 1 of the Washington State Convention Center. All session handouts (if provided by the speaker) are posted on the NSGC website and will be available until March 1, 2017. To download handouts go to www.nsgc.org/2016AECHandouts.

To download pre-conference symposia handouts go to www.nsgc.org/2016AECPCSHandouts.

**Business Center Hours**
The FedEx Office Print and Ship Center is located on Level 1 of the Washington State Convention Center and is open during the following hours:
- **Monday – Thursday**
  7:00 AM – 10:00 PM
- **Friday**
  7:00 AM – 9:00 PM
- **Saturday – Sunday**
  9:00 AM – 6:00 PM

**Internet Access**
NSGC attendees will have wireless Internet available in all meeting spaces and common areas at the Washington State Convention Center. Internet at the Convention Center can be accessed by using the network NSGC2016. The password is celebrate35.

NSGC gratefully acknowledges our wireless Internet sponsor at the Convention Center:

**Sequenom**
The Sheraton Seattle has provided complimentary wireless Internet in your guest rooms. Please request login information at the front desk.

**Job Boards**
Bulletin boards with push-pins are available at the AEConnect area in the Exhibitor Suite for attendees to post job opportunities. Other forms of advertising are not permitted. Material posted will be monitored and inappropriate information is subject to removal at NSGC’s discretion.

**Attendee List Information**
Attendee lists were posted on the NSGC website prior to the conference and an updated list will be posted following the conference. Lists are available at the registration desk and are available for reproduction at the attendee’s expense at the FedEx Office Print and Ship Center on Level 1 of the Washington State Convention Center. Attendee lists are provided solely for networking and may not be used for solicitation purposes. NSGC is not responsible for errors and/or omissions.

**Conflict of Interest Disclosures**
All presenters at the AEC are required to disclose any conflicts of interest (COI) related to their presentation. To view these disclosures, visit www.nsgc.org/2016disclosures.

**Sponsored Sessions**
Sponsored meal sessions are available for pre-registration. If you pre-registered to attend a session, a ticket was printed with your badge. In order to be admitted to each session, please bring your conference badge and the ticket that pertains to that session. We encourage you to arrive early for each session to allow all attendees time to be seated. If you did not pre-register for a session but are still interested in attending, please stop by registration to check availability for each session.

Please note that not all attendees will receive food and beverage with their admittance. Please check your ticket to see if the sponsor will provide food, or if you are encouraged to bring your own.

**Executive Office Information**
NSGC Executive Office
330 N. Wabash Avenue, Suite 2000
Chicago, IL 60611 USA
Phone: 312.321.6834
Email: nsgc@nsgc.org
Website: www.nsgc.org

Executive Director
Meghan Carey
mcarey@nsgc.org

**Attendee List Information**
Attendee lists were posted on the NSGC website prior to the conference and an updated list will be posted following the conference. Lists are available at the registration desk and are available for reproduction at the attendee’s expense at the FedEx Office Print and Ship Center on Level 1 of the Washington State Convention Center. Attendee lists are provided solely for networking and may not be used for solicitation purposes. NSGC is not responsible for errors and/or omissions.
### Wednesday, September 28

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 AM – 7:00 PM</td>
<td>Registration Open — Atrium Lobby</td>
<td></td>
</tr>
<tr>
<td>7:00 AM – 8:00 AM</td>
<td>Pre-Conference Breakfast — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>8:00 AM – 2:00 PM</td>
<td><strong>Pre-Conference Symposia</strong></td>
<td><strong>A01 Double Dipping: Education Research in Diverse Settings Room 603</strong>&lt;br&gt;<strong>A02 Integrating Oncology and Genomics for Patient Care and Management Room 4C-3-4</strong>&lt;br&gt;<strong>A03 Oh the Places You’ll Go! Genetic Counseling as a Fast Pass to Personal and Professional Growth Room 604</strong>&lt;br&gt;<strong>A04 Opening the cDNA Non-invasive Prenatal Screen Floodgates: Expansion into the General Population and Its Impact on Industry Counselors, Clinical Providers and Policy Makers Room 611 - 614</strong>&lt;br&gt;<strong>A05 Religion and Spirituality in Genetic Counseling Room 608 - 609</strong>&lt;br&gt;<strong>A06 The Genetic Testing Laboratory: Insider View for Genetic Counselors Room 606 - 607</strong></td>
</tr>
<tr>
<td>10:15 AM – 10:30 AM</td>
<td>Pre-Conference Break — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>2:00 PM – 2:30 PM</td>
<td>NSGC SIG Fair — Room 615 - 617</td>
<td></td>
</tr>
<tr>
<td>2:00 PM – 3:15 PM</td>
<td>AEC 101: Welcome to the Emerald City — Room 618 - 620</td>
<td></td>
</tr>
<tr>
<td>3:30 PM – 3:45 PM</td>
<td>AEC Opening Remarks — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>3:45 PM – 4:45 PM</td>
<td><strong>A07 Population Based Screening for Inherited Predisposition to Breast and Ovarian Cancer — Ballroom 6ABC</strong>&lt;br&gt;<strong>A08 Gene to Community, Community to Action: The Power of Social Media in Genomics — Ballroom 6ABC</strong></td>
<td></td>
</tr>
<tr>
<td>4:45 PM – 5:45 PM</td>
<td>SIG Meetings</td>
<td><strong>ART/Infertility SIG Room 307</strong>&lt;br&gt;<strong>Cardiovascular SIG Room 303</strong>&lt;br&gt;<strong>Cystic Fibrosis SIG Room 310</strong>&lt;br&gt;<strong>Neurogenetics SIG Room 602</strong>&lt;br&gt;<strong>Student/New Member SIG Room 603</strong></td>
</tr>
<tr>
<td>5:45 PM – 6:15 PM</td>
<td>Welcome Reception in the Exhibitor Suite — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>6:00 PM – 8:30 PM</td>
<td>Posters with Authors, Group A — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>6:15 PM – 7:30 PM</td>
<td>Various Program Reunions — see page 12 for more information</td>
<td></td>
</tr>
<tr>
<td>8:00 PM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Thursday, September 29

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:30 AM – 7:00 PM</td>
<td>Registration Open — Atrium Lobby</td>
<td></td>
</tr>
<tr>
<td>7:00 AM – 7:45 AM</td>
<td><strong>B01 Reproductive Genetics and Hereditary Cancer Screening: A Legal Perspective</strong>&lt;br&gt;<em>Sponsored by Integrated Genetics</em> — Ballroom 6E</td>
<td></td>
</tr>
<tr>
<td>7:00 AM – 7:45 AM</td>
<td>SIG Meetings</td>
<td>Leadership and Management SIG Meeting — Room 303&lt;br&gt;Psychiatric SIG Meeting — Room 602</td>
</tr>
<tr>
<td>7:00 AM – 8:00 AM</td>
<td>AEC Breakfast Open — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>8:00 AM – 8:30 AM</td>
<td>NSGC 2017 Board and Committee Leadership Orientation — Room 307</td>
<td></td>
</tr>
<tr>
<td>8:00 AM – 8:30 AM</td>
<td><strong>B02 Janus Series I: The BAP1 Tumor Predisposition Syndrome — Ballroom 6ABC</strong></td>
<td></td>
</tr>
<tr>
<td>8:30 AM – 9:00 AM</td>
<td>Natalie Weissberger Paul National Achievement Award — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>8:30 AM – 4:00 PM</td>
<td>AEC Outreach Program — Room 303</td>
<td></td>
</tr>
<tr>
<td>9:00 AM – 9:15 AM</td>
<td><strong>B03 Beth Fine Kaplan Best Student Abstract Award — Ballroom 6ABC</strong></td>
<td></td>
</tr>
<tr>
<td>9:15 AM – 9:30 AM</td>
<td><strong>B04 Best Full Member Abstract Award — Ballroom 6ABC</strong></td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>Event</td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>----------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>9:30 AM – 10:15 AM</td>
<td>B05 NSGC State of the Society Address — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>10:15 AM – 10:30 AM</td>
<td>AEC Break — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>10:30 AM – 12:00 PM</td>
<td>Educational Breakout Sessions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B06 Diagnosis and Treatment of Cystic Fibrosis: A (Not So) Simple Recessive Condition Room 608 - 609</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B07 Genetic Screening and Risk Assessments for Gamete Donors: The Need for Consensus Guidelines for Donor Eligibility Room 606 - 607</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B08 Historical Perspective of Hereditary Colon Cancer: A Personal and Professional Journey Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B09 Next Gen Teaching: The Lecture As We Know It Is Dead Room 615 - 617</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B10 The Results are In! Clinicians’ Experience in Returning Results for Genomic Sequencing Room 611 - 614</td>
<td></td>
</tr>
<tr>
<td>12:00 PM – 1:00 PM</td>
<td>NSGC Committee Meetings</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Access and Service Delivery Committee Room 306</td>
<td></td>
</tr>
<tr>
<td></td>
<td>AEC Subcommittee Room 310</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Membership Committee Room 307 *</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(*12:00 PM – 1:30 PM)</td>
<td></td>
</tr>
<tr>
<td>12:30 PM – 1:30 PM</td>
<td>NSGC Committee Meetings</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Education Committee Room 308</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Practice Guidelines Committee Room 303</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Marketing and Communications Workgroup Room 602</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public Policy Committee Room 604</td>
<td></td>
</tr>
<tr>
<td>12:00 PM – 1:15 PM</td>
<td>B11 Improving Clinical Whole Exome Sequencing: The Impact of Shorter Turnaround Time, Atypical Findings, Re-analysis and Continued Research: — Room 6E</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sponsored by: Baylor Miraca Genetics Laboratories</td>
<td></td>
</tr>
<tr>
<td>1:30 PM – 3:00 PM</td>
<td>Educational Breakout Sessions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B12 Assessment of Copy Number Variation Using Next Generation Sequencing Data Room 615 - 617</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B13 Patient Safety in the Era of Genomic Medicine: Implications for Genetic Counselors Room 608 - 609</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B14 Prenatal Diagnostic Exome Sequencing: Genomics for the Next Generation Room 611 - 614</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B15 Tier 1 Genomic Applications: Implementing Cancer Genomics via Public Health Programs Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B16 When Hoof Beats Mean Horses: New Insights into the Science and Personal Impact of Diagnosing and Treating Alzheimer’s Disease Room 606 - 607</td>
<td></td>
</tr>
<tr>
<td>3:00 PM – 3:15 PM</td>
<td>AEC Break — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>3:15 PM – 4:15 PM</td>
<td>B17 Dr. Beverly Rollnick Memorial Lecture: So Much Yes: Creating Authentic Human Connection in Difficult Conversations — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>4:15 PM – 5:00 PM</td>
<td>NSGC Leadership Awards — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>5:00 PM – 5:30 PM</td>
<td>Genome Magazine Code Talker Awards Ceremony — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Presented by: Genome Magazine, Sponsored by: Invitae Corporation</td>
<td></td>
</tr>
<tr>
<td>5:00 PM – 7:45 PM</td>
<td>Exhibitor Suite Open — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>5:30 PM – 7:45 PM</td>
<td>AEC 35th Anniversary Reception — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sponsored by: MNG Laboratories and Myriad Corporation</td>
<td></td>
</tr>
<tr>
<td>5:45 PM – 7:00 PM</td>
<td>B18 Posters with Authors, Group B Posters — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>7:00 PM – 8:15 PM</td>
<td>B19 Termination of Pregnancy for Indications of Genetic Disorder in Advanced Gestations — Ballroom 6E</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sponsored by: Boulder Abortion Clinic</td>
<td></td>
</tr>
<tr>
<td>7:00 PM</td>
<td>Various Program Reunions, see page 12 for more information</td>
<td></td>
</tr>
<tr>
<td>7:30 PM – 8:30 PM</td>
<td>International SIG Meeting — Room 310</td>
<td></td>
</tr>
</tbody>
</table>

Friday, September 30

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 AM – 7:00 PM</td>
<td>Registration Open — Atrium Lobby</td>
</tr>
<tr>
<td>7:00 AM – 8:00 AM</td>
<td>AEC Breakfast — Exhibit Hall 4AB</td>
</tr>
<tr>
<td>7:00 AM – 7:45 AM</td>
<td>C01 Key Challenges Associated with NGS-Based Tumor Profiling Lab, Clinic and Patient Perspectives — Ballroom 6E</td>
</tr>
<tr>
<td></td>
<td>Sponsored by: Personalis, Inc.</td>
</tr>
<tr>
<td>7:00 AM – 7:45 AM</td>
<td>SIG Meetings</td>
</tr>
<tr>
<td></td>
<td>Education SIG — Room 308</td>
</tr>
<tr>
<td></td>
<td>Pediatric &amp; Clinical SIG — Room 307</td>
</tr>
<tr>
<td></td>
<td>Research SIG — Room 602</td>
</tr>
<tr>
<td>7:00 AM – 7:45 AM</td>
<td>NSGC Past Board Member Breakfast — Room 303</td>
</tr>
<tr>
<td>7:00 AM – 8:00 AM</td>
<td>Exhibitor Suite Open — Exhibit Hall 4AB</td>
</tr>
</tbody>
</table>
### SCHEDULE-AT-A-GLANCE

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 AM – 8:30 AM</td>
<td><strong>CEU C02 Janus Series II: Barth Syndrome: So Much More than Cardiomyopathy</strong> — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>8:30 AM – 9:30 AM</td>
<td><strong>CEU C03 Professional Issues Panel</strong> — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>9:30 AM – 9:45 AM</td>
<td>AEC Break — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>9:45 AM – 11:15 AM</td>
<td><strong>CEU Concurrent Papers</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C04 Access and Service Delivery</strong> Room 606 - 607</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C05 Genetic/Genomic Testing I Room 611 - 614</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C06 Ethical, Legal and Social Issues Room 615 - 617</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C07 Counseling: Prenatal to Pediatrics Room 608 - 609</strong></td>
<td></td>
</tr>
<tr>
<td>11:15 AM – 3:00 PM</td>
<td>Exhibitor Suite Open — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>11:30 AM – 12:45 PM</td>
<td><strong>CEU C08 Posters with Authors, Group C Posters</strong> — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>11:30 AM – 12:00 PM</td>
<td>NSGC SIG Chair Mixer — Room 307</td>
<td></td>
</tr>
<tr>
<td>11:30 AM – 1:00 PM</td>
<td>Cancer SIG Meeting — Room 604</td>
<td></td>
</tr>
<tr>
<td>12:45 PM – 2:00 PM</td>
<td><strong>CEU C09 Sequence in Seattle: Updates on Variant Classification and Prenatal WES</strong> — Ballroom 6E</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Sponsored by: GeneDx</strong></td>
<td></td>
</tr>
<tr>
<td>1:45 PM – 2:15 PM</td>
<td>American Board of Genetic Counseling (ABGC) Business Meeting — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>2:15 PM – 2:45 PM</td>
<td>Accreditation Council for Genetic Counseling (ACGC) Presentation — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>2:45 PM</td>
<td>Passport to Prizes Drawing — Exhibit Hall 4AB</td>
<td></td>
</tr>
<tr>
<td>3:15 PM – 4:45 PM</td>
<td><strong>CEU Educational Breakout Sessions</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C10 Black &amp; White...or Grey? Billing Integrity, Compliance and Legal Liability for the Genetic Counselor Room 611 - 614</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C11 Novel Precision Therapies for Genetic Disorders: Clinical Trials, Drug Development and the Perspectives of Genetic Counselors and our Patients Room 606- 607</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C12 Strategies for Affecting Behavior Change to Improve Clinical Outcomes in Genetic Testing Room 615 - 616</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C13 The Advent of Molecular Therapeutics for Duchenne and Becker Muscular Dystrophy and the Implications for Genetic Counselors Room 608 - 609</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>C14 The Negative Genome Conundrum: What to Do When the Most Comprehensive Test is Negative Ballroom 6ABC</strong></td>
<td></td>
</tr>
<tr>
<td>4:45 PM – 5:00 PM</td>
<td>AEC Break — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>5:00 PM – 5:45 PM</td>
<td><strong>CEU C15 Genetic Counselors in Emerging Roles</strong> — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>5:45 PM – 6:00 PM</td>
<td>Audrey Heimler Special Project Award Presentation — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>6:00 PM – 6:30 PM</td>
<td><strong>CEU C16 Jane Engelberg Memorial Fellowship Presentation</strong> — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>6:30 PM – 7:30 PM</td>
<td><strong>SIG Meetings</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Genomic Technologies SIG Room 307</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Industry SIG Room 602</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Personalized Medicine SIG Room 303</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public Health SIG Room 308</td>
<td></td>
</tr>
<tr>
<td>6:45 PM – 8:00 PM</td>
<td><strong>CEU C17 Getting Down and Dirty with Ambry: The Truth About NGS</strong> — Ballroom 6E</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Sponsored by Ambry Genetics</strong></td>
<td></td>
</tr>
<tr>
<td>7:00 PM</td>
<td>Various Program Reunions, see page 12 for more information</td>
<td></td>
</tr>
</tbody>
</table>

### Saturday, October 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 AM – 8:00 AM</td>
<td>AEC Breakfast — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>7:00 AM – 7:45 AM</td>
<td><strong>CEU D01 Genome-Wide cfDNA Testing: Has the Time Come?</strong> — Ballroom 6E</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Sponsored by: Sequenom</strong></td>
<td></td>
</tr>
<tr>
<td>7:30 AM – 1:00 PM</td>
<td>Registration Open — Atrium Lobby</td>
<td></td>
</tr>
<tr>
<td>8:00 AM – 8:30 AM</td>
<td>**CEU D02 Janus Series III: CHARGE: A Syndrome of Sensory Deficits and the Psychosocial Implications for Children and Families — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>8:30 AM – 9:30 AM</td>
<td>**CEU D03 Late-Breaking Plenary Session: The National Cancer Moonshot Initiative: A Significant Opportunity for Genetic Counselors — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>9:30 AM – 10:00 AM</td>
<td>Incoming Presidential Address — Ballroom 6ABC</td>
<td></td>
</tr>
<tr>
<td>10:00 AM – 10:15 AM</td>
<td>AEC Break — Ballroom 6ABC Lobby</td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>Session</td>
<td></td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>10:15 AM – 11:45 AM</td>
<td><strong>Educational Breakout Sessions</strong></td>
<td></td>
</tr>
<tr>
<td>D04</td>
<td>Bioinformatics for Genetic Counselors 2.0: (More) Knowledge</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Room 615 - 617</td>
<td></td>
</tr>
<tr>
<td>D05</td>
<td>Challenges of Prenatal Cell-free DNA Screening from the Patient Advocacy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Room 608 - 609</td>
<td></td>
</tr>
<tr>
<td>D06</td>
<td>Genetics and Primary Care: Preparing Primary Care Physicians for the</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Future of Genomic Medicine Room 606 - 607</td>
<td></td>
</tr>
<tr>
<td>D07</td>
<td>It's Not You, It's Your Tumor: Navigating the Journey from Somatic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tumor Testing to the Genetics Clinic Room 611 - 614</td>
<td></td>
</tr>
<tr>
<td>D08</td>
<td>Optimizing Compensation and Professional Advancement: From Negotiating</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Salary, Signing Bonuses and Benefits to Developing and/or Enhancing a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Career Ladder Room 618 - 620</td>
<td></td>
</tr>
<tr>
<td>11:45 AM – 1:00 PM</td>
<td><strong>Metabolism/LSD SIG Meeting — Room 602</strong></td>
<td></td>
</tr>
<tr>
<td>11:45 AM – 1:00 PM</td>
<td><strong>CEU</strong> D09 Hereditary Cancer Testing: Current and Future Challenges — Ballroom 6E</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sponsored by: Invitae Corporation</td>
<td></td>
</tr>
<tr>
<td>1:00 PM – 2:30 PM</td>
<td><strong>Concurrent Papers</strong></td>
<td></td>
</tr>
<tr>
<td>D10</td>
<td>Building the Genetic Counseling Workforce Room 615 - 617</td>
<td></td>
</tr>
<tr>
<td>D11</td>
<td>Genetic/Genomic Testing II Room 611 - 614</td>
<td></td>
</tr>
<tr>
<td>D12</td>
<td>Adult Genetics Room 608 - 609 Sponosred by: Asuragen</td>
<td></td>
</tr>
<tr>
<td>D13</td>
<td>Counseling/ Psychological Issues Room 606 - 607</td>
<td></td>
</tr>
</tbody>
</table>

Supporting your patients throughout their reproductive journey

Genetic carrier screening, preimplantation genetic testing (PGD/PGS), non-invasive prenatal testing (NIPT), and miscarriage testing. **Stop by the Natera booth to find out more.**
Who will be named Genome’s Code Talker of the Year?

Genome Readers Honor Genetic Counselors Who Interpret Complexity With Compassion

Last April, Genome magazine kicked off an essay contest where patients and their families could pay tribute to a genetic counselor by nominating him or her for the Code Talker Award.

Come celebrate your profession by hearing stories written by people who’ve been touched by the skill and compassion of these three finalists! A book of essays will be made available at Invitae’s reception later that evening. Don’t miss it!

Amie Blanco, MS, LCGC
Nominated by Selena Martinez

Allison Goetsch, MS, CGC
Nominated by Melissa Bruebach

Anna Victorine, MS, CGC
Nominated by Brooke Johns

September 29th, 5:00 p.m.
Immediately following the NSGC’s Leadership Awards

NSGC INVITES YOU...

To celebrate all that we have accomplished as genetic counselors and as an organization over the past 35 years!

Join us at the 35th Anniversary Reception on Thursday, September 29 at 5:30 PM for drinks in the Exhibitor Suite (Two drink tickets will be provided per attendee)

Reception sponsored by:
Who will be named Genome’s Code Talker of the Year?

Genome Readers Honor Genetic Counselors Who Interpret Complexity With Compassion

Last April, Genome magazine kicked off an essay contest where patients and their families could pay tribute to a genetic counselor by nominating him or her for the Code Talker Award.

Come celebrate your profession by hearing stories written by people who’ve been touched by the skill and compassion of these finalists!

A book of essays will be made available at Invitae’s reception later that evening. Don’t miss it!

September 29th, 5:00 p.m.

immediately following the NSGC’s Leadership Awards

Sponsored by

Amie Blanco, MS, LCGC
Nominated by Selena Martinez

Allison Goetsch, MS, CGC
Nominated by Melissa Bruebach

Anna Victorine, MS, CGC
Nominated by Brooke Johns

Boulder Abortion Clinic
Specializing in Late Abortion for Fetal Disorders
Quality Care for Women Since 1973

Warren M. Hern, MD, MPH, PhD

Director
American Board of Preventive Medicine
Fellow, American College of Preventive Medicine
Associate Clinical Professor, Department of Obstetrics & Gynecology
University of Colorado Health Sciences Center

Author
Abortion Practice
Philadelphia: J.B. Lippincott, 1984
Boulder: Alpenglo Graphics, 1990
(soft cover edition)

- Outpatient abortion over 30 menstrual weeks for selected patients with documented fetal anomaly, fetal demise, or medical indications
- Routine preoperative ultrasound evaluation for all patients
- Routine preoperative use of laminaria for maximum safety
- Individual counseling and support
- Highly experienced and dedicated professional staff
- Tradition of research and teaching in abortion services
- Founding institutional member, National Abortion Federation
- Bilingual staff and physician: fluent in Spanish, Portuguese, and Italian
- Recent research publications on request
- Consultations on request

1130 Alpine Avenue, Boulder, CO 80304
Tel: (303) 447-1361 • (800) 535-1287 • Fax: (303) 447-0020
www.drhern.com
**REUNION INFORMATION**

Please visit the NSGC AEC mobile app for updated reunion information

<table>
<thead>
<tr>
<th>Time</th>
<th>Reunion Name</th>
<th>Location</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Wednesday, September 28</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:45 PM</td>
<td>University of Oklahoma Health Sciences Center</td>
<td>Tap House Grill 1506 Sixth Ave</td>
<td>206.816.3314</td>
</tr>
<tr>
<td>7:30 PM</td>
<td>University of Maryland - MGC Program</td>
<td>Tap House Grill 1506 Sixth Ave</td>
<td>206.816.3314</td>
</tr>
<tr>
<td>8:00 PM</td>
<td>Stanford University MS in Human Genetics and Genetic Counseling</td>
<td>Mr. West Cafe Bar 720 Olive Way</td>
<td>206.900.9378</td>
</tr>
<tr>
<td>8:00 PM</td>
<td>University of Cincinnati Genetic Counseling Program</td>
<td>Palomino Restaurant and Bar 1420 5th Ave</td>
<td>206.623.1300</td>
</tr>
<tr>
<td>8:00 PM</td>
<td>University of Texas at Houston</td>
<td>Local 360 Cafe &amp; Bar 2234 1st Ave (at Bell St)</td>
<td>206.441.9360</td>
</tr>
<tr>
<td>8:00 PM</td>
<td>Wayne State University</td>
<td>Daily Grill, Pike Place Lobby 629 Pike Street</td>
<td>206.624.8400</td>
</tr>
<tr>
<td>8:30 PM</td>
<td>Canadian Genetic Counselling Programs: McGill University, University of British Columbia and University of Toronto</td>
<td>Tap House Grill 1506 Sixth Ave</td>
<td>206.816.3314</td>
</tr>
<tr>
<td><strong>Thursday, September 29</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6:30 PM</td>
<td>University of Utah</td>
<td>TBD</td>
<td></td>
</tr>
<tr>
<td>7:00 PM</td>
<td>Arcadia University Genetic Counseling Program</td>
<td>Orfeo 2107 3rd Ave</td>
<td>206.443.1972</td>
</tr>
<tr>
<td>7:00 PM</td>
<td>Case Western Reserve University</td>
<td>Elephant and Castle Pub 1415 5th Ave</td>
<td>206.624.9977</td>
</tr>
<tr>
<td>7:00 PM</td>
<td>Mount Sinai</td>
<td>Frolik Kitchen + Cocktails 1415 5th Ave</td>
<td>206.971.8015</td>
</tr>
<tr>
<td>7:00 PM</td>
<td>University of Alabama at Birmingham (UAB)</td>
<td>Blueacre Seafood 1700 7th Ave</td>
<td>206.659.0737</td>
</tr>
<tr>
<td>7:00 PM</td>
<td>The Joan H. Marks Graduate Program in Human Genetics, Sarah Lawrence College</td>
<td>The Triple Door 216 Union Street</td>
<td>206.838.4315</td>
</tr>
<tr>
<td>7:00 PM</td>
<td>University of Pittsburgh Genetic Counseling Training Program</td>
<td>Blueacre Seafood 1700 7th Ave</td>
<td>206.659.0737</td>
</tr>
<tr>
<td>7:00 PM</td>
<td>University of Wisconsin - Madison</td>
<td>TBD</td>
<td></td>
</tr>
<tr>
<td>7:30 PM</td>
<td>JHU/NHGRI Counseling Program</td>
<td>Mayflower Park Hotel 405 Olive Way</td>
<td>206.623.8700</td>
</tr>
<tr>
<td>8:30 PM</td>
<td>California State University - Stanislaus and University of California Berkeley</td>
<td>TBD</td>
<td></td>
</tr>
<tr>
<td>8:30 PM</td>
<td>University of Michigan</td>
<td>The Pike Brewing Company 1415 1st Ave</td>
<td>206.622.6044</td>
</tr>
<tr>
<td>8:30 PM</td>
<td>University of Minnesota Genetic Counseling Program</td>
<td>Tap House Grill 1506 Sixth Ave</td>
<td>206.816.3314</td>
</tr>
<tr>
<td><strong>Friday, September 30</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7:00 PM</td>
<td>Northwestern University Graduate Program in Genetic Counseling</td>
<td>Tulio Ristorante Hotel Vintage-Seattle 1100 Fifth Ave</td>
<td>206.642.5500</td>
</tr>
<tr>
<td>8:00 PM</td>
<td>University of California, Irvine</td>
<td>TBD</td>
<td></td>
</tr>
<tr>
<td>9:00 PM</td>
<td>Brandeis University</td>
<td>Blue Acre Seafood 1700 7th Ave</td>
<td>206.659.0737</td>
</tr>
</tbody>
</table>
CONVENTION CENTER FLOOR PLAN

Level 3

SIG + Committee Meetings

Level 4

4D Skybridge

Posters

Session Room

Level 6

Ballroom 6E

Ballroom 6ABC

Session Room

6ABC Lobby

Session Room

Mothers Room

Session Room

Session Room

Atrium Lobby (Below)

Galleria (Below)
SESSION SPEAKERS AND OBJECTIVES

WEDNESDAY, SEPTEMBER 28

Pre-Conference Symposia
8:00 AM – 2:00 PM

A01 Double Dipping: Education Research in Diverse Settings
5.00 Contact Hours
1: Alix Darden, PhD, University of Oklahoma Health Sciences Center; 2: Carrie Guy, MS, CGC, Quest Diagnostics; 3: Claire Davis, MS, CGC, Sarah Lawrence College; 4: Erica Nelson, BS, 23andMe; 5: Emily Morris, MSc, CGC, University of British Columbia
• Describe the principles and value of education research methodologies.
• Compare education research approaches and methods by example.
• Create education research questions through hands-on experience with mentors.
• Apply education research methodologies to designed research questions.
Submitted by: NSGC Education SIG

A02 Integrating Oncology and Genomics for Patient Care and Management
5.00 Contact Hours
1: Victoria Raymond, MS, LCGC, CCRP, Trovagene, Inc; 2: Mark Robson, MD, Memorial Sloan Kettering Cancer Center; 3: Joy Larsen Haidle, MS, CGC, Humphrey Cancer Center; 4: Stephen B. Gruber, MD, PhD, MPH, USC Norris Comprehensive Cancer Center; 5: Thomas Slavin, MD, FACMG, DABMD, City of Hope Cancer Center; 6: Sara Pirzadeh Miller, MS, CGC, UT Southwestern Medical Center; 7: Tom Walsh, PhD, University of Washington
• Discuss somatic tumor testing clinical decision making.
• Describe how the information we provide to oncologists is utilized.
• Recognize the next frontier of genomic research.
Submitted and Sponsored by: NSGC Familial Cancer SIG

A03 Oh the Places You’ll Go! Genetic Counseling as a Fast Pass to Personal and Professional Growth
5.00 Contact Hours
1: Kimberly Banks, MS, CGC, MBA, Guardant Health; 2: Elizabeth Butler, MS, CGC, GeneDx; 3: Melissa Maisenbacher, MS, CGC, Natera; 4: Donna McDonald-McGinn, MS, LGCG, The Perelman School of Medicine of the University of Pennsylvania, The Children’s Hospital of Philadelphia; 5: Matt Tschirgi, MS, LGCG, Progeny; 6: Kathleen Valverde, MS, CGC, Arcadia University; 7: Leah Williams, MS, CGC, GeneDx
• Distinguish professional development from career advancement.
• Describe various strategies and methods to grow as a genetic counselor.
• Generate a list of professional skills to place a genetic counselor on a path of career advancement.
• Examine characteristics of CVs and cover letters of genetic counseling applicants in a critical manner.

A04 Opening the cfDNA Non-invasive Prenatal Screen Floodgates: Expansion into the General Population and Its Impact on Industry Counselors, Clinical Providers and Policy Makers
5.00 Contact Hours
1: Mary Norton, MD, University of California, San Francisco; 2: Erica Sturm, MS, CGC, Perinatal Quality Foundation; 3: Megan Maxwell, MS, LGCG, Quest Diagnostics; 4: Lisa Demers, MS, CGC, Roche Diagnostics; 5: Colleen Wu, MS, CGC, Evicore Healthcare; 6: Kelly Chen, MS, CGC, LGCG, Personalis, Inc.; 7: Danielle LaGrave, MS, LGCG, ARUP Laboratories; 8: Edye Conway, MS, CGC, Saint Alphonsus Maternal Fetal Medicine; 9: Shannon Mulligan, MS, CGC, Baylor College of Medicine; 10: Kelly L. Adams, MS, LGCG, Kaiser Permanente
• Assess the unique factors in cfDNA non-invasive prenatal screening that impact pre- and post-test patient counseling for the general population.
• Identify challenges and strategies related to expanding pre-test education for cfDNA non-invasive prenatal screening to any woman in pregnancy.
• Describe factors that impact insurance coverage and reimbursement for cfDNA non-invasive prenatal screening, including analytical validity, clinical validity and clinical utility.
• Explore complex cases from both laboratory and clinical perspectives.
Submitted and Sponsored by: NSGC Prenatal SIG

A05 Religion and Spirituality in Genetic Counseling
5.00 Contact Hours
1: Kate Wilson, MS, CGC, Quest Diagnostics; 2: Katelyn Sagasser, MS, CGC, Johns Hopkins Hospital, Prenatal Diagnosis and Treatment Center; 3: Jennifer Lemons, CGC, UT Health Science Center at Houston; 4: Brent Peery, DMin, BCC, Memorial Hermann–Texas Medical Center
• Define religiosity and spirituality (R/S) as well as several different belief systems.
• Illustrate possible R/S complexities that may arise in healthcare, specifically in regard to genetic counseling.
• Evaluate when R/S exploration would be beneficial in a genetic counseling session.
• Identify considerations and perceived challenges of genetic counselors related to performing R/S assessment.
Submitted by: NSGC Membership Committee

A06 The Genetic Testing Laboratory: Insider View for Genetic Counselors
5.00 Contact Hours
1: Katrina Katzer, MS, CGC, Mayo Clinic; 2: Patricia Winters, MS, CGC, Illumina, Inc; 3: Mathew Bower, MS, CGC, University of Minnesota Health; 4: W. Andrew Fauckett, MS, LGCG, Geisinger; 5: Heather MacLeod, MS, CGC, Cardiovascular Genetics Consultant; 6: Danielle LaGrave, MS, LGCG, ARUP Laboratories; 7: Jill Rosenfeld Mokry, MS, CGC, Baylor College of Medicine; 8: Alice Tanner, PhD, MS, CGC, FACMG, Emory University, Emory Genetics Laboratory, LLC; 9: Michelle Dolan, MD, University of Minnesota; 10: Lisa Sniderman King, MSc, CGC, University of Washington
• Describe in-depth specifics of genetic testing terminology and technologies relevant to both clinical practice and the practice of laboratory genetic counseling.
• Analyze largely unknown aspects of the genetic testing laboratory, including the history and importance of regulatory bodies, the test development process, the laboratory infrastructure and laboratory business relationships.
• Evaluate nuances and challenges within the genetic testing laboratory through the evaluation of ethical case examples and contributions to research.
Submitted and Sponsored by: NSGC Industry SIG
**SESSION SPEAKERS AND OBJECTIVES**

**Plenary Sessions**  
3:45 PM – 4:45 PM

**A07** | Population-Based Screening for Inherited Predisposition to Breast and Ovarian Cancer  
1:00 Contact Hour  
1: Mary-Claire King, PhD, University of Washington; 2: Muin J. Khoury, MD, PhD, Centers for Disease Control and Prevention; 3: Joy Larsen Haidle, MS, CGC, Humphrey Cancer Center; 4: Jean Enersen, King 5 TV  
**Objectives:**  
• Describe expert opinions about population screening for Hereditary Breast and Ovarian Cancer Syndrome (HBOC).  
• Appraise potential benefits as well as barriers to population-based screening for HBOC.  
• Consider critical elements of a proposed screening program including the population served, tests included, variants reported and follow-up care.

**B02** | The BAP1 Tumor Predisposition Syndrome  
0.50 Contact Hour  
1: Robert Pilarski, MS, LGC, MSW, The Ohio State University  
**Objectives:**  
• Review the hereditary basis of uveal melanoma and the contribution of BAP1 mutations.  
• Summarize the signs of the BAP1 tumor predisposition syndrome (BTPS) and the spectrum of associated cancers, penetrance estimates and management recommendations.  
• Discuss the potential role of research studies for patients and families suspected of having BTPS.

**Best Abstract Awards**  
9:00 AM – 9:30 AM

**Beth Fine Kaplan Best Student Abstract Award**  
**B03** | Genetic Counseling Increases Parental Knowledge and Psychological Adaptation to Turner Syndrome Diagnosis  
0.25 Contact Hour  
1: Caitlin A. Austin  
**Objectives:**  
• Describe the effects of genetic counseling on adaptation in parents of children with Turner Syndrome.

**Best Full Member Abstract Award**  
**B04** | Adapting Evidence-Based Strategies for Effective Communication in Cancer Genetic Counseling  
0.25 Contact Hour  
1: Robin Lee, MS, CGC  
**Objectives:**  
• Describe evidence-based strategies for effective communication with patients of limited health literacy.

**Plenary Session**  
9:30 AM – 10:15 AM

**B05** | NSGC State of the Society Address  
0.75 Contact Hour  
1: Jehannine Austin, MSc, PhD, CGC, CCGC, President, National Society of Genetic Counselors  
**Objectives:**  
• Describe the activities of NSGC over the past year as related to the advancement of the profession of genetic counseling.  
• Assess NSGC’s advocacy efforts over the course of 2016.  
• Outline the strategic initiatives in NSGC’s 2016 – 2018 strategic plan.

**Educational Breakout Sessions**  
10:30 AM – 12:00 PM

**B06** | Diagnosis and Treatment of Cystic Fibrosis: A (Not So) Simple Recessive Condition  
1.50 Contact Hours  
1: Elinor Langfelder-Schwind, MS, CGC, Mount Sinai Beth Israel; 2: Matthew Pastore, MS, LGC, Nationwide Children’s Hospital; 3: Laura Fischer, MS, CGC, Women and Children’s Hospital of Buffalo; 4: Lisa Green, MA, Happy Heart Families; 5: Bonnie Watts Ramsey, MD, Seattle Children’s Research Institute  
**Objectives:**  
• Describe recent developments in the field of cystic fibrosis (CF) research and mutation-specific therapies.  
• Explain common CF newborn screening algorithms and their potential diagnostic outcomes.  
• Recognize the needs of the family through the diagnostic and treatment journey (family perspective).  
• Compare benefits and limitations of various CF testing platforms for risk assessment.

**Sponsored Breakfast Session**  
7:00 AM – 7:45 AM

**B01** | Integrated Genetics: Reproductive Genetics and Hereditary Cancer Screening – A Legal Perspective  
0.50 Contact Hour  
1: Phillip J. Duffy, Esq. Gibbons, P.C  
**Objectives:**  
• Describe concepts that participants can utilize to avoid and manage legal risk in their daily practice.  
• Explain the legal importance of defining policies and procedures based on professional guidelines, providing informed consent and maintaining documentation.

**THURSDAY, SEPTEMBER 29**

**Sponsored Breakfast Session**  
7:00 AM – 7:45 AM

**B08** | Gene to Community, Community to Action: The Power of Social Media in Genomics  
1.00 Contact Hour  
1: Matthew Might, PhD, University of Utah  
**Objectives:**  
• Describe non-traditional methods to create and foster connection of patients with rare diseases.  
• Explain how genetic counselors can connect with patient-driven efforts to facilitate sharing of research data, patient advocacy and community-building.
### SESSION SPEAKERS AND OBJECTIVES

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Speakers</th>
<th>Duration</th>
<th>Objectives</th>
</tr>
</thead>
</table>
| B07     | **Genetic Screening and Risk Assessments for Gamete Donors:** The Need for Consensus Guidelines for Donor Eligibility | 1: Lauren J. Isley, MS, LGCG, Counsyl Inc.; 2: Amy Vance, MS, LGCG, Bay Area Genetic Counseling; 3: Peggy Orlin, MS, MFT, Private Practice at Pacific Fertility Center; 4: Laura Black, MS, LGCG, Pacific Reproductive Genetic Counseling | 1.50 Contact Hours | - Summarize the current regulations and guidelines for gamete donor screening.  
- Describe existing gamete donor screening practices, including carrier testing, psychological assessment and family medical history screening.  
- Outline the issues behind the lack of uniform donor screening processes between egg and sperm donors and across gamete donor facilities.  
- Assess the impact of the lack of uniform processes when performing a risk assessment and providing patient care.  
- Review the efforts to establish consensus eligibility guidelines for gamete donors.  
Submitted and Sponsored by: NSGC ART/Infertility SIG |
| B08     | **Historical Perspective of Hereditary Colon Cancer: A Personal and Professional Journey** | 1: Richard Boland, MD; 2: Heather Hampel, MS, LGCG, The Ohio State University; 3: Linda Robinson, MS, CGC, UT Southwestern Medical Center | 1.50 Contact Hours | - Describe the transformation of genetic testing for hereditary colon cancer over the last 40 years.  
- Discuss the epigenetic factors for hereditary colon cancer and the implication on risk reduction.  
- Describe the personal impact of hereditary cancer on a family.  
- Discuss the international impact of population-based screening for Lynch syndrome. |
| B09     | **Next Gen Teaching: The Lecture As We Know It Is Dead**              | 1: Beverly M. Yashar, MS, PhD, CGC, University of Michigan; 2: Emily Edelman, MS, CGC, The Jackson Laboratory; 3: Catherine Reiser, MS, CGC, University of Wisconsin–Madison; 4: MaryAnn W. Campion, EdD, MS, CGC, Stanford University School of Medicine; 5: Leslie Cohen, MS, PhD, Case Western Reserve University School of Medicine | 1.50 Contact Hours | - Describe emerging educational and assessment methods.  
- Discuss how to adapt these innovative approaches to diverse groups of learners.  
- Apply active learning concepts to develop a mock genetic educational program including teaching and assessment methods.  
Submitted by: NSGC Education SIG |
| B10     | **The Results are In! Clinicians’ Experience in Returning Results for Genomic Sequencing** | 1: Sarah Scollon, MS, CGC, Baylor College of Medicine; Texas Children's Hospital; 2: Julia Wynn, MS, CGC, New York Presbyterian Columbia; 3: Katie Lewis, ScM, CGC, National Institutes of Health | 1.50 Contact Hours | - Identify how return of results for whole exome sequencing/whole genome sequencing (WES/WGS) differs from single gene or panel genetic testing and how that may alter the return of results process.  
- Recognize common challenges faced in the return of results process and methods for addressing these challenges.  
- Apply lessons learned from the Clinical Sequencing Exploratory Research clinicians to your own return of results process in order to increase efficiency and improve patient experiences at your home institution.  
- Recognize the valuable role of the genetic counselor in various areas of the WES/WGS return of results process. |
| B11     | **Improving Clinical Whole Exome Sequencing: The Impact of Shorter Turnaround Time, Atypical Findings, Re-analysis and Continued Research** | 1: Alicia Braxton, MS, CGC, Baylor College of Medicine; 2: Yaping Yang, PhD, FACPMMG, Baylor College of Medicine; 3: Pengfei Liu, PhD, FACPMMG, Baylor College of Medicine; 4: Seema Lalani, MD, Baylor College of Medicine | 1.00 Contact Hour | - Illustrate categories of genetic variation that can be detected through whole exome sequencing (WES) testing.  
- Summarize the WES testing process to optimize turnaround time and increase detection rate.  
- State how WES re-analysis increases detection rate for initially negative cases.  
- Indicate research opportunities available for patients with negative clinical exome.  
- Examine clinical phenotypes in relationship to each other as a new disease cohort.  
Submitted by: Baylor Miraca Genetics Laboratories |
| B12     | **Assessment of Copy Number Variation Using Next Generation Sequencing Data** | 1: Kimberly Banks, MS, CGC, MBA, Guardant Health; 2: Kelly D.F. Hagman, MS, CGC, Ambry Genetics; 3: Dale Muzzey, PhD, Counsyl, Inc; 4: Zhongming Zhao, PhD, UT Health Science Center at Houston; 5: Hisao-Mei Lu, PhD, Ambry Genetics | 1.50 Contact Hours | - Recall data regarding the use of next-generation sequencing (NGS) data for copy number variation (CNV) detection.  
- Recognize the current use of CNV analysis from NGS in clinical practice.  
- Interpret clinical reports describing results from CNV analysis from NGS data.  
Submitted and Sponsored by: NSGC Genomic Technologies SIG |
- Identify potential errors that have been reported to arise in the order, analysis, interpretation and follow-up of genetic tests.  
- Recognize the implications of genetic testing for patient safety.  
- Identify strategies for addressing and enhancing patient safety in your own genetic counseling practice. |
Order testing your way with our new custom panel options.

Stop by Booth #316
SESSION SPEAKERS AND OBJECTIVES

B14  Prenatal Diagnostic Exome Sequencing: Genomics for the Next Generation
1.50 Contact Hours
1: Christina Alamillo, MS, CGC, LGC, Ambry Genetics; 2: Alicia Braxton, MS, CGC, Baylor Miraca Laboratories, Baylor College of Medicine; 3: Catherine Burson, MS, CGC, Center for Maternal Fetal Health at Rocky Mountain Hospital for Children; 4: Lauren Westerfield, MS, CGC, Baylor College of Medicine, Texas Children’s Hospital; 5: Curtis R. Coughlin II, MS, MBe, CGC, University of Colorado School of Medicine
- Discuss the clinical utility of diagnostic exome sequencing in the prenatal population, including use for diagnosis, decision-making, preparation, family planning and pregnancy, and birth management.
- Describe the findings of the published literature regarding prenatal diagnostic exome sequencing.
- Identify ethical, legal and social implications of prenatal diagnostic exome sequencing.
Submitted and Sponsored by: NSGC Prenatal SIG

B15  Tier 1 Genomic Applications: Implementing Cancer Genomics via Public Health Programs
1.50 Contact Hours
1: Muin J. Khoury, MD, PhD, Centers for Disease Control and Prevention, CDC; 2: Natasha F. Bonhomme, Genetic Alliance; 3: Catherine Burson, MS, CGC, Michigan Department of Community Health; 4: Alicia Braxton, MS, CGC, Baylor College of Medicine, Texas Children’s Hospital; 5: Curtis R. Coughlin II, MS, MBe, CGC, University of Colorado School of Medicine
- Summarize the Centers for Disease Control and Prevention (CDC) Tier 1 Genomic Applications and their relevance to public health practice.
- Describe the Tier 1 implementation methods for public health departments that are outlined in the CDC Tier 1 Genomic Applications Toolkit, including bi-directional cancer registry reporting, educational programs, developing and tracking surveillance indicators, informing policy making and cascade screening.
- Identify successful examples of state public health programs and patient advocacy work involving Tier 1 Genomic Applications.
- Identify patient advocacy work being done to increase awareness of Tier 1 Genomic Applications.
Submitted by: NSGC Public Health SIG

B16  When Hoof Beats Mean Horses: New Insights into the Science and Personal Impact of Diagnosing and Treating Alzheimer’s Disease
1.50 Contact Hours
1: Zachary Miller, MD, University of California, San Francisco; 2: Jill S. Goldman, MS, MPhil, CGC, Columbia University Medical Center; 3: Jamie Tyrone, RN, B.A.B.E.S. (Beating Alzheimer’s by Embracing Science); 4: Susan Hahn, MS, CGC, Quest Diagnostics
- Recognize red flags for familial/hereditary risk for Alzheimer’s disease and other dementia.
- Describe current practices regarding genetic testing, imaging and biomarkers in predicting, diagnosing and treating dementia.
- Discuss the personal, logistical and emotional impact of undergoing comprehensive risk assessment for dementia.
- Explain how current and future drug studies may be beneficial to families with hereditary dementias.
Submitted by: NSGC Neurogenetics SIG

Dr. Beverly Rollnick Memorial Lecture
3:15 PM – 4:15 PM

B17  So Much Yes: Creating Authentic Human Connection in Difficult Conversations
1.00 Contact Hour
1: Belinda Fu, MD, Mayutica Institute for Communication in Medicine, University of Washington School of Medicine, Swedish Medical Center
- Experience how the act of affirmation can forge sincere connections and minimize misunderstanding.
- Heighten awareness of verbal and non-verbal behaviors that affect communication.
- Explore how improvisational theater skills can improve communication in medicine.

C01  Key Challenges Associated with NGS-Based Tumor Profiling: Lab, Clinic and Patient Perspectives
0.50 Contact Hour
1: Heather Wetzel, MS, LGCG, Personalis, Inc.; 2: Erin Ayash, MS, LCGC, Personalis Inc.; 3: Luna Okada, MS, CGC, AMITA Health Saint Alexius Medical Center
- Define the conditions and logistical considerations for somatic tumor testing.
- Summarize what the results of somatic tumor testing mean for your patients.
- Examine some of the challenges associated with somatic tumor testing including the significance and ethical considerations regarding pathogenic germline variants.
- Evaluate the experience of tumor profiling from a patient’s perspective.
Submitted by: Personalis, Inc.
SESSION SPEAKERS AND OBJECTIVES

Janus Series
8:00 AM – 8:30 AM

C02 Barth Syndrome: So Much More than Cardiomyopathy 0.50 Contact Hour
1: Rebecca McClellan, MGC, CGC, Johns Hopkins School of Medicine
- Review the multisystem clinical presentation and discuss what we know about the disorder’s connection to cardiopulmonary remodeling.
- Explore the varied experiences and often conflicting roles of a genetic counselor working with a rare disease support group.
- Outline the challenges faced by X-linked disease carriers.
Submitted by: NSGC Cardiovascular SIG

C10 Black & White…or Grey? Billing Integrity, Compliance and Legal Liability for the Genetic Counselor 1.50 Contact Hours
1: Jodie Vento, MS, CGC, Children's Hospital of Pittsburgh of UPMC; 2: 5. Craig Holden, Ober|Kaler; 3: Gillian Hooker, PhD, ScM, CGC, NextGxDx
- Describe the federal anti-kickback, Stark, and other billing compliance regulations, and their roles in genetic testing services.
- Discuss the role of the clinical genetic counselor in regards to billing practice compliance and “guarantee” counseling.
- Recognize red flags indicating that billing practices may be out of compliance.
Submitted by: NSGC Access and Service Delivery Committee

Plenary Session
8:30 AM – 9:30 AM

C03 Professional Issues Panel 1.00 Contact Hour
1: Jennifer Haskovec, MS, CGC, University of Texas Medical School at Houston; 2: John Richardson, NSGC; 3: Cathy Wicklund, MS, CGC, Northwestern University Feinberg School of Medicine
- Review current initiatives focused on assessing demand for genetic counselors over the next 10 years.
- Outline strategies being pursued by ABGC, ACGC, AGCPD and NSGC to support expansion of the genetic counselor workforce to meet the future demand for genetic services.
- Review the status of federal legislation to add genetic counselors as authorized providers under Medicare.
- Outline NSGC member involvement in supporting the pending bill.

Sponsored Lunch Session
12:45 PM – 2:00 PM

C09 Sequence in Seattle: Updates on Variant Classification and Prenatal WES 1.00 Contact Hour
1: Elizabeth Butler, MS, CGC, GeneDx; 2: Carin Yates, MS, CGC, GeneDx; 3: Michelle Cahr, MS, CGC; Ronald O. Perelman and Claudia Cohen Center for Reproductive Medicine
- Explain variant classification methods and procedures.
- Examine the reasons for variant reclassification and its impact on clinical care.
- Describe the clinical utility of whole exome sequencing (WES) in the prenatal setting.
- Discuss the current knowledge of WES in the reproductive setting.
Submitted by: GeneDx

C11 Novel Precision Therapies for Genetic Disorders: Clinical Trials, Drug Development and the Perspectives of Genetic Counselors and Patients 1.50 Contact Hours
1: Christian Jacobs, The FH Foundation; 2: Julie C. Sapp, ScM, CGC, National Human Genome Research Institute, National Institutes of Health; 3: Leslie Leinwand, PhD, University of Colorado Boulder; 4: Haroon Hashmi, PhD, Alnylam Pharmaceuticals
- Discuss the value of and considerations for patient participation in clinical trials.
- Identify ways that genetic information can drive therapeutic development.
- Explain the pathway for drug development.
Submitted by: NSGC Personalized Medicine SIG, NSGC Research SIG and NSGC Cardiovascular Genetics SIG

C12 Strategies for Affecting Behavior Change to Improve Clinical Outcomes in Genetic Counseling 1.50 Contact Hours
1: Scott T. Walters, PhD, University of North Texas Health Science Center
- Recall key components and principles of motivational interviewing (MI) in addressing risk behaviors.
- Describe client “change talk” and how it contributes to MI practice.
- Review MI techniques, including responding to client resistance, eliciting and reinforcing “change talk,” and consolidating commitment around change.

C13 The Advent of Molecular Therapeutics for Duchenne and Becker Muscular Dystrophy and the Implications for Genetic Counselors 1.50 Contact Hours
1: Lauren Morgenroth, MS, CGC, Childrens’ National Health System; 2: Ann Lucas, MS, CGC, Parent Project Muscular Dystrophy; 3: Ann Martin, MS, CGC, Parent Project Muscular Dystrophy; 4: Laune Paschal
- Describe the current natural history of Duchenne and Becker muscular dystrophy (DBMD).
- Explain the different therapeutic strategies in the pipeline for DBMD, with an emphasis on molecular therapeutics.
- Discuss the importance of rare disease patient registries such as DuchenneConnect.
- Recognize the benefits and risks that families face when participating in research.
Submitted by: NSGC Neurogenetics SIG

C14 The Negative Genome Conundrum: What To Do When the Most Comprehensive Genetic Test is Negative 1.50 Contact Hours
1: Michael O. Dorschner, PhD, University of Washington; 2: Allison L. Cinar, MS, CGC, Brigham and Women’s Hospital; 3: Laura Amendola, MS, CGC, University of Washington; 4: Sarah Scollon, MS, CGC, Baylor Texas Children’s Hospital; 5: Julia Wynn, MS, CGC, Columbia University Medical Center; 6: Sawona Biswas, MS, CGC, Children’s Hospital of Philadelphia
- Recognize the technical limitations of whole exome sequencing/genome sequencing (WES/WGS) with a focus on current sequencing methods, interpretation of variants and variant databases.
- Discuss common issues raised in disclosing and managing negative WES/WGS results.
- Examine approaches to counseling patients about the limitations of WES/WGS, setting realistic expectations and disclosing negative results.
Submitted and Sponsored by: Genomic Technology SIG
SESSION SPEAKERS AND OBJECTIVES

Plenary Sessions
5:00 PM – 5:45 PM

C15 Genetic Counselors in Emerging Roles
0.50 Contact Hour
1. Steven Keiles, MS, LCGC, Quest Diagnostics; 2. Heather L. Shappeil, MS, CGC, Beacon Laboratory Benefit Solutions, Inc.; 3. Angela Walter, MS, CGC, Sanofi Genzyme Corporation; 4. Joan Scott, MS, CGC, Maternal and Child Health Bureau, Health Resource and Services Administration
• Highlight three emerging roles for genetic counselors in different aspects of the health system.
• Compare the professional pathways of genetic counselors who have taken unique roles and outline the skills and resources helped them along the way.
• Evaluate the value genetic counselors can bring to emerging roles in healthcare.
Submitted by: NSGC Roles of Genetic Counselors Taskforce

SATURDAY, OCTOBER 1

Sponsored Breakfast Session
7:00 AM – 7:45 AM

D01 Genome-wide cfDNA Testing: Has the Time Come?
0.50 Contact Hour
1. Erica Soster, MS, CGC, Sequenom; 2. Tom Westover, MD, Cooper University Hospital
• Summarize initial experiences with genome-wide cfDNA testing in the first year of use from a clinical laboratory perspective.
• Examine the implementation and utility of genome-wide cfDNA testing from a clinician’s perspective.
Sponsored by: Sequenom

Janus Series
8:00 AM – 8:30 AM

D02 CHARGE: A Syndrome of Sensory Deficits and the Psychosocial Implications for Children and Families
0.50 Contact Hour
1. Megan Helmer, MS, CGC, Saint Louis University School of Medicine
• Define the diagnostic criteria and testing options for CHARGE syndrome in a clinical setting.
• Recognize how hearing loss, vision loss and other sensory deficits alter typical infant development and affect the clinical and psychosocial needs of patients with CHARGE syndrome and their family members.
• Explain the impact and implications of deaf-blind educational programs for patients diagnosed with CHARGE syndrome.

Educational Breakout Sessions
10:15 AM – 11:45 AM

D04 Bioinformatics for Genetic Counselors 2.0: (More) Knowledge is Power
1.50 Contact Hours
1. Michelle Fox, MS, LCGC; 2. Erica Ramos, MS, LCGC, Illumina, Inc.; 3. Eric W. Klee, PhD, Mayo Clinic; 4. Stephen E. Lincoln, Invitae
• Describe bioinformatics tools and databases used in clinical testing, in particular for quality assessment, variant annotation and classification.
• Contrast differing uses of bioinformatics databases and tools by various genetic tests.
• Discuss bioinformatics issues with laboratories, non-genetics clinicians and patients.
• Identify ongoing developments in bioinformatics that will impact clinical practice in the future.
Submitted and Sponsored by: NSGC Industry SIG

D05 Challenges of Prenatal Cell-free DNA Screening from the Patient Advocacy Perspective
1.50 Contact Hours
1. Cori Feist, CGC, Oregon Health and Science University; 2. Stephanie Meredith, MA, University of Kentucky Human Development Institute; 3. Megan Alyse, PhD, Mayo Clinic; 4. Victoria Miller, Trisomy 18 Foundation; 5. Myra Byrd, AXYS; 6. Marsha Micheie, PhD, University of California San Francisco; 7. Lizanne Carroll, 1qg Research and Resource Group
• Provide examples of the impact of cfDNA screening on non-profit patient advocacy groups.
• Review evidence-based research identifying the most common challenges for patient advocacy groups.
• Develop strategies for support of these groups by the genetic counseling community.

Sponsored Dinner Session
6:45 PM – 8:00 PM

C17 Getting Down and Dirty with Ambry: The Truth About NGS
1. Aaron Elliott, PhD, Ambry Genetics; 2. Laura Panos-Smith, MS, CGC, Ambry Genetics
Sponsored by: Ambry Genetics

Late Breaking Plenary Session
8:30 AM – 9:30 AM

D03 The National Cancer Moonshot Initiative: A Significant Opportunity for Genetic Counselors
1.00 Contact Hour
1. L. Michelle Bennett, PhD, National Cancer Institute NIH, DHHS
• Summarize the goals of the National Cancer Moonshot Initiative
• List the findings and recommendations of the Blue Ribbon Panel (BRP).
• Identify opportunities for genetic counselor involvement in the Cancer Moonshot Initiative in the context of the BRP report.
SESSION SPEAKERS AND OBJECTIVES

**D06** Genetics and Primary Care: Preparing Primary Care Physicians for the Future of Genomic Medicine
1.50 Contact Hours
1. Jason Vassy, MD, MPH, SM, Brigham and Women’s Hospital, Harvard Medical School; 2. Carrie Lynn Blout, MS, CGC, LGC, Brigham and Women’s Hospital; 3. Michael Dougherty, PhD, American Society of Human Genetics
- Describe the current landscape of primary care physicians and their comfort with genomic medicine.
- Explore outcomes surrounding the integration of whole genome sequencing into primary care and the provision of genetic counseling by primary care physicians.
- Discuss opportunities to facilitate the integration of genomics into primary care practice.

Submitted by: NSGC Personalized Medicine SIG

**D07** It’s Not You, It’s Your Tumor: Navigating the Journey from Somatic Tumor Testing to the Genetics Clinic
1.50 Contact Hours
1. Jennifer Morrissette, PhD, Center for Personalized Diagnostics, University of Pennsylvania; 2. Dana Farengo Clark, MS, CGC, University of Pennsylvania; 3. Daniel Catenacci, MD, University of Chicago; 4. Jacquelyn Powers, MS, LCGC, University of Pennsylvania
- Examine the current landscape of next generation sequencing (NGS) tumor testing to help genetic counselors identify somatic variants that may be more suggestive of a germline finding.
- Review implementation and early outcomes of University of Pennsylvania’s patient referral process for somatic findings warranting genetic counseling and/or germline mutation testing.
- Review the University of Chicago’s framework in development for pre- and post-test informed consent and counseling for patients undergoing NGS tumor testing based upon experience gained by retrospective review and stratification of GI clinical cohort.
- Discuss case examples for when to proceed with clinical germline genetic testing for a somatic finding.

**D08** Optimizing Compensation and Professional Advancement: From Negotiating Salary, Signing Bonuses and Benefits to Developing and/or Enhancing a Career Ladder
1.50 Contact Hours
1. Angela Trepanier, MS, CGC, Wayne State University; 2. Steven Keiles, MS, LCGC, Quest Diagnostics; 3. Shannon Morill-Cornelius, MS, LCGC, Western Connecticut Health Network; 4. Catherine Reiser, MS, CGC, University of Wisconsin; 5. Kristen Shannon, MS, LGC, Massachusetts General Hospital; 6. Katherine Wusik Healy, LGC, Cincinnati Children’s Hospital Medical Center
- Recognize the opportunity that the current job market presents in terms of negotiating for better compensation and benefits and/or seeking advancement opportunities.
- Summarize strategies for negotiating for increased salary and benefits.
- Describe career ladders as a means of delineating advancement opportunities.
- Recognize the process of implementing and modifying a career ladder.
- Communicate a plan for achieving one’s own compensation and/or advancement goals.

Sponsored Lunch Session
11:45 AM – 1:00 PM

**D09** Hereditary Cancer Testing: Current and Future Challenges
1.00 Contact Hour
- Assess current challenges clinical genetic counselors face in terms of test selection, patient volume and clinical management.
- Discuss appropriate questions to ask when comparing and selecting genetic testing laboratory partners.
- Assess the emerging challenges and opportunities for genetic counselors in clinical practice.

Sponsored by: Invitae Corporation
### C04: Access and Service Delivery
- Explore novel approaches to improve genetic counseling service delivery.
- Illustrate how to use electronic tools to deliver genetics-focused education.
- Discuss varied approaches to providing genetic counseling.

### C05: Genetic/Genomic Testing I
- Explore unique challenges in providing cancer focused care.
- Analyze the impact of cancer genetic/genomic testing on patients and clinicians.
- Develop tools to address variables in cancer genetic/genomic testing.

### C06: Ethical, Legal and Social Issues
- Identify unique ramifications of genetic testing for prenatal/pediatric populations.
- Discuss the clinical uses of social media tools by genetic counselors.
- Construct perspectives on the use of self-disclosure.

### C07: Counseling: Prenatal to Pediatrics
- Explore unique challenges in providing genetic/genomic testing to prenatal and pediatric populations.
- Summarize the prenatal counseling milieu.
- Identify novel ways of addressing patients’ clinical/emotional needs.

---

**Room 606 - 607**

**9:45 AM - 10:00 AM**
- Finding the Right Mix: Optimizing the Utilization of the Genetic Counseling Skill Set
  - N. Keshavan Reddy
  - K. East

**10:00 AM - 10:15 AM**
- A Novel Approach to Lab-based Clinical Genetic Counseling
  - J. Howell

**10:15 AM - 10:30 AM**
- Custom EPIC Work Queue to Improve Insurance Coverage of Genetic Testing
  - S. Greenberg

**10:30 AM - 10:45 AM**
- Clinician Education as a Vehicle for Improving High Risk Women’s Path to Genetic Counseling: The Impact of Educational Interventions in Community Health Setting
  - J. Huang

**10:45 AM - 11:00 AM**
- Information is Powerful: Experiences from a Population Screening Initiative for Inherited Breast and Ovarian Cancer Risk
  - M. Jackson

**11:00 AM - 11:15 AM**
- Establishing a Virtual Telegenetics Clinic for Cancer Genetic Counseling: Challenges and Solutions
  - N. Keshavan Reddy

---

**Room 611 - 614**

**9:45 AM - 10:00 AM**
- We Can Work It Out: Hereditary Cancer Test Utilization Management in a Large Commercial Laboratory
  - L. Cheng

**10:00 AM - 10:15 AM**
- Does the Mutation Fit the Family? Incidental Findings from Cancer Gene Panel Testing
  - N. Brown

**10:15 AM - 10:30 AM**
- Analysis of Downstream Revenue Generated by a Hereditary Cancer Syndrome Diagnosis
  - M. Plona

**10:30 AM - 10:45 AM**
- BRCA2 Mutation Carriers May Present with Primary Brain Tumors: A Review of a Multigene Panel Testing Cohort
  - M. Jackson

**10:45 AM - 11:00 AM**
- Unexpected Findings of Germline CDH1 Mutations: Implications for Counseling Regarding Clinical Management
  - M. Fay Jacobs

**11:00 AM - 11:15 AM**
- ‘To Disclose or Not to Disclose’: An Investigation of Counselor Self-Disclosure in the Field of Genetic Counseling
  - M. Plona
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:00 PM – 1:15 PM</td>
<td>Movement of Genetic Counselors from Clinical to Non-Clinical Positions: A National Workforce Survey</td>
<td>S. Cohen</td>
</tr>
<tr>
<td>1:15 PM – 1:30 PM</td>
<td>Ask Us Anything! The National Society of Genetic Counselors Expert Media Panel Meets Reddit AMA</td>
<td>E. Ramos</td>
</tr>
<tr>
<td></td>
<td>Expansion of the Laboratory Genetic Counselors Role: Utilization of Laboratory-Based Genetic Counselors to Build Unique Patient – Specific Phenotype Panels</td>
<td>S. Everhart</td>
</tr>
<tr>
<td>1:30 PM – 1:45 PM</td>
<td>Flipping the Classroom and the Clinic: Meeting the Needs of the Expanding Genetic Counseling Workforce through Online Branching Case Studies</td>
<td>A. Cummings</td>
</tr>
<tr>
<td></td>
<td>A Single-center Experience with Clinician Interpretation of Variants in Cardiovascular Genetics Indicates Clinically Impactful Disagreement with Testing Laboratories</td>
<td>A. Bland</td>
</tr>
<tr>
<td>1:45 PM – 2:00 PM</td>
<td>Do Genetic Counseling Programs “Like” Facebook?</td>
<td>T. Lepard Tassin</td>
</tr>
<tr>
<td></td>
<td>The Current and Future Contributions of Genetic Counselors in the Field of Lifestyle Direct-to-Consumer Genetic Testing: an Exploratory Study</td>
<td>H. Green-Morfesi</td>
</tr>
<tr>
<td>2:00 PM – 2:15 PM</td>
<td>Exploring the Role of Genetic Counselors in Tumor Genomic Sequencing</td>
<td>M. Weinberg</td>
</tr>
<tr>
<td></td>
<td>Genesurance: The Mysterious Element of Genetic Counseling</td>
<td>S. Brown</td>
</tr>
<tr>
<td>2:15 PM – 2:30 PM</td>
<td>Why Do Genetic Counselors Consider Changing Jobs? A National Workforce Study</td>
<td>S. Cohen</td>
</tr>
<tr>
<td></td>
<td>Personal and Family History in Patients with High Penetration Germline Findings through Paired Tumor/Normal Sequencing</td>
<td>K. Hanson</td>
</tr>
<tr>
<td></td>
<td>Creating a Medically Actionable Genetic Screening Panel for Healthy Individuals</td>
<td>E. Haverfield</td>
</tr>
<tr>
<td></td>
<td>Effect of Photographs of Visible Genetic Conditions on Quality of Life Perceptions</td>
<td>C. Falugi</td>
</tr>
</tbody>
</table>
Integrated Genetics offers you a choice in genetic testing.

Every patient comes from a different background with a unique personal and family medical history. The better test to choose is one that, to a greater extent, matches the needs of the patient based on the complete medical history.

Reproductive Test Choices

- Inheritest® Carrier Screen including CFplus®, spinal muscular atrophy, and fragile X
- informaSeq® non-invasive prenatal test (cfDNA)
- Maternal Serum Screening – FirstScreen®, SequentialScreenSM and IntegratedScreenSM
- Prenatal Diagnostics of chromosome abnormalities
- Reveal® SNP Microarray for prenatal, post-natal, and POC specimens

Hereditary Cancer Test Choices

- BRCAssure® BRCA1/2 Testing
- VistaSeqSM Hereditary Cancer Panel

Integrated Genetics is committed to providing comprehensive care to you and your patients. To learn more about Integrated Genetics and our range of tests, please visit booth #300 in the exhibitor suite.
Integrated Genetics offers you a comprehensive range of prenatal diagnostic tests. Our tests are powered by Illumina ® technology and are designed to meet the needs of each individual patient based on their complete medical history.

Our range of tests includes:
- VistaSeq℠ Hereditary Cancer Panel
- BRCA1/2 Carrier Screen
- SNP Microarray
- Reveal Inheritest

Every patient comes from a different background with a unique personal and family history. The better test to choose is one that, to a greater extent, matches the needs of the patient.

We are committed to providing you with the best possible care and support for you and your patients. Please visit us at booth #300 in the exhibitor suite to learn more about our tests and how they can benefit your practice.

Powering Your Practice
Integrated Genetics

©2016 Laboratory Corporation of America ® Holdings. All rights reserved.
POSTERS WITH AUTHORS

A-82 Development of an iPhone application to support tracking and adherence to recommended guidelines for women with a BRCA mutation
S. Cohen

A-85 A needs assessment for the development of a hereditary breast cancer syndrome support group in Greensboro, North Carolina
K. Garbarini

A-88 Patient participation in family studies: A collection of semi-structured interviews
L. Garrett

A-91 The importance of cascade screening: Lessons learned from a family with Atypical Multiple Endocrine Neoplasia Type 1
K. Guthrie

A-94 The role of genetic counselors in education and communication about cascade testing for hereditary cancer syndromes
R. Hagen

A-97 The genetic counseling assistant: Dana-Farber’s experience in establishing a new role
C. Heydrich

A-100 Use of tumor histology to aid the identification of patients with Lynch syndrome
C. Mauer

A-103 Expanding the phenotype of DICE1 syndrome: Two years of DICE1 testing in a pediatric cancer genetics clinic
R. McGee

A-106 Improved uptake and efficiency of genetic counseling services via an embedded genetic counselor in a multidisciplinary breast cancer clinic
R. Noss

A-109 Cascade testing for hereditary cancer syndromes: Beyond Lynch and BRCA
J. Osborne

A-112 Genetic counseling for lung cancer
E. Palen

A-115 Genetic counselors and physicians play separate but important roles in cancer risk management decision making
A. Puski

A-118 Assessing clinician confidence and preferences when incorporating genomics in the pediatric oncology clinic: Insights from an institutional survey
E. Quinn

A-121 CDH1 in the era of multigene panel testing: Discrepancies between the literature and observed phenotypes for missense variant carriers
M. Roberts

A-124 Germline implications of somatic tumor profiling and the evolving role of genetic counselors in oncology: A case series
B. Rocosow

A-127 The psychosocial effects of the Li-Fraumeni syndrome and early detection program on individuals with Li-Fraumeni syndrome
J. Ross

A-130 Preliminary baseline data from the scheduling of necessary advised procedures (SNAP) for BRCA iPhone application
C. Scherr

A-133 Case report: Phenotypic expression related to a germline POLD1 mutation in a large expanded pedigree
B. Smith

A-136 A case report illustrating the utility of DNA banking, an underutilized genetic counseling strategy
K. Stoll

A-139 Incidental or not so incidental finding…that is the question: Tumor profiling leads to germline FANCA mutation identification in a male breast cancer patient
H. Vig

Cardiology

A-142 Inherited cardiomyopathies in the pediatric population: What molecular testing reveals
S. Aguilar

A-145 Clinical cardiovascular genetic counselors take a leading role in team-based variant interpretation
C. Caleshu

A-148 Uptake of presymptomatic genetic testing and cardiac screening for children at risk for an inherited arrhythmia or cardiomyopathy
S. Christian

A-151 Reportable variants in genes less commonly associated with cardiomyopathies
R. Latimer

A-154 De novo variant rate in pediatric hypertrophic cardiomyopathy
E. Miller

A-157 Assessing medical examiners’ current practices in utilizing genetic testing for autopsy-negative sudden unexpected death in the young
L. Moissiy

A-160 Numeracy and genetic knowledge’s effect on perceived recurrence risk of congenital heart defects
K. Myers

A-163 Hypertrophic cardiomyopathy genotype prediction models in a pediatric population
R. Newman

A-166 Universal screening for elevated cholesterol in children: Assessment of awareness of and adherence to guidelines among Ohio pediatricians
A. Onorato

A-169 Left ventricular noncompaction cardiomyopathy and genetic syndromes
A. Parrott

A-172 Compound heterozygous NARS2 mutations identified by whole exome sequencing in two sibs with infantile-onset mitochondrial multiorgan failure
J. Propst

A-175 Baseline knowledge of lipids and risk perception in patients with probable familial hypercholesterolemia or a previous diagnosis
A. Raper

A-178 SMAD2 associated with thoracic aortic aneurysms and dissection found on whole exome sequencing for a child with a congenital heart defect
C. Rigelsky

A-181 Prevalence and natural history of aortic root dilation in a longitudinal cohort of patients with Ehlers-Danlos syndrome
A. Ritter
<table>
<thead>
<tr>
<th>POSTERS WITH AUTHORS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Counseling/Psychosocial Issues</strong></td>
</tr>
</tbody>
</table>
| A-184 | Anticipated impact of children’s genetic test results on the parent-child relationship  
L. Bailey |
M. Bell |
| A-190 | Patient perspectives on intimate partner violence discussion during genetic counseling sessions  
C. Chen |
| A-193 | Information needs of patients and their caregivers: Utility of genetic counselors  
M. Dudek |
| A-196 | Diagnosis of X-linked intellectual disability in an adult female via exome sequencing: A collaborative diagnosis between clinician and laboratory  
S. Galasinski |
| A-199 | Attitudes toward genetic counseling and testing in patients with inherited endocrinopathies  
T. Gallagher |
| A-202 | Patient and parent experiences of dual genetic diagnoses: Neurofibromatosis Type 1 and an additional genetic disease  
H. Grandine |
| A-205 | Moderating effects of trait hope and coping styles on perceived personal control in genetic counseling  
M. Hackbardt |
| A-208 | Shared medical and psychosocial concerns among adolescents and young adults with craniofacial microsomia: A qualitative study  
K. Hamilton |
| A-211 | Alzheimer’s disease development in adults with Down syndrome: A caregiver’s perspective  
A. Ilacqua |
| A-214 | Understanding the challenges of underrepresented minority recruitment (URM) into genetic counseling: A qualitative study of URM individuals currently in the profession  
A. Kass |
| **Education** |
| A-217 | GenomeConnect participant matching system: Connecting individuals with rare diseases or genomic variants  
J. Koenig |
| A-220 | Genetic counseling for reproductive fitness in Fabry disease  
D. Laney |
| A-222 | Genetic counseling of hearing loss: Where we’ve been and where we’re going  
S. Noon |
| A-226 | The impact of treatment on reproductive decisions in Fabry disease  
S. Pass |
| A-229 | Innovative Genetic Genealogy LHON pilot program  
L. Poincenot |
| A-232 | “A closer look” – Benefits and challenges to receiving obstetric care in the workplace as a pregnant prenatal genetic counselor  
J. Rietzler |
| A-235 | The patient’s perspective: Is there a role for religious spiritual assessment in genetic counseling?  
L. Rogers |
| A-238 | The informational and emotional support needs of grandparents of children with Pompe disease  
N. Rudy |
| A-241 | Family impact of 1p36 deletion syndrome  
R. Sheikh |
| A-244 | Attitudes towards facial transplants among individuals with neurofibromatosis  
D. Singman |
| A-247 | Ramifications of neurofibromatosis on self-esteem  
D. Singman |
| A-250 | The impact of hyperphagia and food restriction on siblings of individuals with Prader-Willi syndrome  
E. Wishnisky |
| A-253 | Identifying and counseling patients amenable to mutation specific therapies in Duchenne Muscular Dystrophy: Knowledge of resources will fuel genetic counselors’ impact  
L. Bogue |
| A-256 | Incorporation of a genetics-based information module into standardized diabetes patient education  
K. Drazba |
| A-259 | Family health history communication: Cross-cultural comparison of knowledge of familial disease history  
A. Einck |
| A-262 | “If I saw this, I would feel well-informed” to “in a word, it was awful”: Evaluation of a novel educational video on pharmacogenetic testing  
M. Ensinger |
| A-265 | Development and validation of a knowledge-based questionnaire to assess comprehension of genetic counseling on advanced maternal age  
C. Garcia |
| A-268 | Online educational information of monogenic diabetes: Which websites should genetic counselors recommend?  
Y. Guan |
| A-271 | The impact of patient education on understanding of cfDNA screening among pregnant women in a general risk population: The Rhode Island experience  
E. Kloza |
| A-274 | An assessment of genetic provider and parent communication patterns in genetic counseling sessions  
N. Lahner |
| A-277 | Capitalizing on the genetic counselor role in the implementation of a lab utilization management model focused on providing education, guidelines and clinical support for non-genetic providers surrounding genetic test navigation and interpretation  
E. Leeth |
| A-280 | Factors influencing admission into genetic counseling programs  
L. Lipe |
| A-283 | Success of NIPT based on maternal weight and gestational age  
R. McCullough |
| A-286 | Knowledge and confidence of genetic counselors with state laws and training for managing the option of abortion in the setting of fetal anomalies  
S. Rhine |
POSTERS WITH AUTHORS

A-289  Cystic fibrosis-related infertility: Thoughts and experiences of men in romantic relationships  
M. Sikes

A-292  Low fetal fraction prevents detection of fetal triploidy by cell-free DNA screening  
B. Tucker

A-295  Storytelling and family communication about Type 2 diabetes in an urban Appalachian community  
K. Warsinske

Genetic/Genomic Testing

A-298  The utility of genomic variant databases in genetic counseling  
E. Brokamp

A-301  Genotype-phenotype correlation of individuals with chromosome 8p23 duplication or deletion syndromes  
C. Burden

A-304  15q overgrowth syndrome: A possible new diagnosis with the smallest reported duplication associated with an overgrowth phenotype  
J. Diaz

A-307  Novel pathogenic variant in HNRNPK identified in a female with Au-Kline syndrome  
E. Fanning

A-310  Genetic counselor consent reduces ancestry-related differences in choice to receive secondary findings in a large-scale genomic sequencing study  
K. Fiallos

A-313  Experiences of exome sequencing in newborns: A peek into BabySeq  
C. Genetti

A-316  Further clinical delineation of PACS1-Related syndrome: A recurrent de novo pathogenic variant  
J. Hoffman

A-319  Further evidence of a likely pathogenic variant in TWIST1 as causative of Saethre-Chotzen syndrome  
C. Hollinger

A-322  A comparison of self-reported ethnicity and genetic ancestry  
K. Kasenit

A-325  Keeping somatic mosaicism in the differential: The diagnosis of Schimppenning-Feuerstein-Mims syndrome through skin biopsy  
L. Kehoe

A-328  MAP3K1 mutations are a common cause of 46, XY gonadal dysgenesis  
L. Mohnach

A-331  Regions of homozygosity: Implications on testing and counseling strategies  
R. Mostafavi

A-334  Decreasing healthcare costs: Turnaround time reduction  
M. Nelson

A-337  Secondary findings in trio family members of probands undergoing diagnostic exome sequencing  
Z. Powis

A-340  Continued coverage and reimbursement challenges for diagnostic exome sequencing after 5 years, genetic counselors can help to overturn denied cases  
Z. Powis

A-343  Navigating neurometabolic disorders: Uncovering a rare X-linked recessive disorder in a heterozygote female  
C. Rajakaruna

A-346  Diagnostic yield of genetic testing at the Children’s Hospital Colorado autism genetics clinic  
H. Raszka

A-349  Development of a test quality assessment tool: A professional resource for genetic counselors  
J. Riley

A-352  Facilitating human disease gene discovery through intersection of chromosomal microarray and whole exome sequencing data  
J. Rosenfeld

A-355  Pediatrician practice regarding the genetic evaluation of children with autism spectrum disorder  
A. Rutz

A-358  Association of airway abnormalities with 22q11.2 deletion syndrome  
R. Sacca

A-361  Whole exome sequencing identifies a pathogenic variant in TSC1 in a father and son without typical findings of Tuberous Sclerosis Complex  
A. Schreiber

A-364  Novel finding of complete paternal uniparental isodisomy 4 in a girl with a complex congenital heart defect and bilateral optic nerve hypoplasia  
A. Shealy

A-367  Parental understanding of whole exome sequencing: A comparison of perceived and actual understanding  
L. Tolusso

A-370  Use of next-generation sequencing to diagnose concomitant hemolytic anemia in children with sickle cell disease  
E. Varga

A-373  De novo deletion of GATAD2B putative regulatory region associated with clinical features consistent with GATAD2B haploinsufficiency  
K. Wain

A-376  Sequencing the coding exon of GJB2 may be a better testing strategy for familial cases of autosomal recessive nonsyndromic hearing loss: A case report  
E. Wakefield

A-379  Test utilization and the role of genetic counseling in pediatric hematology at a tertiary care center  
K. Zajo

A-382  Genetic test utilization management: Trends of decreasing costs of genetic test orders  
L. Zetzsche

THURSDAY POSTERS

Access/Service Delivery

B-2  Utility of a patient-facing family health history assessment tool to refer patients for genetic evaluation  
L. Baumgart

B-5  Genetic testing for hereditary cancer predisposition: When can a targeted discussion with a non-genetics clinician provide adequate consent?  
A. Buchanan

B-8  Attitudes about the use of internet support groups and the impact among parents of children with Cornelia de Lange syndrome  
C. Cacioppo
POSTERS WITH AUTHORS

B-11 Video-assisted genetic counseling in patients with ovarian, fallopian and peritoneal cancer
   R. Covington

B-14 Utilizing contracted telephone genetic counseling services within an established cancer genetic counseling clinic: Benefits and drawbacks
   D. Cox

B-17 Establishing a multidisciplinary hereditary cancer risk management clinic
   A. Forsha

B-20 Client perspectives on the utilization of genetic services in a community-based hereditary cancer screening program
   S. Greenberg

B-23 Referral of triple negative breast cancer patients to cancer genetics services in the community setting
   J. Handy

B-26 Increasing genetic counseling referral among gyn oncology registry patients meeting NCCN guideline criteria: A collaborative approach
   K. Huelsman

Cancer

B-29 Why is cancer genetic counseling underutilized by women identified as at risk for hereditary breast cancer? Patient perceptions of barriers following a referral letter
   A. Kne, BS

B-32 Development and implementation of breast and ovarian cancer test criteria for a next generation sequencing panel within a large health maintenance organization
   C. Kobelka

B-35 Attitudes towards interpretation services provided to underserved patients during cancer genetic counseling sessions in the public hospital setting: Perspectives from genetic counselors and interpreters abstract
   K. Lara-Otero

B-38 Clinical cancer genetic testing in Singapore: A single-institution experience
   S. Li

B-41 Health information technology in clinical genetic counseling: A multi-specialty survey project
   W. Mendonca

B-44 Prenatal testing in pregnancies established through in vitro fertilization in the era of noninvasive prenatal testing
   L. Palange

B-47 Use of technology solutions increases efficiency of genetic counseling for hereditary cancer
   L. Servais

B-50 Genetic counseling clinic: Expanding genetic services to the pediatric population
   K. Siefas

B-53 Who are the cardiologists early to adopt integration of genetic counselors into clinical practice?
   K. Spoonamore

B-56 Factors associated with breadth of multigene panel testing selected by patients at risk of hereditary breast and ovarian cancer syndrome: A cohort study
   J. Szender

B-59 Navigating underinsured women from mammography to genetic counseling: Challenges and possibilities
   E. Watson

B-65 Factors influencing uptake of risk-reducing salpingo-oophorectomy by BRCA1 and BRCA2 mutation carriers
   V. Breen

B-68 Factors predicting BRCA1 and BRCA2 mutation carriers’ preference for communication of risk estimates
   S. Crowdes

B-71 Favorable psychosocial outcomes in high or moderate risk mutation carriers identified by hereditary cancer panel testing
   J. Culver

B-74 The importance of discussing lifestyle risk factors in cancer genetic counseling
   V. Dickens

B-77 Unaffected women’s decisions to have prophylactic risk-reducing mastectomies
   S. Galloway

B-80 Single nucleotide polymorphism (SNP) testing in breast cancer risk (BCR) assessment: Patient interest, knowledge and education
   C. Heydrich

B-83 Oncologists’ awareness, understanding and usage of germline NGS-based multigene panel tests for heritable cancer susceptibility in patients and their families
   C. Kurpad

B-86 Pre-test genetic counseling as a requirement for germline hereditary cancer testing: What do patients do?
   G. Lazarin

B-89 Genetic counseling complexities of CHEK2 positivity: Medical management implications for patients and families
   C. Lewis

B-92 Endometrial cancer risk perception in women diagnosed with Lynch syndrome
   M. Lubaton

B-95 Patient-reported clinical outcomes and personal perspectives after risk reducing surgery
   C. Mauer

B-98 Unexpected CDH1 mutations in probands with non-lobular breast cancer
   S. Rao

B-101 Lynch syndrome phenocopy identified by novel tumor/normal technique for identifying sporadic mutations
   M. Rashkin

B-104 Through the eyes of the patient: Understanding variants of uncertain significance in the era of multi-gene panels
   C. Reuter

B-110 Penetration of a rare familial gene predisposing to papillary thyroid cancer
   D. Saporito

B-113 A “second class status”: The experience of men with BRCA mutations
   A. Suttman
POSTERS WITH AUTHORS

Cardiology

B-122 Significance of family history in amyloidosis subtyping  
E. Brown

B-125 Athletic adults with hypertrophic cardiomyopathy have difficulty adapting to exercise recommendations  
C. Caleshu

B-128 Expanding the phenotype in patients with TGFβ-pathway disorders including arterial beds affected: Experience of a tertiary care center  
D. Clements

B-131 Examining psychological outcomes associated with genetic testing for primary arrhythmic disorders in adult patients  
S. Colaiacovo

B-134 The impact of a long QT syndrome diagnosis on competitive athletes’ psychological processes  
B. DeGreef

B-137 The pediatric arrhythmia clinic: Identifying and addressing demand for genetic counseling and genetic services  
B. Helm

B-140 How do carriers of Barth syndrome navigate reproductive options? An example of hidden fault lines for patient-based support organizations  
C. James

B-143 Psychosocial concerns of patients with dilated cardiomyopathy  
A. McFaddin

B-146 Assessing the perceived utility of a web-based educational video in hypertrophic cardiomyopathy patients for the dissemination of familial risk information and screening recommendations  
C. Neumann

B-149 Truncating titin variant in infantile-onset dilated cardiomyopathy: A case report and related counseling challenges  
B. Psensky

B-152 Left ventricular outflow tract obstructions: Parental knowledge and uptake of familial cardiac screening  
A. Shikany

B-155 Evolving decisions about exercise among athletes with inherited heart disease who exercise against recommendations  
T. Subas

B-158 Thinking outside the A-band: Segregation of TTN truncating variants  
H. Taylor

Counseling/Psychosocial Issues

B-161 Whole exome sequencing following the finding of multiple skeletal anomalies on prenatal ultrasound  
L. Aptekar

B-164 Secondary findings: Counseling and clinical implications following identification of microdeletions and microduplications during preimplantation genetic diagnosis  
R. Cabey

B-167 Parental quality of life of Tyrosinemia Type I  
H. Campbell

B-170 A psychologic survey of women and men who received a prenatal diagnosis of anencephaly: The impact of genetic counseling and patient recommendations  
H. Cope

B-173 NIPT failure due to low fetal fraction: Redraw success and patient decision making in an urban population  
M. Crawley

B-176 Pronounced micrognathia and other anomalies in a pregnancy with an unbalanced pericentric inversion 46,XX,der(8)del(8)(p23)dup(8)(q21)  
M. Discenza

B-179 Clinical utility of expanded carrier screening: Reproductive behaviors of at-risk couples  
C. Ghiossi

B-182 The benefit of genetic counseling in the preimplantation genetic screening decision  
J. Isaac

B-185 Women’s experiences with receiving the news of an abnormal prenatal ultrasound  
B. Madden

B-188 Maternal age and pregnancy loss: It’s not all about the trisomies  
M. Maisenbacher

B-191 Factors associated with burnout in clinical genetic counselors  
D. Martiniuc

B-194 Decisions and understanding of noninvasive prenatal testing in a county hospital population  
V. Mathur

B-197 Genetic counseling outcomes and experiences with clinical whole genome sequencing in a healthy population  
M. McGinniss

B-200 The importance of a genetic counselor as a team member in any tertiary care (fetal medicine) center  
M. Menzel

B-203 Decision-making surrounding the use of preimplantation genetic diagnosis in couples at-risk for cystic fibrosis and spinal muscular atrophy  
K. Miller

B-206 Establishing a comprehensive genetic counseling service for patients with inherited and acquired pediatric bone marrow failure  
K. Schneider

B-209 Managing couple conflict during prenatal counseling sessions: An investigation of genetic counselor experiences and perceptions  
K. Schoeffel

B-212 The addition of 22q11.2 deletion syndrome to NIPT: Clinical utility and patient decision making  
S. To

B-215 Attitudes towards prenatal genetics among Southeast and East Asian women: A qualitative pilot study  
G. Tsai

B-218 Duchenne Muscular Dystrophy population carrier screening outcomes in the U.S.  
J. Wallace
<table>
<thead>
<tr>
<th>Poster Number</th>
<th>Title</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>B-221</td>
<td>The frequency of incidental findings in expanded carrier screening</td>
<td>K. Wong</td>
</tr>
<tr>
<td>B-244</td>
<td>Genetic testing and life insurance: A Canadian perspective</td>
<td>A. Bedard</td>
</tr>
<tr>
<td>B-227</td>
<td>A taxonomy of medical uncertainties in genome sequencing</td>
<td>B. Biesecker</td>
</tr>
<tr>
<td>B-233</td>
<td>Bias in genetic counseling: Where does it really live?</td>
<td>U. Canteenwalla</td>
</tr>
<tr>
<td>B-236</td>
<td>An assessment of the mitochondrial disease community’s knowledge and perception of the “three-person baby,” or mitochondrial replacement therapy, and the impact of the media debate that surrounds this technique</td>
<td>A. Fiss</td>
</tr>
<tr>
<td>B-239</td>
<td>Physicians’ experiences with and attitudes toward non-medical sex selection through preimplantation genetic diagnosis</td>
<td>N. Harkavy</td>
</tr>
<tr>
<td>B-242</td>
<td>Gestational surrogacy: Decision making regarding prenatal testing and genetic counseling</td>
<td>S. Malca</td>
</tr>
<tr>
<td>B-245</td>
<td>NIPT results concerning for maternal neoplasm: Consideration of uterine fibroids</td>
<td>L. Murphy</td>
</tr>
<tr>
<td>B-248</td>
<td>Development of a consent resource for genomic data sharing in the clinical setting</td>
<td>E. Riggs</td>
</tr>
<tr>
<td>B-251</td>
<td>All in the family: The benefit of reporting carrier results in the pediatric population</td>
<td>J. Schuette</td>
</tr>
<tr>
<td>B-254</td>
<td>Participant perspectives on return of genetic research results in an ethnically diverse biobank</td>
<td>N. Zeid</td>
</tr>
<tr>
<td>B-257</td>
<td>Outside the lines: Detection rate of chromosomal microarray in individuals without a 'guideline' indication for testing</td>
<td>A. Baxter</td>
</tr>
<tr>
<td>B-260</td>
<td>The utility of multi-gene sequencing in the diagnosis of congenital myasthenia and related neuromuscular disorders</td>
<td>K. Beattie</td>
</tr>
<tr>
<td>B-263</td>
<td>An individual with BRIP1 and DICER1 pathogenic mutations identified by whole exome sequencing trio analysis and multi-gene hereditary cancer panel testing: A case report</td>
<td>M. Blundell</td>
</tr>
<tr>
<td>B-266</td>
<td>Variant classification in an unaffected population, an example from expanded carrier screening and a comparison to ClinVar classifications</td>
<td>S. Candille</td>
</tr>
<tr>
<td>B-269</td>
<td>Direct-to-consumer return of genetic risk information for venous thromboembolism: Consumer interest and impact on health behaviors in the Impact of Personal Genomics (PGen) Study</td>
<td>E. Cousins</td>
</tr>
<tr>
<td>B-272</td>
<td>What counts? The role of numeracy in objective and effective risk interpretations after receiving a personalized genomic risk vignette</td>
<td>K. Davis</td>
</tr>
<tr>
<td>B-275</td>
<td>The impact of numeracy on genetic self-efficacy after receiving a personalized genomic risk vignette</td>
<td>K. Davis</td>
</tr>
<tr>
<td>B-278</td>
<td>Reclassification of a sequence variant from pathogenic mutation to variant of uncertain significance in a family with familial thoracic aortic aneurysm and dissection</td>
<td>H. Douglas</td>
</tr>
<tr>
<td>B-281</td>
<td>WES testing in families with high kinship coefficients: WES trio is more effective than focused regions of homozygosity analysis</td>
<td>L. Folk</td>
</tr>
<tr>
<td>B-284</td>
<td>Expanding the phenotype of 2p11.2-p12 deletion syndrome: A case report</td>
<td>L. Fuqua</td>
</tr>
<tr>
<td>B-287</td>
<td>Maternal age effect on euploid rates for reciprocal translocation carriers</td>
<td>J. Klavanian</td>
</tr>
<tr>
<td>B-290</td>
<td>Mammalian species conservation data and the implication for clinical variant classification</td>
<td>Y. Kobayashi</td>
</tr>
<tr>
<td>B-293</td>
<td>Exome sequencing in fetuses with abnormal ultrasound findings leading to demise or termination</td>
<td>C. Kucera</td>
</tr>
<tr>
<td>B-296</td>
<td>Efficacy of custom targeted gene lists as compared to whole exome sequencing</td>
<td>K. Levine</td>
</tr>
<tr>
<td>B-299</td>
<td>A retrospective review of family studies in reclassifying variants of unknown significance detected in cardiomyopathy multigene panels</td>
<td>I. Lu</td>
</tr>
<tr>
<td>B-302</td>
<td>Cystic fibrosis screening in the Asian population: What standard panels miss</td>
<td>C. Marks</td>
</tr>
<tr>
<td>B-305</td>
<td>Increase in diagnostic yield and detection rates of exome-based testing using complementary NGS platforms</td>
<td>B. Parks</td>
</tr>
<tr>
<td>B-308</td>
<td>Population-wide genetic testing in the adult population: What are people saying?</td>
<td>D. Samad</td>
</tr>
<tr>
<td>B-311</td>
<td>Factors that influence the completion of predictive testing for Huntington’s disease</td>
<td>D. Schippman</td>
</tr>
<tr>
<td>B-314</td>
<td>Usher syndrome: Phenotypic characterization by type</td>
<td>D. Schlegel</td>
</tr>
<tr>
<td>B-317</td>
<td>Beyond clinical actionability: Minnesota residents’ perceptions of important actions in response to genetic testing results</td>
<td>D. Seiffert</td>
</tr>
<tr>
<td>B-320</td>
<td>Trio-based whole exome sequencing: An effective diagnostic tool for patients with microcephaly</td>
<td>A. Shanmugham</td>
</tr>
<tr>
<td>B-323</td>
<td>An exploration of genetic counselors’ personal decisions regarding genetic counseling and genetic testing</td>
<td>N. Sutherland</td>
</tr>
</tbody>
</table>
# POSTERS WITH AUTHORS

**B-326** Genetic screening practices for oocyte donors in the United States  
G. VanNoy

**B-329** When negative turns positive: The experience of diagnostic exomes that were initially non-diagnostic  
A. Wadley

**B-332** USH2A copy number variants in patients with heterozygous USH2A sequence variants  
B. Williams

**B-335** Novel hypomorphic RAG2 variants in an adult with progressive myopathy and CVID  
K. Wold

## Professional Issues

**B-338** Harnessing the potential of online and blended learning in graduate education programs  
K. Anderson

**B-341** Attitudes of veterans with PTSD toward a model used in psychiatric genetic counseling  
J. Anderson

**B-344** Nationwide genetic counseling programs: Challenges associated with disparate state laws  
K. Anderson

**B-347** “If it helps, it’s worth a try”: An investigation of perceptions and attitudes about genetic counseling among southern Manitoba Hutterites  
A. Gemmell

**B-350** Efficacy of antisense oligonucleotides in reducing Purkinje cell ataxin 1 RNA levels  
H. Handler

**B-353** Genetic counseling for alcohol use disorder: An assessment of need in affected and at-risk populations  
F. Kalb

**B-356** Perceptions of psychiatric genetic counseling in the mental health community: An exploratory study  
N. Lemiski

**B-359** Facilitating discussions about the psychiatric phenotypes of 22q11.2 deletion syndrome  
J. Lent

**B-362** The utility of non-traditional rotations in genetic counselor training  
A. Markase

**B-365** Changing with the times: How prepared do genetic counselors feel for non-clinical roles?  
A. Narravula

**B-368** Familial intracranial aneurysm: The prevalence and screening recommendations of one institution  
K. Qualmann

**B-371** Career advising about genetic counseling: A look at the current state of familiarity undergraduate career advisors have with genetic counseling  
C. Rogers

**B-374** An examination of the factors contributing to the expansion of subspecialty genetic counseling  
V. Roth

**B-377** One family, two distinct brain malformation disorders with different modes of inheritance  
D. Stolar

**B-380** Implementing compassion fatigue screening in genetic counseling practice  
K. Wusik

## FRIDAY POSTERS

### Access/Service Delivery

**C-3** The utility of nondirective and directive counseling styles in clinical practice from the perspective of certified genetic counselors  
A. Bansal

**C-6** EpiGC: A collaborative approach to an emerging professional and clinical need  
A. Bergner

**C-9** Establishing a committee to ensure appropriate utilization and standard provision of clinical exome sequencing at a pediatric tertiary care center  
J. Conta

**C-12** Overcoming challenges to provide genetics services in a county hospital system  
D. Erwin

**C-15** Genetic counselor referrals to hospital chaplains  
A. Gregory

**C-18** Additional skills required: Lessons learned through teaching telehealth  
M. Hardy

**C-21** Establishing a model for clinical exome sequencing (CES) coordination and pre-test counseling to ensure standard delivery of CES at a pediatric tertiary care center  
E. Hendricks

**C-24** The unique role of pediatric genetic counselors in a fetal health center  
J. Kussmann

**C-27** Are visual aids helpful in genetic telecounseling?: A case-control study  
J. Miller

**C-30** Interdisciplinary team approach as the ideal model for care of individuals with disorders of sex development  
L. Mohnach

**C-33** The value of a genetic diagnosis as perceived by intersex adults  
T. Moscarello

**C-36** When mating is not so random: Coupling patterns across ethnicities in the U.S. population  
S. Nazareth

**C-39** Cost of genetic screening influences patient decision making when weighing options of prenatal screening  
L. Otto

**C-42** Piloting a community genomics initiative using blood banks for recruitment and data collection  
E. Ramos

**C-45** Genotype-first genetic counseling: How general population genome screening has the potential to turn traditional genetics service models upside-down  
M. Schwartz

**C-48** When to take a family history: Assessing impact on genetic counseling outcomes  
C. Slomp

**C-51** Genetic counselors’ perspective on the impact of Spanish-speaking interpreter-mediated sessions  
R. Veazey

**C-54** Difficult discussions: DNA banking  
C. Zaleski
POSTERS WITH AUTHORS

Cancer

C-57  Assessing the possibility of RUNX1 related germline predisposition in myeloid neoplasms in a somatic cancer setting  
K. Barber

C-60  Characterizing the clinical cancer presentation of individuals with pathogenic variants in FANCC  
J. Bissonnette

C-63  Mosaic variants in hereditary cancer genes identified on next generation sequencing panels  
J. Bissonnette

C-66  Impact of FDA approval of PARP inhibitor treatment on genetic counseling and testing practices for ovarian cancer patients  
K. Buchtel

C-69  Novel large rearrangement of RAD51D in an ovarian and breast cancer family  
B. Burnett

C-72  Assessing VHL p.Pro81Leu- A low penetrance, pheo-predominant variant?  
K. Ditzell

C-75  Types and frequencies of Lynch syndrome mutations identified through multigene panel testing  
C. Espenschied

C-78  Breast and colorectal cancer risk in monoallelic MUTYH carriers ascertained via multigene panel testing  
K. Fulk

C-81  Evaluation of two risk prediction models for patients with endometrial cancer seen in a hereditary cancer clinic  
C. Garby Haskins

C-84  Design and enhanced validation of a 36-gene guideline-compliant inherited cancer panel  
G. Gould

C-87  Suspected germline variants in snapshot NGS tumor genotyping and genetic counseling implications  
K. Gravelin

C-90  Lost in translation: How medical interpreters modify the communication of whole exome sequencing results during translation for Spanish-speaking families  
A. Gutierrez

C-93  BRCA1/2 breast and ovarian cancer risks by variant location  
S. Hiraki

C-96  When the family history leads you astray: A case report  
J. Humanski

C-99  Unknown synergistic effect of digenetic inheritance of MMR pathogenic mutations: Double heterozygosity in Lynch syndrome, a single case report and family study  
A. Jacquart

C-102  Confirmation of tumor biomarker results in the germline  
M. Marshall

C-105  Outcomes of next-generation panel testing in adolescents and young adults with colorectal cancer  
M. Mork

C-108  Panel testing reveals presence of likely pathogenic variants in CDH1 in two probands with personal and/or family history of breast cancer. Subsequent gastrectomy confirms the presence of a diffuse gastric tumor in one of the unaffected probands  
F. Oh

C-111  Multigene panels in prostate cancer patients with familial risk: Unexpectedly high mutation rates in non-BRCA genes  
C. Radford

C-114  Identification of patients for genetic follow-up: Results from tumor gene profiles  
B. Reys

C-117  Average age of diagnosis of ovarian cancer for women with pathogenic variants in BRIP1, RAD51C and RAD51D  
S. San Roman

C-120  Variant rate by panel type across testing laboratories  
A. Schmidt

C-123  Ancestry-based cancer risks associated with APC 11307K  
L. Sharma

C-126  Fanconi Anemia (FA) type solid tumors in FA heterozygotes identified via inherited cancer gene testing  
A. Stettner

C-129  All in the family: A first look at outcomes when multiple relatives undergo multi-gene panel testing  
M. Umali

Counseling/PSychosocial Issues

C-132  Are genetic counselors screening for adolescent suicide risk? A mixed-methods study  
C. Anderson

C-135  Parental experience of divulging a diagnosis of Fragile X syndrome to their affected child  
B. Athens

C-138  The implementation of whole exome and genome sequencing based on genetic counseling specialty  
A. Blesson

C-141  Adolescent decision-making regarding secondary findings in whole genome sequencing  
R. Byrne

C-144  From a trio to a duo: Non-paternity identified through diagnostic exome sequencing  
T. Cain

C-147  Diagnosis of Fragile X syndrome: A pre- and post-diagnosis comparison of carrier mothers’ emotional and support experiences  
A. Catchings

C-150  Patient preferences for recontact and their monitoring coping style following BRCA mutation testing  
R. Dahle

C-153  A unique case of Down syndrome caused by nonmosaic Y;21 translocation  
J. Foster

C-156  The psychosocial impact of diagnosis on caregivers of children with 3q29 deletion syndrome  
M. Glassford

C-159  Communication predictors of patient and companion satisfaction with Alzheimer’s disease genetic risk disclosure sessions  
Y. Guan

C-162  Nationwide newborn screening program for mucopolysaccharidoses in Taiwan: Confirmatory diagnosis and genetic counseling  
Y. Huang

C-165  A Delphi survey of personal utility  
J. Kohler
Genetic/Genomic Testing

C-168 Direct and indirect non-disclosure preimplantation genetic diagnosis for Huntington’s disease
A. Machaj

C-171 The needs and expectations of parents of children with rare conditions that are undergoing whole exome sequencing
J. Malcolmson

C-174 Discussing reproductive implications of exome sequencing findings with adolescents and their parents
R. Mueller

C-177 Unknown consanguinity reveals homozygous CLCN7 mutations previously reported with autosomal dominant Osteopetrosis Type II: A case report
R. Nuccio

C-180 Paternal adaptation to a child’s diagnosis of Down syndrome: Predictors of personal well-being and family quality of life
M. Oliver

C-183 Understanding the psychological impact of pediatric whole exome sequencing results on parents
R. Rabin

C-186 The undiagnosed patient and the diagnostic odyssey: Current genetic counseling practices and perspectives
A. Wardyn

C-189 Comparing the clinical yield of carrier screening: Genotyping versus exon sequencing
K. Beauchamp

C-192 Intermediate FMR1 CGG repeat sizes (35-54) may also contribute to fertility issues in women with potential premature ovarian insufficiency
T. Carter

C-195 A clinical perspective of sex chromosome abnormality screening via cell-free DNA
S. Detweiler

C-198 Indications associated with a prenatal diagnosis of Beckwith-Wiedemann syndrome
J. Ebrahimzadeh

C-201 NIPT results indicative of maternal neoplasms: Genetic counselors’ awareness, preferences and attitudes
M. Giles

C-204 Lessons learned from a genome-scale carrier screening study: Implications for research and practice
M. Gilmore

C-207 How positive is your prediction? Computing confidence intervals on positive predictive value for non-invasive prenatal screening
I. Haque

C-210 What we are learning from studying balanced chromosome rearrangements at the nucleotide level
T. Kammin

C-213 A case of inherited copy number variant as explanation for multiple monosomies detected on NIPT
N. Krstic

C-216 Two cases of complete hydatidiform mole with coexisting live fetus identified by SNP-based cfDNA screen
N. Krstic

C-219 Preimplantation genetic diagnosis for maternally derived de novo mutation in the dystrophin gene (D,D)
A. Machaj

C-222 Partial 3q tetrasomy in an affected male fetus implicates dosage effect with an atypical lower urinary tract obstruction
S. Mulligan

C-225 Maximizing accuracy, clinical utility and patient experience of noninvasive prenatal screening via dynamic iterative depth optimization
D. Muzzey

C-228 1q21.2 microdeletion: An underreported cause of Nager syndrome?
S. Nassef

C-231 Should professional societies reconsider population-based carrier screening for Fragile X syndrome? A clinical testing laboratory’s experience
K. Owens

C-234 Non-invasive prenatal screening: Everyone wants it, who’s actually getting it?
N. Paolino

C-237 Fetal diagnosis of autosomal recessive primary microcephaly: A case for continued expansion of prenatal genetic testing
K. Patek

C-240 Prenatal testing for Noonan syndrome and related disorders: Data review and analysis
D. Wilson Mathews

C-243 Patient perception of residual risk post negative non-invasive prenatal testing
T. Wittman

C-246 Genetic testing for 46,XY disorders of sex development in a prenatal setting
A. wray

C-249 “Ashkenazi Jewish” conditions found in non-Jewish individuals
S. Yarnall

C-252 Clinician views on expanded newborn screening using whole genome sequencing
C. Young

Pediatrics

C-255 The association of functional disability and pain catastrophizing with healthcare utilization among individuals with Ehlers-Danlos syndrome hypermobility Type K. Barfiwala

C-258 A complex X chromosome rearrangement in a female with tall stature and absent menses
A. Essendrup

C-261 Hypocalcemia and full scale IQ in 22q11.2 deletion syndrome
K. Grand

C-264 CHARGE Syndrome Clinical Database Project: ENT findings are common and affect development
M. Hefner

C-267 CHARGE syndrome: The importance of inner ear MRI and CDH7 testing for diagnosis as the dysmorphology is not always obvious
M. Hefner

C-270 Disorders for inclusion in newborn screening: Health care providers’ preferences
H. Peay

C-273 Congenital anomalies in infants of diabetic mothers: A silent epidemic
S. Ramanathan
### Posters with Authors

<table>
<thead>
<tr>
<th>Poster</th>
<th>Title</th>
<th>Author(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>C-276</td>
<td>Reflections on the current state of healthcare transition for young adult women with Turner syndrome: Strategies for facilitating autonomy and self-management</td>
<td>M. Snyder</td>
</tr>
<tr>
<td>C-279</td>
<td>No difference in health related quality of life between therapeutic options for Type 1 Gaucher disease</td>
<td>V. Wagner</td>
</tr>
<tr>
<td>C-282</td>
<td>Using the Sanfilippo syndrome registry to find the patients for natural history studies and clinical trials</td>
<td>J. Wood</td>
</tr>
<tr>
<td>C-288</td>
<td>Expanding the phenotype of Oculofaciocardiodental syndrome: Report of two patients with novel retinal findings</td>
<td>K. Zegar</td>
</tr>
<tr>
<td>C-289</td>
<td>Certified nurse midwives’ experiences with prenatal genetic screening</td>
<td>S. Dettwyler</td>
</tr>
<tr>
<td>C-291</td>
<td>Genetic counseling for preimplantation genetic screening</td>
<td>L. Dobson</td>
</tr>
<tr>
<td>C-292</td>
<td>Prenatal carrier screening acceptance rates in adopted individuals</td>
<td>K. Fissell</td>
</tr>
<tr>
<td>C-295</td>
<td>“What’s in a name?” An assessment of knowledge about reproductive technology among young adults at risk for Huntington’s disease</td>
<td>L. Carrion</td>
</tr>
<tr>
<td>C-296</td>
<td>Should genetic counselors have a well-defined role on a multidisciplinary perinatal palliative care team? Literature review and discussion of an opportunity to capitalize on a unique area of advancement for the field of genetic counseling</td>
<td>M. Jones</td>
</tr>
<tr>
<td>C-297</td>
<td>Maternal sickle cell disease may increase risk for cell free DNA based aneuploidy screening failure</td>
<td>K. Levandoski</td>
</tr>
<tr>
<td>C-298</td>
<td>Stress, anxiety and adaptation to genetic information: Parental experiences receiving a prenatal diagnosis of Klinefelter syndrome</td>
<td>K. Lewis Widmeyer</td>
</tr>
<tr>
<td>C-301</td>
<td>Discordant prenatal cell-free DNA screening results: A consideration of maternal and fetal incidental findings</td>
<td>M. Maxwell</td>
</tr>
<tr>
<td>C-302</td>
<td>Obstetric providers’ experience with, interpretation of, and communication of NIPS test results</td>
<td>P. Sawla</td>
</tr>
<tr>
<td>C-303</td>
<td>The Kate Cares Stillbirth Assessment Program: A reevaluation utilizing SCRN assessment guidelines</td>
<td>H. Schuster</td>
</tr>
<tr>
<td>C-304</td>
<td>Genetic counselors’ knowledge of and assessment for eating disorders in a prenatal setting</td>
<td>K. Sesock</td>
</tr>
<tr>
<td>C-305</td>
<td>The changing landscape of prenatal testing: Certified nurse midwives’ integration of NIPT into practice</td>
<td>L. Weingarten</td>
</tr>
<tr>
<td>C-306</td>
<td>An assessment of expansion in Fragile X syndrome premutation carriers undergoing preimplantation genetic diagnosis and an exploration of psychosocial implications</td>
<td>N. Williams</td>
</tr>
<tr>
<td>C-307</td>
<td>Characterizing pediatric narcolepsy: Family history and familial autoimmunity</td>
<td>L. Carrion</td>
</tr>
<tr>
<td>C-308</td>
<td>Facing the challenge of genetic counselors’ need for education about genomic technologies: Opportunities for improvement in training for genetic counselors</td>
<td>K. Banks</td>
</tr>
<tr>
<td>C-309</td>
<td>Connecting on Twitter to expand our reach: An analysis of the genetic counseling hashtag, #GCChat</td>
<td>L. Bucheit</td>
</tr>
<tr>
<td>C-310</td>
<td>High frequency of mosaicism in genes associated with epilepsy and neurodevelopmental disorders</td>
<td>E. Butler</td>
</tr>
<tr>
<td>C-311</td>
<td>Referrals to mental health services: Exploring the referral process in genetic counseling</td>
<td>M. Cunningham</td>
</tr>
<tr>
<td>C-312</td>
<td>Establishing a combined clinical and laboratory genetic counseling student rotation: The Seattle Children’s Hospital experience</td>
<td>K. Golden-Grant</td>
</tr>
<tr>
<td>C-313</td>
<td>Adaptation of the G.I.F.T. technique as a tool for qualitative program evaluation</td>
<td>C. Guy</td>
</tr>
<tr>
<td>C-314</td>
<td>The contribution of the rs55705857 G allele to familial cancer risk using the Utah population database</td>
<td>S. Hummel</td>
</tr>
<tr>
<td>C-315</td>
<td>To be a clinical or non-clinical genetic counselor, that is the question</td>
<td>S. Liberman</td>
</tr>
<tr>
<td>C-316</td>
<td>The prevalence of asymptomatic focal cortical dysplasia and predictors of epilepsy severity in a pediatric cohort</td>
<td>L. Maynard</td>
</tr>
<tr>
<td>C-317</td>
<td>Application of genetic counseling graduate training to job responsibilities for entry-level, non-clinical genetic counselors</td>
<td>S. Naibandian</td>
</tr>
<tr>
<td>C-318</td>
<td>X-linked Mohr-Tranebjaerg syndrome: Variable phenotype in females</td>
<td>H. Newman</td>
</tr>
<tr>
<td>C-319</td>
<td>What is a laboratory genetic counselor? The GeneDx experience</td>
<td>J. Nieto</td>
</tr>
<tr>
<td>C-320</td>
<td>A recurrent GABRG2 variant associated with early-onset seizures, intellectual disability, motor and speech delays, and hypotonia</td>
<td>L. Schmidt</td>
</tr>
<tr>
<td>C-321</td>
<td>A case of presumed RYR1 myopathy in a neonate and subsequent genetic counseling</td>
<td>C. Siskind</td>
</tr>
</tbody>
</table>

### Professional Issues
Vendor-sponsored presentations are 30-minute presentations given by select vendors in the Vendor Theater located in the AEConnect area of the Exhibitor Suite. These presentations are a great way to learn more about new products and services. Make the most of your time in the Exhibitor Suite by attending one of the following presentations:

**Wednesday, September 28**

**6:15 PM – 6:45 PM**

**CancerIQ**

Three Ways to Improve your Clinical Impact Through Technology
Andrea Downing, Business Development, CancerIQ
Technology today cannot only enable clinical teams to preempt and predict an individual’s risk of developing cancer, but also actively engage with patients at every stage of the process to actually promote preventative care. With all the new tools available to automate cancer risk assessment, how can technology help genetic counselors to deliver a better clinical impact? Join moderator Andrea Downing and our panel of genetic counselors who are changing the way preventative cancer care is being delivered using CancerIQ. The panelists will discuss three practical ways to improve the impact of genetic counseling using technology.

7:00 PM – 7:30 PM

**Prevention Genetics**

Difficult Discussions Surrounding DNA Banking
Christina Zaleski, MS, CGC
By combining clinical counseling experiences with patient feedback, we’ve developed some tips and conversational tools to enhance genetic counseling discussions on DNA banking, which often occur in difficult situations. Our hope is that this session will empower and motivate attendees to routinely discuss DNA banking with patients.

**7:45 PM – 8:15 PM**

**Shire**

The Evolving Role of the Genetic Counselor in the Multidisciplinary Approach to Lysosomal Storage Disease (LSD) Care
Abigail Hata, MS, CGC, Oregon Health and Science University
This session will focus on the multidisciplinary approach to LSD care from the perspective of the genetic counselor. The evolution of the genetic counselor’s role and perspectives on needs along the patient journey will be highlighted, along with a discussion on earlier diagnosis and screening of Gaucher disease and other LSDs.

**7:00 PM – 7:15 PM**

**Fulgent Diagnostics**

New Standard of Cancer Testing Offered by Fulgent Diagnostics
Patricia Page, MS, CGC
Two sizes, infinite possibilities. Fulgent Diagnostics offers focused and comprehensive cancer panels with 99.99% coverage of coding and flanking intronic regions at minimum 50x depth. Start with one panel and customize it around the needs of your patient. Request results for any combination at no extra cost. This is the new standard of cancer testing.

7:45 PM – 8:15 PM

**Thursday, September 29**

**6:00 PM – 6:30 PM**

**Shire**

Learning to Trust Again: Common Issues Clinical Trial Participants Face When Transitioning Back to Routine Clinical Care
Laurie Bailey, MS, Coordinator, Clinical Research Program for the Division of Human Genetics, Cincinnati Children’s Hospital
As patients transition from clinical research to routine clinical care, the role of the genetic counselor has evolved to include the coordination and continuity of health care. This session will highlight the needed education for the patient and family, and coordination among the health professionals involved in this transition.

5:15 PM – 5:45 PM

**Genetic Counselors and UM: Having the Courage to Do the Right Thing**
Michael Astion, MD, PhD, Medical Director, Department of Laboratories, Seattle Children’s Hospital and Pediatric Laboratory Utilization Guidance Services (PLUGS); Jessie Conta, MS, LCGC, Laboratory Genetic Counselor, Supervisor, Department of Laboratories, Seattle Children’s Hospital and Pediatric Laboratory Utilization Guidance Services (PLUGS)
Utilization management (UM) interventions increase the value of testing, while reducing financial liability for patients, institutions and payers. Genetic counselors are courageous UM leaders, serving as detectives, educators, negotiators and advocates. Learn about efforts to harmonize medical necessity and optimize insurance coverage in the spirit of genetic stewardship.
VENDOR-SPONSORED PRESENTATIONS

Friday, September 30
11:45 AM – 12:15 PM

Termination of Pregnancy for Indications of Genetic Disorder and Fetal Abnormality in Advanced Gestations
Warren M. Hern, MD, MPH, PhD, Director, Boulder Abortion Clinic, Associate Clinical Professor, Department of Obstetrics and Gynecology, University of Colorado Denver Health Sciences Center
The diagnostic categories of fetal anomalies and genetic disorders for patients seen over a period of 35 years will be presented. The components of clinical care for patients seeking this service will be presented including preoperative evaluation, protocol for management of patients in different stages of pregnancy, operative techniques, postoperative management and evaluation, and procedures for grief support.

12:30 PM – 1:00 PM

22q: Prenatal Clues and Commercial Data Review
Donna M. McDonald-McGinn, MS, LCGC, Chief, Section of Genetic Counseling, Director, 22q and You Center, Associate Director, Clinical Genetics Center, The Children’s Hospital of Philadelphia; Libby Valenti, MS, CGC, Medical Science Liaison Manager, Natera
22q11.2 deletion syndrome has become a part of routine prenatal screening for many women through Non-Invasive Prenatal Testing (NIPT). This presentation will review prenatal clues such as ultrasound findings associated with 22q. Natera will also present the commercial experience with NIPT for 22q, including recent data.

1:15 PM - 1:45 PM

FACE2GENE: Smart Phenotyping, Better Genetics. Best Practices from Clinic to Lab.
Alyssa Blesson, MCG, LGC, Nemours/ Alfred I. duPont Hospital for Children Sarah Savage, MS, CGC
FDNA invites you to join us to learn more about the FACE2GENE Suite. See a real case review to discover how smart phenotyping facilitates comprehensive and precise genetic evaluations.

AEConnect
Located in the Exhibitor Suite, Exhibit Hall 4AB
Open Wednesday – Friday during Exhibitor Suite hours

AEConnect is designed to help you network with your professional community. While in the Exhibitor Suite, stop by to view available job postings, learn more about our social media efforts, engage with NSGC’s Special Interest Groups, take in a sponsored presentation in the Vendor Theater, and meet up with colleagues and friends.

A LANDMARK IN GENOMICS: OUR VALUE IN HEALTHCARE
35th Annual Education Conference
NEW PATIENT RESOURCE WEBSITE

What is a Genetic Counselor?

How Can a Genetic Counselor Help Me?

What Should I Expect when Seeing a Genetic Counselor?

How Do I Find a Genetic Counselor?

Help your patients find the answers to these questions and more on the new www.aboutgeneticcounselors.com
NSGC AWARDS AND FELLOWSHIPS

Jane Engelberg Memorial Fellowship (JEMF)
Outcomes of Genetic Counseling for Arrhythmogenic Cardiomyopathy: A Comparison of Face-to-Face and Tele-Genetic Counseling
Brittney Murray, MS, CGC

Audrey Heimler Special Project Award (AHSPA)
Development of Spanish Genetic Counseling Lexicon
Priscila D. Hodges, MS, CGC

NSGC Leadership Awards
Natalie Weissberger Paul National Achievement Award
Beth B. Crawford, MS, LCGC
Strategic Leader
Quinn Stein, MS, CGC
Strategic Leader
Jennifer M. Hoskovec, MS, CGC
Outstanding Volunteer
Colleen Caleshu, MS, LCGC
International Leader
Mercy Ygoña Laurino, MS, CGC, PhD
New Leader Award
Misha DS Rashkin, MS, CGC

Best Abstract Awards
Best Full Member Abstract Award
Adapting Evidenced Based Strategies for Effective Communication in Cancer Genetic Counseling
Robin Lee, MS, CGC
Beth Fine Kaplan Student Abstract Award
Genetic Counseling Increases Parental Knowledge and Psychological Adaptation to Turner Syndrome Diagnosis
Caitlin A. Austin

Cultural Competency Scholarship
Mike Darren Suguitan
Rebecca Wang

NSGC expresses its gratitude to these volunteers for their hard work and dedication:

Chair
Jason Flanagan, MS, CGC
Vice Chair
Renee Chard, MS, CGC
AEC Subcommittee
McKinsey Goodenberger, MS, CGC
Andrea Harbison, MS, CGC
Kelly E. Jackson, MS, CGC
Kate Lamvik Loranger, MS, CGC
Kirsty McWalter, MS, CGC
Rachel Mills, MS, CGC
Ana Morales, MS, CGC
Lauren P. Morgenroth, MS, CGC
Emily Smith, MS, CGC
Abstract Workgroup Chair
Beverly Yashar, PhD, MS, CGC
Abstract Workgroup Vice Chair
Tracey L. Grant, MS
Abstract Workgroup
Sharon Aufox, MS, CGC
Tanya Meegerian Bardakjian, MS, CGC
Katie L. Berrier, MS, CGC
Courtney Berrios, MSc, ScM, CGC
Meg Bradbury, MS, CGC, MSHS
Kari Haag Branham, MS, CGC
Deanna Alexis Carere, ScD, CGC, CCGC
Kathleen Collins Ruff, MS, LGC
Julie Bars Culver, MS, LCGC, CCRP
Martha Dudek, MS, LCGC
Kelly M. East, MS, CGC
Altovise T. Ewing, PhD
Kristi Koch Fitzgerald, MS, CGC
Sara Fitzgerald-Butt, MS, CGC, LGC
Stephanie Gandomi, MS, CGC, LGC
Erynn Gordon, MS, CGC
Yue Guan, ScM, PhD, CGC
Carrie Guy, MS, CGC
Stephanie Harris, MS, CGC
Jodie Ingles, GDGC, PhD
Angela Inglis, MSc, CGC, CCGC
Emily James, MS, CGC
Yelena Kemel, MS, ScM, CGC
Devon Lamb Thrush, MS, CGC
Dawn Alysia Laney, MS, CGC, CCRC
Elizabeth A. Lutz, MS, CGC
Erin M. Miller, MS, CGC
Sarah Jane Noblin, MS, CGC
Emily Partack, MS, CGC
Jennifer Pickard Brzosowicz, MS, CGC
Irene Rainville, MS, PhD, LGC
Victoria M. Raymond, MS, CGC, CCRP
Catherine Reiser, MS, CGC
Theresa Rich, MS, CGC
Eric Rosenthal, PhD, ScM, LGC
Taylor J. Sale, MS, MA, MEd, LCGC
Sarah Scollon, MS, CGC
Kate P. Shane-Carson, MS, CGC, LGC
Kayla M. Sheets, MS, LGC
Sheila Solomon, MS, CGC
Michelle N. Strecker, MS, LCGC
Christopher Tan, MS, CGC
Elizabeth Ulm, MS, CGC
Karen Wain, MS, CGC
Jody Wallace, MS, CGC
Susan Walther, MS, CGC
Chani Wiesman, MS, CGC
Elisabeth Wood, MS, CGC
Education Committee Chair
Emily Edelman, MS, CGC
Education Committee Vice Chair
Colleen Caleshu, MS, CGC
Education Committee Board Liaison
Kaylene Ready, MS, CGC
NSGC Special Interest Group (SIG) Fair
Wednesday, September 28
2:00 PM – 2:30 PM
Room 615 - 617
All AEC attendees are invited to the NSGC SIG Fair to meet with SIG leaders and to learn more about current SIG projects and how you can become involved.

First Time Attendees
AEC 101: Welcome to the Emerald City
Wednesday, September 28
2:00 PM – 3:15 PM
Room 618 - 620
Are you a first-time AEC attendee? Make your way to this event to network with other new attendees and learn about the AEC. There will also be a special SIG fair just for first-time attendees and new NSGC members. Meet with SIG leaders at this event and learn more about what NSGC's SIGs have to offer.

Welcome Reception
Wednesday, September 28
6:00 PM – 8:30 PM
Exhibit Hall 4AB
Make new contacts and greet your friends as you preview the vendors and their services in the Exhibitor Suite. Join your colleagues for this special kickoff to the AEC. Light hors d’oeuvres and a cash bar will be available.

State of the Society Address
Thursday, September 29
9:30 AM – 10:15 AM
Ballroom 6ABC
Join President Jehannine Austin, MSc, PhD, CGC, CCGC, as she provides an overview of NSGC activities and accomplishments over the past year, reviews NSGC’s advocacy efforts and strategic initiatives and shares highlights from 2016.

Genome Magazine’s Code Talker Award
Thursday, September 29
5:00 PM - 5:30 PM
Room 6ABC
Join Genome Magazine as we honor genetic counselors and announce the first winner of the Code Talker Award essay contest. Three finalists will be honored by the essayists who nominated them—sharing their emotional stories of what great care looks like from the lens of the patient. Bring your tissues!

AEC 35th Anniversary Reception
Thursday, September 29
5:30 PM – 7:45 PM
Exhibit Hall 4AB
Head to the Exhibitor Suite to celebrate the 35th Anniversary of the AEC! Join NSGC for this very special reception as we honor and demonstrate our appreciation for all genetic counselors and celebrate the history and future of the AEC and the genetic counseling profession. A hosted bar (two drink tickets per attendee) will be available.

ABGC Annual Business Meeting
Friday, September 30
1:45 PM – 2:15 PM
Ballroom 6ABC

ACGC Presentation
Friday, September 30
2:15 PM – 2:45 PM
Ballroom 6ABC

Incoming Presidential Address
Saturday, October 1
9:30 AM – 10:00 AM
Ballroom 6ABC
Welcome NSGC President-Elect Mary Freivogel, MS, CGC, as she introduces herself to NSGC members and outlines her vision for NSGC and the genetic counseling profession in 2017.

Meals and Refreshments
Continental breakfast will be served on Wednesday in the Lobby of Ballroom 6ABC from 7:00 AM - 8:00 AM and on Thursday and Friday in the Exhibitor Suite, Exhibit Hall 4AB, from 7:00 AM - 8:00 AM and on Saturday in the lobby of Ballroom 6ABC from 7:00 AM – 8:00 AM.

Refreshment Breaks
Thursday, September 29
10:15 AM – 10:30 AM
3:00 PM – 3:15 PM
Friday, September 30
9:30 AM – 9:45 AM
3:00 PM – 3:15 PM
Saturday, October 1
10:00 AM – 10:15 AM

Join Us at the Booths Below for a Special Treat
Wednesday, September 28
6:00 PM - 8:30 PM
Myriad – Booth 601
Invitae – Booth 101
GenPath Women’s Health – Booth 903

Thursday, September 29
7:00 AM - 8:00 AM
Invitae – Booth 101
Myriad – Booth 601
Thurday, September 29
5:00 PM - 7:45 PM
Myriad – Booth 601
Invitae – Booth 101
Genex – Booth 803

Friday, September 30
7:00 AM - 8:00 AM
Invitae – Booth 101
Myriad – Booth 601
Friday, September 30
11:15 AM - 3:00 PM
Myriad – Booth 601
Invitae – Booth 101
Insight Medical Genetics – Booth 801
NSGC Q&A
Members of the NSGC leadership will be at specific locations during the conference to talk with members and answer questions. Stop by and share your thoughts!

Thursday, September 29
5:15 PM – 6:15 PM
AEConnect area in Exhibitor Suite

Friday, September 30
11:30 AM – 12:00 PM
AEConnect area in Exhibitor Suite

Saturday, September 30
7:15 AM – 7:45 AM
Registration Desk

Mentor Program Meet-Up
Have you ever considered joining the Mentor Program, but wanted to learn more? Are you in the Mentor Program, but haven’t found your mentor match? Have you always wanted to meet your mentor match in person? Come join us for this very special Mentor Program Meet-Up event inside the AEConnect on Wednesday, September 28 from 6:30 PM – 7:30 PM.

SIG Presentations within the AEConnect
Engage with SIG leadership in the AEConnect at the following times:

<table>
<thead>
<tr>
<th></th>
<th>Thursday, September 29</th>
<th>Friday, September 30</th>
</tr>
</thead>
<tbody>
<tr>
<td>5:00PM - 5:30PM</td>
<td>Prenatal SIG</td>
<td>11:30AM - 12:00PM</td>
</tr>
<tr>
<td>5:30PM - 6:00PM</td>
<td>Pediatric Clinical SIG</td>
<td>12:00PM - 12:30PM</td>
</tr>
<tr>
<td>6:00PM - 6:30PM</td>
<td>International SIG</td>
<td>12:30PM - 1:00PM</td>
</tr>
<tr>
<td>6:30PM - 7:00PM</td>
<td>Neurogenetics SIG</td>
<td>1:00PM - 1:30PM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1:30PM - 2:00PM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2:00PM - 2:30PM</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2:30PM - 3:00PM</td>
</tr>
</tbody>
</table>

What does it mean to be a gold standard in genetic testing?

At Invitae, we believe there’s a new gold standard, one that includes both high quality testing and a dedication to improving medicine through:

SCIENCE & DATA SHARING
10 posters, presentations, symposia, and breakout sessions at this year’s NSGC AEC—in addition to our ongoing commitment to sharing variants and variant interpretation methods.

EDUCATION
8 scholarships for genetic counselor members of NSGC to attend this year’s meeting—in addition to educational programs like Gene of the Week.

COLLABORATION
Join us at the Invitae reception celebrating genetic counselors and Genome magazine’s Code Talkers Award on Thursday, September 29 at 8 pm. Details on the event and how to get your copy of the Code Talker essay nominations book are available at Booth 101!

Join Invitae as we expand access to high-quality, comprehensive genetic testing.
<table>
<thead>
<tr>
<th>Company Name</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>23andMe</td>
<td>210</td>
</tr>
<tr>
<td>AbortionClinics.org</td>
<td>211</td>
</tr>
<tr>
<td>Affymetrix, part of Thermo Fisher Scientific</td>
<td>303</td>
</tr>
<tr>
<td>Alexion Pharmaceuticals</td>
<td>910</td>
</tr>
<tr>
<td>Allele Diagnostics</td>
<td>218</td>
</tr>
<tr>
<td>Alpha-1 Foundation</td>
<td>224</td>
</tr>
<tr>
<td>Ambry Genetics</td>
<td>316</td>
</tr>
<tr>
<td>American Board of Genetic Counseling</td>
<td>618</td>
</tr>
<tr>
<td>American Thrombosis &amp; Hemostasis Network (ATHN)</td>
<td>205</td>
</tr>
<tr>
<td>ARUP Laboratories</td>
<td>201</td>
</tr>
<tr>
<td>AstraZeneca</td>
<td>523</td>
</tr>
<tr>
<td>Asuragen</td>
<td>705</td>
</tr>
<tr>
<td>Baby’s First Test</td>
<td>430</td>
</tr>
<tr>
<td>Basser Center for BRCA</td>
<td>608</td>
</tr>
<tr>
<td>Baylor Genetics</td>
<td>401</td>
</tr>
<tr>
<td>BioMarin Pharmaceutical Inc</td>
<td>426</td>
</tr>
<tr>
<td>Blueprint Genetics</td>
<td>429</td>
</tr>
<tr>
<td>Boulder Abortion Clinic, PC</td>
<td>510</td>
</tr>
<tr>
<td>Bright Pink</td>
<td>729</td>
</tr>
<tr>
<td>CancerGene Connect</td>
<td>307</td>
</tr>
<tr>
<td>CancerIQ</td>
<td>628</td>
</tr>
<tr>
<td>CBR, from AMAG Pharmaceuticals, Inc.</td>
<td>301</td>
</tr>
<tr>
<td>CdLS Foundation</td>
<td>1000</td>
</tr>
<tr>
<td>Cedar River Clinics</td>
<td>112</td>
</tr>
<tr>
<td>Children’s National Fetal Medicine Institute</td>
<td>921</td>
</tr>
<tr>
<td>Clinical Genome Resource (ClinGen)</td>
<td>900</td>
</tr>
<tr>
<td>Clovis Oncology</td>
<td>511</td>
</tr>
<tr>
<td>Color Genomics</td>
<td>207</td>
</tr>
<tr>
<td>CombiMatrix</td>
<td>517</td>
</tr>
<tr>
<td>Connective Tissue Gene Tests (CTGT)</td>
<td>309</td>
</tr>
<tr>
<td>Counsyl</td>
<td>629</td>
</tr>
<tr>
<td>Emory Genetics Laboratory</td>
<td>408</td>
</tr>
<tr>
<td>FDNA</td>
<td>427</td>
</tr>
<tr>
<td>FORCE: Facing Our Risk of Cancer Empowered</td>
<td>620</td>
</tr>
<tr>
<td>Fulgent Diagnostics</td>
<td>206</td>
</tr>
<tr>
<td>Geisinger Health System</td>
<td>1001</td>
</tr>
<tr>
<td>GeneDx</td>
<td>803</td>
</tr>
<tr>
<td>Genesis Genetics</td>
<td>825</td>
</tr>
<tr>
<td>GeneTests.org</td>
<td>907</td>
</tr>
<tr>
<td>Genetic Support Foundation</td>
<td>829</td>
</tr>
<tr>
<td>Genome Magazine</td>
<td>913</td>
</tr>
<tr>
<td>Genomind, Inc</td>
<td>801</td>
</tr>
<tr>
<td>GenPath Women's Health</td>
<td>903</td>
</tr>
<tr>
<td>Greenwood Genetic Center</td>
<td>616</td>
</tr>
<tr>
<td>Harmony Prenatal Test</td>
<td>826</td>
</tr>
<tr>
<td>Illumina, Inc</td>
<td>609</td>
</tr>
<tr>
<td>Insight Medical Genetics</td>
<td>810</td>
</tr>
<tr>
<td>Integrated Genetics</td>
<td>300</td>
</tr>
<tr>
<td>Invitae</td>
<td>100, 101</td>
</tr>
<tr>
<td>Kaiser Genetics - Northern California</td>
<td>606</td>
</tr>
<tr>
<td>LAL-D Aware made possible by GenoPheno</td>
<td>827</td>
</tr>
<tr>
<td>Mayo Medical Laboratories</td>
<td>508</td>
</tr>
<tr>
<td>MNG Laboratories</td>
<td>529</td>
</tr>
<tr>
<td>MotherToBaby Pregnancy Studies</td>
<td>304</td>
</tr>
<tr>
<td>Mount Sinai Genetic Testing Laboratory</td>
<td>111</td>
</tr>
<tr>
<td>Myriad Genetic Laboratories</td>
<td>601</td>
</tr>
<tr>
<td>Natera</td>
<td>417</td>
</tr>
<tr>
<td>National Library of Medicine</td>
<td>521</td>
</tr>
<tr>
<td>NextGxDx</td>
<td>711</td>
</tr>
<tr>
<td>NIH Genetic Testing Registry/MedGen/ClinVar</td>
<td>509</td>
</tr>
<tr>
<td>Norton &amp; Elaine Sarnoff Center for Jewish Genetics</td>
<td>630</td>
</tr>
<tr>
<td>NTD Labs</td>
<td>402</td>
</tr>
<tr>
<td>Oregon Reproductive Medicine</td>
<td>915</td>
</tr>
<tr>
<td>Partners Personalized Medicine Lab for Molecular Medicine</td>
<td>519</td>
</tr>
<tr>
<td>Perinatal Quality Foundation</td>
<td>917</td>
</tr>
<tr>
<td>Personalis, Inc</td>
<td>409</td>
</tr>
<tr>
<td>Pfizer</td>
<td>528</td>
</tr>
<tr>
<td>Phenogen Sciences, Inc.</td>
<td>109</td>
</tr>
<tr>
<td>PreventionGenetics</td>
<td>701</td>
</tr>
<tr>
<td>Proband - The Children’s Hospital of Philadelphia</td>
<td>823</td>
</tr>
<tr>
<td>Progenity</td>
<td>811</td>
</tr>
<tr>
<td>Progeny Genetics</td>
<td>326</td>
</tr>
<tr>
<td>Providence Health &amp; Services</td>
<td>530</td>
</tr>
<tr>
<td>Quest Diagnostics</td>
<td>817</td>
</tr>
<tr>
<td>Recordati Rare Diseases</td>
<td>327</td>
</tr>
<tr>
<td>Reprogenetics and Recombine</td>
<td>308</td>
</tr>
<tr>
<td>Retrophin</td>
<td>912</td>
</tr>
<tr>
<td>Sanofi Genzyme</td>
<td>400</td>
</tr>
<tr>
<td>Seattle Children’s Hospital, PLUGS Program</td>
<td>709</td>
</tr>
<tr>
<td>Sequenom, Inc</td>
<td>708</td>
</tr>
<tr>
<td>Sharsheret</td>
<td>203</td>
</tr>
<tr>
<td>Shire</td>
<td>731</td>
</tr>
<tr>
<td>Simons VIP Connect</td>
<td>901</td>
</tr>
<tr>
<td>SimulConsult</td>
<td>227</td>
</tr>
<tr>
<td>Southwestern Women’s Options</td>
<td>306</td>
</tr>
<tr>
<td>Special Angels Adoption</td>
<td>216</td>
</tr>
<tr>
<td>The Center for Fetal Diagnosis and Treatment at the Children’s Hospital of Philadelphia</td>
<td>622</td>
</tr>
<tr>
<td>ThinkGenetic, Inc</td>
<td>431</td>
</tr>
<tr>
<td>UAB Medical Genomics Laboratory</td>
<td>507</td>
</tr>
<tr>
<td>UCLA Clinical Genomics Center</td>
<td>800</td>
</tr>
<tr>
<td>UCLA Health</td>
<td>406</td>
</tr>
<tr>
<td>UCSF Fetal Treatment Center</td>
<td>222</td>
</tr>
<tr>
<td>Ultragenyx Pharmaceutical</td>
<td>114</td>
</tr>
<tr>
<td>Undiagnosed Diseases Network</td>
<td>220</td>
</tr>
<tr>
<td>University of Chicago Genetic Services Laboratories</td>
<td>526</td>
</tr>
<tr>
<td>University of Washington</td>
<td>911</td>
</tr>
<tr>
<td>UNMC Human Genetics Laboratory</td>
<td>727</td>
</tr>
<tr>
<td>UPMC</td>
<td>329</td>
</tr>
<tr>
<td>UW Medicine Center for Precision Diagnostics</td>
<td>428</td>
</tr>
<tr>
<td>Valley Children’s Hospital</td>
<td>610</td>
</tr>
</tbody>
</table>
23andMe
Booth 210
899 W. Evelyn Avenue
Mountain View, CA 94041
Phone: 650.938.6300
23andme.com

Founded in 2006, 23andMe is the first and only genetic service available directly to consumers that offers reports that meet FDA standards for being scientifically and clinically valid.

AbortionClinics.org/AAF, Inc.
Booth 211
1002 West Mission Ave
Bellevue, NE 68005
Phone: 402.291.4797
Fax: 402.291.4643
acconebraska@gmail.com
abortionclinics.org

We have been providing abortion services for more than 30 years. We specialize in 3rd trimester terminations for fetal anomalies.

Affymetrix, part of Thermo Fisher Scientific
Booth 303
3420 Central Expressway
Santa Clara, CA 95051
Phone: 408.731.5000
Fax: 408.731.5646
sales@affymetrix.com
affymetrix.com

Affymetrix, part of Thermo Fisher Scientific, is your partner for pediatric genetics. We offer the only FDA-cleared whole-genome diagnostic test, CytoScan® Dx Assay, proven to aid in the diagnosis of developmental delay and intellectual disabilities.

Allele Diagnostics
Booth 218
44 W 6th Avenue, Suite 202
Spokane, WA 99204
Phone: 509.232.5779
info@allelediagnostics.com
allelediagnostics.com

Allele Diagnostics is a genetic company focused on providing high-quality testing and reporting services. Our specialty is rapid microarray, but we offer a unique test menu that is focused on pediatric and prenatal patients.

American Thrombosis & Hemostasis Network (ATHN)
Booth 205
72 Treasure Lane
Riverwoods, IL 60015
Phone: 800.360.2846
Fax: 847.572.0967
info@athn.org
athn.org

The American Thrombosis and Hemostasis Network (ATHN) is a non-profit organization committed to advancing and improving care for individuals affected by bleeding and thrombotic disorders. ATHN manages a national database of patient health data that can be used to improve care and support vital research.

Ambry Genetics
Booth 316
15 Argonaut
Aliso Viejo, CA 92656
Phone: 949.900.5500
Fax: 949.900.5501
info@ambrygen.com
ambrygen.com

Ambry is a genetics-based healthcare company that is dedicated to open scientific exchange so we can work together to understand all human disease faster and save millions of lives.

American Board of Genetic Counseling
Booth 618
PO Box 14216
Lenexa, KS 66285
Phone: 913.222.8661
Fax: 913.222.8606
info@abgc.net
abgc.net

The American Board of Genetic Counseling (ABGC) is the credentialing organization for the genetic counseling profession in the U.S. and Canada. ABGC certifies and recertifies qualified genetic counseling professionals and promotes growth and development of the profession.

American Thrombosis & Hemostasis Network (ATHN)
Booth 205
72 Treasure Lane
Riverwoods, IL 60015
Phone: 800.360.2846
Fax: 847.572.0967
info@athn.org
athn.org

The American Thrombosis and Hemostasis Network (ATHN) is a non-profit organization committed to advancing and improving care for individuals affected by bleeding and thrombotic disorders. ATHN manages a national database of patient health data that can be used to improve care and support vital research.

ARUP Laboratories
Booth 201
500 Chipeta Way
Salt Lake City, UT 84108
Phone: 801.583.2787
Fax: 801.584.5209
alyson.willerton@aruplab.com
aruplab.com

ARUP, a nonprofit enterprise of the University of Utah, has a full-service genetics laboratory offering testing in maternal serum screening and molecular, cytogenetics, and biochemical genetics, with experience in sequencing, MLPA, FISH, microarray, and biochemical assays.

AstraZeneca
Booth 523
101 Orchard Ridge Drive
Gaithersburg, MD 20878
Phone: 301.398.0000
joe.conyer@astraZeneca.com
astraZeneca-us.com

AstraZeneca is a global, science-led biopharmaceutical company that focuses on the discovery, development and commercialization of prescription medicines, primarily for the treatment of diseases in three therapy areas – respiratory and autoimmunity, cardiovascular and metabolic diseases, and oncology. The company is also active in inflammation, infection and neuroscience through numerous collaborations. AstraZeneca operates in over 100 countries and its innovative medicines are used by millions of patients worldwide.
Asuragen
Booth 705
2150 Woodward Street, Suite 100
Austin, TX 78744
Phone: 512.681.5200
Fax: 512.681.5201
asuragen@asuragen.com
asuragen.com
The Asuragen Genetics portfolio delivers innovative solutions that are designed to solve unmet testing needs and empower researchers to advance the understanding of inherited disorders, from ALS to Fragile X syndrome.

Baby’s First Test
Booth 430
4301 Connecticut Avenue NW, Suite 404
Washington, DC 20008
Phone: 202.966.5557
info@babysfirsttest.org
babysfirsttest.org
Baby’s First Test houses the nation's newborn screening clearinghouse. As the clearinghouse, Baby’s First Test connects parents and healthcare providers with information and resources on newborn screening at the local, state, and national levels.

Basser Center for BRCA
Booth 608
3400 Civic Center Boulevard
3 West Pavilion
Philadelphia, PA 19104
Phone: 215.662.2748
Fax: 215.349.5314
basserinfo@uphs.upenn.edu
basser.org
The Basser Center for BRCA at Penn Medicine’s Abramson Cancer Center is the first comprehensive center solely devoted to funding research, educating providers and patients, and advancing care for individuals with BRCA gene mutations.

Baylor Genetics
Booth 401
2450 Holcombe Boulevard, Suite O-100
Houston, Texas 77021
Phone: 713.798.6555
geneticstest@bmgl.com
bmgl.com
Baylor Genetics Laboratories offer a broad range of diagnostic genetics tests. We provide state of the art testing including, DNA diagnostics, prenatal testing, chromosomal microarray analysis, whole exome sequencing, biochemical genetics, mitochondrial disease panels and metabolic testing as well as cancer testing.

BioMarin Pharmaceutical Inc.
Booth 426
105 Digital Drive
Novato, CA 94949
Phone: 415.506.6700
Fax: 415.382.7889
biomarin.com
BioMarin develops and commercializes innovative biopharmaceuticals for serious diseases and medical conditions. Approved products include the first and only medications for PKU and LEMS, and the first and only enzyme replacement therapies for MPS I, MPS VI and Morquio A syndrome.

Blueprint Genetics
Booth 429
953 Indiana Street
San Francisco, CA 94107
Phone: 650.452.9340
jessica.kim@blueprintgenetics.com
blueprintgenetics.com
Blueprint Genetics is changing diagnostics by providing accessible and actionable genetic knowledge. Our mission is to support healthcare professionals in providing the best care for patients with rare inherited diseases. We provide fast, affordable and comprehensive genetic diagnostics.

Boulder Abortion Clinic, PC
Booth 510
1130 Alpine Avenue
Boulder, CO 80304
Phone: 303.447.1361
Fax: 303.447.0020
drhern.com
Boulder Abortion Clinic’s Dr. Warren Hern provides services to select patients beyond 30 menstrual weeks for fetal anomaly and maternal indications. Assistance with genetic testing and grievance services is available.

Bright Pink
Booth 729
670 N. Clark Street
Chicago, IL 60610
Phone: 312.787.4412
brightpink@brightpink.org
brightpink.org
Bright Pink is a national non-profit on a mission to prevent breast and ovarian cancer by inspiring proactive behavior change among young women and their healthcare providers.

CancerGene Connect
Booth 307
1701 N. Market Street, Suite 435
Dallas, TX 75202
Phone: 214.862.1957
Fax: 972.455.8638
info@cagene.com
cagene.com
CancerGene Connect© is a cloud-based genetic risk assessment and pedigree tool originally developed by UT Southwestern. It remotely gathers patient history, runs risk assessment models, draws pedigrees, generates patient reports, and creates a comprehensive database.

CancerIQ
Booth 628
222 W Merchandise Mart Plaza #1230
Chicago, IL 60654
Phone: 888.802.2623
adowning@canceriq.com
canceriq.com
CancerIQ makes it easy for practices to offer genetic cancer risk assessment programming to every patient that walks through the door. Our solutions help genetic counselors to save time, enrich the face-to-face counseling experience, and improve patient outcomes over time. We enable any busy healthcare system to start, run, and grow a highly impactful cancer genetics program at lower costs.

CBR, from AMAG Pharmaceuticals Inc.
Booth 301
1100 Winter Street
Waltham, MA 02451
Phone: 617.498.3300
Fax: 617.649.1632
contactus@amagpharma.com
www.amagpharma.com
At CBR, our mission is to enable more breakthrough medical treatments for more families. We do that by significantly advancing the real-life clinical applications of newborn stem cells; searching to uncover potential through clinical trials; and aspiring to perfection in collection, processing and storage of stem cells.
**Cedar River Clinics**
Booth 112
263 Rainier Ave S
Renton, WA 98057
Phone: 800.572.4223
Fax: 425.255.0262
friends@CedarRiverClinics.org
www.CedarRiverClinics.org

Cedar River Clinics offers compassionate abortion care to 26 weeks with special fetal indication services. We are happy to assist clients and their families with transportation, local lodging and funding resources.

**CdLS Foundation**
Booth 1000
302 West Main Street #100
Avon, CT 06001
Phone: 800.753.2357
Fax: 860.676.8337
info@CdLSusa.org
cdlsusa.org

The CdLS Foundation is a family support organization that exists to ensure early and accurate diagnosis, promote research into causes and manifestations of the syndrome, and help people with CdLS make informed decisions.

**Children’s National Fetal Medicine Institute**
Booth 921
111 Michigan Avenue NW
Washington, DC 20010
Phone: 202.476.7409
fetalmedicine@childrensnational.org
ChildrensNational.org/Fetal

The Children’s National Fetal Medicine Institute provides advanced and comprehensive care for unborn babies with known or suspected medical conditions in a compassionate and supportive environment, offering pregnant families advanced fetal diagnostics and treatment.

**Clovis Oncology**
Booth 511
We are a biopharmaceutical company focused on acquiring, developing and commercializing cancer treatments in the United States, Europe and other international markets.

**Color Genomics**
Booth 207
1801 Murchison Drive #128
Burlingame, CA 94010
Phone: 844.362.6567
providers@getcolor.com
getcolor.com

Color Genomics’ mission is to democratize access to genetic information. For $249, Color provides a clinical-grade physician ordered test that analyzes 30-genes to help women and men learn their risk for the most common hereditary cancers.

---

**AbortionClinics.Org**

Elective, Fetal and Maternal Indication Abortions

Caring for women with **KINDNESS, COURTESY, LOVE, JUSTICE & RESPECT** for over twenty four years.

LeRoy H. Carhart, M.D.
Medical Director

Toll free: (800) 737-3845
Fax: (402) 291-4643
Lee@AbortionClinics.Org
www.AbortionClinics.Org

**Abortion Access Fund, Inc.**

**AAF** is a small clinic based fund with the mission to increase access to safe and legal abortion care in the Midwest. Providing financial assistance and trusting women for over fifteen years.

Chelsea Souder, MPH
Director

Toll free: (800) 737-3845
Clinic: (402) 292-4164
Chelsea@AbortionAccessFund.org
EXHIBITOR INDEX

CombiMatrix
Booth 517
300 Goddard, Suite 100
Irvine, CA 92618
Phone: 949.753.0624
marketing@combimatrix.com
combimatrix.com
CombiMatrix is a clinical diagnostic laboratory specializing in cytogenomic testing for prenatal diagnosis, miscarriage analysis, preimplantation genetic screening and pediatric developmental disorders.

Connective Tissue Gene Tests (CTGT)
Booth 309
6575 Snowdrift Road, Suite 106
Allentown, PA 180106
Phone: 484.244.2900
Fax: 484.244.2904
inquiries@ctgt.net
ctgt.net
CTGT specializes in prenatal and postnatal molecular diagnostics for a variety of inherited genetic disorders offering over 1,500 NGS, Sanger and Deletion/Duplication tests. CTGT provides high test sensitivity, rapid turnaround times and superior customer service.

Counsyl
Booth 629
180 Kimball Way
South San Francisco, CA 94080
Phone: 888.268.6795
info@counsyl.com
counsyl.com
Counsyl is a DNA testing and genetic counseling service. We strive to put patients first, put clinicians in control, and put costs in their place. Counsyl has screened more than 600,000 patients and served more than 10,000 health care professionals.

Emory Genetics Laboratory
Booth 408
2165 North Decatur Road
Decatur, GA 30033
Phone: 404.778.8499
Fax: 404.778.8559
egl.marketing@emory.edu
geneticslab.emory.edu
Emory Genetics Laboratory offers a combined 1,100 molecular, biochemical, and cytogenetic tests under one roof and custom testing for all medically relevant genes, for domestic and international clients.

FDNA
Booth 427
745 Atlantic Avenue 8th Floor
Boston, MA 02111
Phone: 617.412.7000
jeff@fdna.com
Face2Gene.com
FDNA is maker of Face2Gene, a suite of phenotyping apps that facilitates comprehensive and precise genetic evaluations.

FORCE: Facing Our Risk of Cancer Empowered
Booth 620
16057 Tampa Palms Boulevard W, #373
Tampa, FL
Phone: 866.288.7475 (RISK)
Fax: 954.827.2200
info@facingourrisk.org
facingourrisk.org
FORCE is a national nonprofit organization dedicated to people affected by hereditary breast, ovarian and related cancers. Our programs provide support, education, advocacy and research to help those facing hereditary cancers make informed decisions.

f-tree
Novel automated questionnaire-based pedigree-chart creation software
- f-tree is a software application that automatically creates a medical pedigree chart for a family by simply using the family’s medical history information, which is provided in the questionnaires.
- No specialized knowledge of clinical genetics is required to use f-tree.
- f-tree is compliant with international recommendations for standardized human pedigree nomenclature.
- At present, f-tree is the foremost tool, capable of creating pedigree charts for genetic counseling.

Free Download
http://iwate-megabank.org/en/genetic/
User-Friendly Guide
available on YouTube (search using the keyword “f-tree”)
Contact
f-tree@holonic-systems.com
Supervised by Akimune Fukushima M.D., Ph.D., professor at the School of Medicine, Iwate Medical University.
At Genesis Genetics, we are invested in reproductive genetic health. We develop new technologies to harness that power of the genome and to help build healthy families.

Fulgent Diagnostics
Booth 206
4978 Santa Anita Avenue, Suite 205
Temple City, CA 91780
Phone: 626.350.0537
Fax: 626.454.1667
info@fulgentdiagnostics.com
fulgentdiagnostics.com
Fulgent Diagnostics has a broad and unique portfolio of genetic tests, including over 18,000 single gene tests, over 190 preset panels, rearrangement testing, clinical exome/trios, whole exome/trios, whole genome and our All-in-One reflex test.

Geisinger Health System
Booth 1001
100 N. Academy Avenue
Danville, PA 17821
Phone: 570.214.6918
gbmcluskey@geisinger.edu
geisinger.org
Geisinger is one of the nation’s largest health service organizations, serving 3 million residents in Pennsylvania and New Jersey. We are comprised of 1,600 employed physicians, 12 hospitals, two research centers and a 510,000-member health plan.

GeneDx
Booth 803
207 Perry Parkway
Gaithersburg, MD 20877
Phone: 301.519.2100
GenDx@GeneDx.com
www.GeneDx.com
GeneDx, an OPKO Health Company, offers sequencing and deletion/duplication testing for inherited cardiac disorders, mitochondrial disorders, neurological disorders, cancer disorders, and other rare genetic disorders. Whole exome sequencing, microarray-based testing, targeted variant testing, and prenatal diagnostic services are also available.

Genetests.org
Booth 907
481 Edward H Ross Drive
Elmwood Park, NJ 07407
Phone: 800.729.1204
genetests@genetests.org
GenTests.org
GenTests is an online medical genetics information resource with capability to search by test, disorder, or gene. GenTest searches retrieve links to GeneReviews™ chapters, other online resources and genetic testing information.

Genetic Support Foundation
Booth 829
1800 Cooper Point Road SW #14
Olympia, WA 98502
Phone: 844.743.6384
contact@geneticsupportfoundation.org
geneticsupportfoundation.org
We are a nonprofit whose mission involves improving healthcare by providing objective genetic information to patients, providers, and healthcare organizations, supporting those in need of genetic services and facilitating the adoption of best genetic practices.

GeneTests.org
Booth 907
481 Edward H Ross Drive
Elmwood Park, NJ 07407
Phone: 800.729.1204
genetests@genetests.org
GenTests.org
GenTests is an online medical genetics information resource with capability to search by test, disorder, or gene. GenTest searches retrieve links to GeneReviews™ chapters, other online resources and genetic testing information.

Genome Magazine
Booth 913
6900 Dallas Parkway Suite 200
Plano, TX 75024
Phone: 972.905.2920
tstammen@genomemag.com
genomemag.com
Genome Magazine explores the world of personalized medicine and the genomic revolution that makes it possible, empowering readers to make informed health decisions that will help them live better and longer.

Genomind, Inc.
Booth 801
2200 Renaissance Boulevard, Suite 100
King of Prussia, PA 19406
Phone: 877.895.8658
Fax: 844.364.5850
customerservice@genomind.com
genomind.com
Genomind is a personalized medicine company bringing innovation to mental healthcare through genetic testing. Genomind is comprised of pioneering researchers and thought leaders in psychiatry and neurology who specialize in pharmacogenetic laboratory testing for psychiatry.

GenPath Women’s Health
Booth 903
481 Edward H. Ross Drive
Elmwood Park, NJ 07407
Phone: 800.633.4522
info@GenPath.com
www.GenPath.com
GenPath Women’s Health, a division of BioReference Laboratories, an OPKO Company, specializes in the diagnostic needs of MFM and Ob-Gyn, including prenatal/maternal risk assessment, carrier testing, prenatal diagnosis, pregnancy thrombophilia and infectious diseases. GenPath Women’s Health is a sister division of GeneDx, an established leader in genetic testing for rare inherited diseases.

Greenwood Genetic Center
Booth 616
106 Gregor Mendel Circle
Greenwood, SC 29646
Phone: 800.473.9411
Fax: 864.941.8141
GGC.org
The Greenwood Genetic Center is a nonprofit institute organized to provide clinical genetic services, diagnostic laboratory testing, educational resources and research in the field of medical genetics. Our laboratory offers biochemical, cytogenetic and molecular testing.

Harmony Prenatal Test
Booth 826
9115 Hague Road
Indianapolis, IN 46250
Phone: 317.521.7615
Fax: 317.565.4089
lisa.glavan@roche.com
harmonytestusa.com
Harmony is a non-invasive prenatal test evaluating the risk of Trisomy 21, 18 and 13 as early as 10 weeks in pregnant women of any age or risk category. The Harmony test is developed by Ariosa Diagnostics. Ariosa Diagnostics is a laboratory certified under the Clinical Laboratory Improvement Amendments (CLIA).

Illumina, Inc.
Booth 609
5200 Illumina Way
San Diego, CA 92122
Phone: 858.202.4500
Fax: 858.202.4766
info@illumina.com
illumina.com
Illumina is improving human health by unlocking the power of the genome. Our genomic solutions are used for applications in oncology, reproductive health, and genetic disease research.
EXHIBITOR INDEX

Insight Medical Genetics
Booth 810
680 N Lake Shore Drive, Suite 1230
Chicago, IL 60611
Phone: 312.981.4400
Fax: 312.981.4404
IMGLab@insightmedicalgenetics.com
insightmedicalgenetics.com

As an integrated clinical and laboratory genetics company, Insight Medical Genetics offers a spectrum of pre and postnatal counseling and lab services to providers across the country including results interpretation by licensed board-certified genetic counselors.

Integrated Genetics
Booth 300
3400 Computer Drive
Westborough, MA 01581
Phone: 800.848.4436
integratedgenetics.com

Integrated Genetics is a leading provider of reproductive genetic testing services driven by its commitment to physicians and their patients. With years of testing expertise utilizing sophisticated technologies, Integrated Genetics spans the continuum of care, ranging from maternal serum screening and prenatal diagnostics to carrier screening and postnatal testing services.

Invitae
Booth 100
458 Brannan Street
San Francisco, CA 94107
Phone: 213.300.5464
leslie.spillman@invitae.com
invitae.com

Invitae offers high-quality, affordable genetic testing for oncology, cardiology, neurology, pediatrics, and more. Join us in our mission to bring genetic information into mainstream medical practice to improve healthcare for everyone.

Kaiser Genetics - Northern California
Booth 606
Jazmine.Jung@kp.org
genetics.kp.org

Practice what you believe, practice at Kaiser Permanente! Kaiser Genetics is the employer of choice for over 70 genetic counselors in Northern California.

LAL-D Aware made possible by GenoPheno
Booth 827
LAL-D Aware is a patient support resource for families impacted by lysosomal acid lipase deficiency. Previously LAL Solace, we changed our name to LAL-D Aware because disease intervention advances give cause for optimism and hope.

Mayo Medical Laboratories
Booth 508
3050 Superior Drive NW
Rochester, MN 55905
Phone: 800.533.1710
mml@mayo.edu
MayoMedicalLaboratories.com

Mayo Medical Laboratories is a global reference laboratory operating within Mayo Clinic’s Department of Laboratory Medicine and Pathology. Our comprehensive test menu includes biochemical and molecular assays for screening, diagnosing, and monitoring lysosomal storage disorders in both children and adults.

MNG Laboratories
Booth 529
5424 Glenridge Drive NE
Atlanta, GA 30342
Phone: 678.225.0222
Fax: 678.225.0212
quickresponse@mnglabs.com
mnglabs.com

MNG provides expert diagnostics through biochemical testing, metabolic testing and Next Generation Sequencing. Our panels are cost effective and comprehensive, particularly for cellular energetics, muscular dystrophies and epilepsy.

MotherToBaby Pregnancy Studies
Booth 304
9500 Gilman Drive, MC 0828
La Jolla, CA 92039
Phone: 877.311.8972
Fax: 858.246.1710
mothertobaby@ucsd.edu
mothertobaby.org

MotherToBaby, a non-profit service of the Organization of Teratology Information Specialists (OTIS), is dedicated to providing evidence-based information to mothers, health care professionals, and the general public about medications and other exposures during pregnancy and while breastfeeding. MotherToBaby’s research division is conducting an observational research study to evaluate the effects to the fetus from asthma and the safety of medications and vaccinations used during pregnancy.

Mount Sinai Genetic Testing Laboratory
Booth 111
1428 Madison Avenue, Atran Building 2
New York, NY 10029
Phone: 212.241.7518
Fax: 212.241.0139
dave.dubin@mssm.edu
icahn.mssm.edu/genetictesting

Mount Sinai offers high-quality genetic testing and diagnostic, therapeutic and counseling services for patients with hereditary cancer, genetic disorders and birth defects. Our latest carrier screening test accurately screens for 281 genetic diseases.

Myriad Genetic Laboratories
Booth 601
320 Wakara Way
Salt Lake City, UT 84108
Phone: 801.584.3600
cscomments@myriad.com
myriad.com

Myriad Genetics is a leading molecular and companion diagnostics company dedicated to making a difference in patients’ lives through the discovery and commercialization of transformative products that assess a person’s risk of developing disease, aid in a timely and accurate diagnosis, determine the risk of disease progression and recurrence and guide personalized treatment decisions.

Natera
Booth 417
201 Industrial Rd
San Carlos, CA 94070
Phone: 650.249.9090
jaliamus@natera.com
www.natera.com

Natera® is a rapidly growing genetic testing and diagnostics company with proprietary bioinformatics and molecular technology. Natera’s team of PhDs and engineers is dedicated to refining novel molecular genome assays and complex statistical algorithms to determine the likelihood of a wide range of serious genetic conditions with best-in-class accuracy and coverage.

National Library of Medicine
Booth 521
National Library of Medicine
Booth 521
NextGxDx improves genetic test ordering for the GC community with two solutions. GeneSource is a comprehensive and easy-to-use tool to search and compare genetic tests. GeneConnect provides advanced ordering/reporting tools to support genetic testing UM efforts.

NIH Genetic Testing Registry/MedGen/ClinVar
Booth 509
9000 Rockville Pike
Bethesda, Maryland 20892
gtr@ncbi.nlm.nih.gov
ncbi.nlm.nih.gov/guide/genetics-medicine
12,200 conditions, 4,300 genes, 157,000 variants and 35,000 genetic tests in 100 square feet. See what’s new with NCBi’s Medical Genetics resources: ClinVar, GTR and MedGen.

Norton & Elaine Sarnoff Center for Jewish Genetics
Booth 630
30 S. Wells, 216-600
Chicago, IL 60606
Phone: 312.357.4988
jewishgenetics@jewishgenetics.org
jewishgenetics.org
The Sarnoff Center for Jewish Genetics provides resources for the Jewish community and healthcare professionals about recessive disorders, hereditary cancers, and other genetic health issues common among Jewish persons and in interfaith families.

NTD Labs
Booth 402
80 Ruland Road
Melville, NY 11747
Phone: 855.754.5221
ntdlabs.com
NTD Labs, an innovative leader in prenatal screening, provides accurate and timely information to healthcare providers and expectant parents. We achieve this through our unwavering dedication to research, exceptional customer service and continuous improvement. With over four decades of prenatal screening experience in the maternal fetal health industry, NTD Labs was the first to introduce ONTD, Down Syndrome, Early Onset Preeclampsia and first trimester AFP screening.

Oregon Reproductive Medicine
Booth 915
808 SW 15th Avenue
Portland, OR 97205
Phone: 503.290.1537
hello@oregonreproductivemedicine.com
OregonReproductiveMedicine.com
Oregon Reproductive Medicine (ORM) is a world-class fertility center that is passionately committed to helping people grow their families. ORM offers individuals and couples the most cutting-edge technology in vitro fertilization (IVF) and genomic medicine available.

Partners Personalized Medicine Lab for Molecular Medicine
Booth 519
65 Landsdowne Street
Cambridge, MA 02139
Phone: 617.768.8600
Fax: 617.525.4488
lmm@partners.org
partners.org/personalizedmedicine/lmm
The Laboratory for Molecular Medicine (LMM) is a CLIA-certified molecular diagnostic laboratory. We offer comprehensive testing services to support clinical research and clinical practice including single gene, multiple gene panel, exome and genome sequencing.

Perinatal Quality Foundation
Booth 917
Personalis, Inc.
Booth 409
1330 O’Brien Drive
Menlo Park, CA 94025
Phone: 650.752.1300
Fax: 650.752.1301
info@personalis.com
personalis.com
Personalis, Inc. provides clinicians and researchers advanced genome-scale sequencing and interpretation services for inherited genetic disease and cancer. The company’s clinical laboratory is CLIA licensed and CAP accredited.

Pfizer
Booth 528
335 E. 42nd Street
New York, NY 10017
Phone: 949.482.9925
Teresa.rousseau@pfizer.com
Pfizer Rare Diseases - providing biological therapies for rare and ultra rare diseases.

Phenogen Sciences, Inc.
Booth 109
9115 Harris Corners Parkway, Suite 320
Charlotte, NC 28269
Phone: 877.992.7382
Fax: 704.926.5707
customersupport@phenogen.com
www.brevagenplus.com
BREVAGenplus™ is the first clinically validated, genetic-based risk assessment test for sporadic (non-hereditary) breast cancer. BREVAGenplus™ combines clinical risk factors with genetic markers for a more accurate assessment of a woman’s 5-year and lifetime risk.

PreventionGenetics
Booth 701
3800 South Business Park Avenue
Marshfield, WI 54449
Phone: 715.387.0484
Fax: 715.384.3661
clinicalnatesting@preventiongenetics.com
preventiongenetics.com
PreventionGenetics is a leader in providing comprehensive clinical DNA testing testing offering sequencing for over 1,600 genes and deletion/duplication testing for over 1,500 genes. PreventionGenetics is CAP/CLIA accredited.

Proband - The Children’s Hospital of Philadelphia
Booth 823
3535 Market Street, Suite 1024
Philadelphia, PA 19104
Phone: 267.426.7522
Fax: 215.590.5245
vitod@email.chop.edu
probandapp.com
Proband is an iPad® app that captures a patient’s genetic pedigree during the clinical encounter. Proband Connect synchronizes pedigrees across multiple devices and lets you securely share them with other users, and can integrate with third-party applications.

Progenity
Booth 811
4330 La Jolla Village Drive, Suite 200
San Diego, CA 92122
Phone: 855.293.2639
Fax: 760.268.0771
client.services@progenity.com
progenity.com
At Progenity, we partner with clinicians to offer advanced diagnostic tests that help patients and their families Prepare for Life. Progenity’s genetic counselors work as part of the healthcare team.
Progeny Genetics
Booth 326

Providence Health & Services
Booth 530
2201 Lind Avenue SW
Renton, WA 98057
Phone: 877.5646.747 (JOIN.PHS)
jobs@providence.org
providencerecruiting.jobs
Providence Health & Services is the third-largest not-for-profit health system in the country, serving five western states. Our vision is to create healthier communities together, with special focus on the poor and vulnerable.

Quest Diagnostics
Booth 817
3 Giralda Farms
Madison, NJ 07940
Phone: 973.520.2793
www.questdiagnostics.com
Quest Diagnostics, the world’s leading provider of diagnostic testing, information and services, offers a comprehensive Genetics Testing menu, including Prenatal and Neonatal, Oncology, Neurology and Endocrinology. We empower health with diagnostic insights.

Recordati Rare Diseases Inc.
Booth 327
100 Corporate Drive
Lebanon NJ 08833
Phone: 908.236.0888
Fax: 908.236.0028
info@recordatirarediseases.com
recordatirarediseases.com
Recordati Rare Diseases is a biopharmaceutical company committed to providing therapies to people with rare diseases. Our team works with rare disease communities to increase awareness, improve diagnosis and ensure access to effective treatments.

Reprogenetics and Recombine
Booth 308
3 Regent Street, Suite 301
Livingston, NJ 07039
Phone: 973.727.6903
nicole@reprogenetics.com
Recombine and Reprogenetics, CooperSurgical Companies, are your partners in comprehensive and seamless reproductive genetic testing. Dedicated to providing clinically actionable expanded carrier screening, NIPS, PGS, and PGD results, Reprogenetics and Reprogenetics are advancing the field of reproductive genetics and empowering families worldwide.

Retrophin
Booth 912
Sanofi Genzyme
Booth 400
500 Kendall Street
Cambridge, MA 02142
Phone: 617.768.6140
valery.osias@genzyme.com
Sanofi Genzyme focuses on developing specialty treatments for debilitating disease and treat, providing hope to patients and their families.

Seattle Children’s Hospital,
PLUGS Program
Booth 709
4800 Sand Point Way NE
Seattle, WA 98105
Phone: 206.987.3361
plugs@seattlechildrens.org
plugs@seattlechildrenslab.org/plugs
PLUGS (Pediatric Laboratory Utilization Guidance Services) mission is to reduce test ordering errors in the U.S. and decrease the financial burden of unnecessary testing on families. PLUGS began in 2012, and has grown into a national collaboration of 60 institutions.

Sequenom, Inc.
Booth 708
3595 John Hopkins Court
San Diego, CA 92121
Phone: 877.821.7266
info@sequenom.com
sequenom.com
Sequenom, Inc. is the trusted source for genetic testing that guides reproductive health matters, providing answers that assist patients and physicians in proactively addressing informed family planning.

Shire
Booth 731
300 Shire Way
Lexington, MA 02421
Phone: 617.349.0200
drafferty0@shire.com
shire.com
Shire is the leading global biotechnology company focused on serving people with rare diseases and other highly specialized conditions. We have best-in-class products available in more than 100 countries across core therapeutic areas including hematology, immunology, neuroscience, lysosomal storage disorders, gastrointestinal/ internal medicine/endocrine and hereditary angioedema; a growing franchise in oncology; and an emerging, innovative pipeline in ophthalmics.

Simons VIP Connect
Booth 901
100 N. Academy Avenue; MC: 30-42
Danville, PA 17822
Phone: 855.329.5638
Fax: 570.214.7327
coordinator@simonsvipconnect.org
simonsvipconnect.org
Simons VIP is a family-support community and research initiative aimed at better understanding the medical, learning, and behavioral features of individuals with genetic changes associated with autism spectrum disorder (ASD) and developmental delay.

SimulConsult
Booth 227
27 Crafts Road
Chestnut Hill, MA 02467
Phone: 617.879.1670
Fax: 617.849.5993
info@simulconsult.com
simulconsult.com
SimulConsult provides 3 tools for genetic counselors: a personalized evidence-based list of most useful genes to test for an individual patient based on their findings; automatically-generated letters of medical necessity; and prognosis tables for all inherited disorders.

Sharsheret
Booth 203
1086 Teaneck Road, Suite 2G
Teaneck, NJ 07666
Phone: 866.474.2774
Fax: 201.837.5025
info@sharsheret.org
sharsheret.org
Sharsheret is a national, non-profit organization that supports Jewish women of all backgrounds, facing breast and ovarian cancer—those who are diagnosed and those at high risk.
Southwestern Women’s Options
Booth 306
522 Lomas Boulevard NE
Albuquerque, NM 87102
Phone: 505.242.7512
Fax: 505.242.0540
swoadmin@covad.net
southwesternwomens.com
A clinic owned by Curtis Boyd, MD, the Albuquerque office specializes in third trimester abortion care and offers a unique Fetal Indications Program geared to the special needs of the patient and her family.

Special Angels Adoption
Booth 216
77 Russ Road
Jackson, OH 45640
Phone: 256.452.9504
Fax: 740.422.1675
jennifer@specialangelsadoption.org
specialangelsadoption.org
We are a fully licensed, 501(c)(3) non-profit, custodial adoption agency handling almost exclusively the adoptions of children with special needs. We are based in Ohio but can work with any family in the United States.

The Center for Fetal Diagnosis and Treatment at the Children’s Hospital of Philadelphia
Booth 622
3401 Civic Center Boulevard
Philadelphia, PA 19104
Phone: 800.468.8376 (800.IN.UTERO)
Fax: 215.590.2447
fetalsurgery@email.chop.edu
fetalsurgery.chop.edu
Experts in in prenatal diagnosis and treatment, and home of the first specialized delivery unit exclusively for families carrying a fetus with a congenital anomaly, since 1995 we have provided care for 20,000 pregnancies.

Did you know...
Accurate C9orf72 analysis helps researchers better understand frontotemporal dementia (FTD) and amyotrophic lateral sclerosis (ALS)

The AmplideX® PCR/CE C9orf72 Kit* is a research tool built on the success of our AmplideX® FMR1 product that uses proprietary GC-rich PCR chemistry to provide reliable amplification of pathogenic hexanucleotide repeats (GGGGCC) in the C9orf72 gene that are associated with FTD – the second most common form of early onset dementia after Alzheimer’s Disease – and ALS.

VISIT US AT BOOTH #705
Learn more | Collect a stamp on your Passport to Prizes card

*For research use only. Not for use in diagnostic procedures.
ThinkGenetic, Inc.  
Booth 431  
328 Old Lancaster Road  
Sudbury, MA  
Phone: 866.417.7348 x700  
Fax: 978.443.0186  
info@thinkgenetic.com  
thinkgenetic.com  
ThinkGenetic.com is a revolutionary, informational genetics website that provides a free, personalized, interactive, patient-focused roadmap for those living with a genetic disease and possible directions for those on a diagnostic odyssey.

UAB Medical Genomics Laboratory  
Booth 507  
720 20th Street South, Suite 330  
Birmingham, AL 35294  
Phone: 205.934.5562  
Fax: 205.996.2929  
medgenomics@uabmc.edu  
genetics.uab.edu/medgenomics  
The UAB Medical Genetics Laboratory (MGL) provides sensitive, comprehensive, reliable and cost-effective testing to help with early and accurate diagnosis of genetic disorders. The MGL has a special focus on and expertise in all forms of the neurofibromatoses, the rasopathies and tuberous sclerosis.

UCLA Clinical Genomics Center  
Booth 800  
10833 Le Conte Avenue, AS-370 CHS  
Los Angeles, CA 90095  
Phone: 310.775.5884  
Fax: 818.989.6778  
schw@mednet.ucla.edu  
pathology.ucla.edu/genomics  
UCLA Clinical Genomics Center offers clinical exome sequencing (CES), genetic counseling, and expert interpretation by our Genomic Data Board. CES and our extensive menu of genetic and genomic testing for hereditary disorders, cancer diagnosis/management and other conditions are performed within our CLIA-certified, CAP-accredited Molecular Diagnostics Laboratories. Available techniques include Sanger sequencing, FISH, chromosomal microarray for postnatal and prenatal evaluation, neoplastic conditions, and targeted next gen sequencing panels for lung, colorectal, thyroid and hematologic malignancies.

UCLA Health  
Booth 406  

UAB Medical Genomics Laboratory  
Booth 507  
720 20th Street South, Suite 330  
Birmingham, AL 35294  
Phone: 205.934.5562  
Fax: 205.996.2929  
medgenomics@uabmc.edu  
genetics.uab.edu/medgenomics  
The UAB Medical Genetics Laboratory (MGL) provides sensitive, comprehensive, reliable and cost-effective testing to help with early and accurate diagnosis of genetic disorders. The MGL has a special focus on and expertise in all forms of the neurofibromatoses, the rasopathies and tuberous sclerosis.

UCLA Clinical Genomics Center  
Booth 800  
10833 Le Conte Avenue, AS-370 CHS  
Los Angeles, CA 90095  
Phone: 310.775.5884  
Fax: 818.989.6778  
schw@mednet.ucla.edu  
pathology.ucla.edu/genomics  
UCLA Clinical Genomics Center offers clinical exome sequencing (CES), genetic counseling, and expert interpretation by our Genomic Data Board. CES and our extensive menu of genetic and genomic testing for hereditary disorders, cancer diagnosis/management and other conditions are performed within our CLIA-certified, CAP-accredited Molecular Diagnostics Laboratories. Available techniques include Sanger sequencing, FISH, chromosomal microarray for postnatal and prenatal evaluation, neoplastic conditions, and targeted next gen sequencing panels for lung, colorectal, thyroid and hematologic malignancies.

UCSF Fetal Treatment Center  
Booth 222  
1855 Fourth Street, 2nd Floor, A-2432  
San Francisco, CA 94158  
Phone: 800.RX.FETUS  
Fax: 415.502.0660  
fetus@surgery.ucsf.edu  
fetus.ucsf.edu  
The UCSF Fetal Treatment Center is a world leader in diagnosing and treating birth defects before delivery. We offer comprehensive, family-centered care in one location, from diagnosis and prenatal management through postnatal care and long-term follow-up.

Ultragenyx Pharmaceutical  
Booth 114  
60 Leveroni Court  
Novato, CA 94949  
Phone: 415.483.8800  
Fax: 415.483.8810  
info@ultragenyx.com  
ultragenyx.com  
Ultragenyx is a clinical-stage biopharmaceutical company committed to bringing to market novel products for the treatment of rare and ultra-rare diseases, with a focus on serious, debilitating genetic diseases.

University of Chicago Genetic Services Laboratories  
Booth 526  
5841 S Maryland Avenue, MC0077  
Chicago, IL 60637  
Phone: 773.834.0555  
Fax: 773.702.9130  
ucgslabs@genetics.uchicago.edu  
dnatesting.uchicago.edu  
UCGSL offers cutting-edge clinical DNA diagnostic services. Our test menu includes exome sequencing, in addition to testing for a wide range of disorders including brain malformations, ataxia, epilepsy, neuromuscular disorders, hereditary cancers and endocrine disorders.

University of Washington  
Booth 911  
1959 NE Pacific Avenue  
Seattle, WA 98195  
Phone: 206.598.6429  
Fax: 206.598.0304  
genelab@uw.edu  
depx.depts.washington.edu/labweb/DivisionsMolDiag/MolDiagGen/index.htm  
UW-OncoPlex is a multiplexed gene sequencing panel that detects mutations in tumor tissue in 194 cancer-related genes; BROCA genetic risk panel for 62 genes; Coloseq and Coloseq Tumor genetic test using NGS.

UNMC Human Genetics Laboratory  
Booth 727  
985440 Nebraska Medical Center  
Omaha, NE 68198  
Phone: 402.559.5070  
Fax: 402.559.7248  
humangenetics@unmc.edu  
unmc.edu/geneticslab  
The Human Genetics Laboratory at the University of Nebraska Medical Center (UNMC) is a full-service clinical cytogenetics and molecular genetics laboratory specializing in both constitutional (prenatal and postnatal) and cancer diagnostics for over 40 years.
A world-class health care system with over 62,000 employees, Pittsburgh-based UPMC operates more than 20 academic, community, and specialty hospitals (including four awarded MAGNET recognition), plus over 500 doctors’ offices, outpatient sites, rehabilitation, retirement, and long-term care facilities. UPMC also insures over 2.9 million people through the UPMC Health Plan.

The UW Medicine Center for Precision Diagnostics (CPDx) is a CLIA/CAP Accredited clinical genetic testing program comprised of the Collagen Diagnostic Laboratory, Northwest Clinical Genomics Laboratory, Clinical Flow Cytometry Laboratory, and Clinical Cytogenomics Laboratory.

Valley Children’s Hospital is one of the nation’s largest pediatric hospitals located in Central California. Our facility includes our Genetics and Maternal Fetal Center.

Imagine a career where genetic counselors have

- Diverse clinical roles
- Competitive salaries
- Flexible work schedules
- Opportunities for advancement
- Support from a large network of genetic professionals

Check out Integrated Genetics booth #300 or go to www.labcorpcareers.com to research job opportunities.
**ATTENDANCE VERIFICATION CODES**

In place of badge scanners, an attendance verification code (AVC) is provided in each session to verify attendance. Please use this page to record the AVC for each session you attend. You will be required to enter an AVC for each session you attend to complete an evaluation and claim CEUs.

See page 4 for additional instructions for evaluating sessions and claiming CEUs.

**Tip:** Looking for a way to collect these AVCs quickly? Take a picture of the AVC session sign – available at the back of each session room!

<table>
<thead>
<tr>
<th>SESSION</th>
<th>ATTENDANCE VERIFICATION CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>A01</td>
<td></td>
</tr>
<tr>
<td>A02</td>
<td></td>
</tr>
<tr>
<td>A03</td>
<td></td>
</tr>
<tr>
<td>A04</td>
<td></td>
</tr>
<tr>
<td>A05</td>
<td></td>
</tr>
<tr>
<td>A06</td>
<td></td>
</tr>
<tr>
<td>A07</td>
<td></td>
</tr>
<tr>
<td>A08</td>
<td></td>
</tr>
<tr>
<td>A09</td>
<td></td>
</tr>
<tr>
<td>B01</td>
<td></td>
</tr>
<tr>
<td>B02</td>
<td></td>
</tr>
<tr>
<td>B03</td>
<td></td>
</tr>
<tr>
<td>B04</td>
<td></td>
</tr>
<tr>
<td>B05</td>
<td></td>
</tr>
<tr>
<td>B06</td>
<td></td>
</tr>
<tr>
<td>B07</td>
<td></td>
</tr>
<tr>
<td>B08</td>
<td></td>
</tr>
<tr>
<td>B09</td>
<td></td>
</tr>
<tr>
<td>B10</td>
<td></td>
</tr>
<tr>
<td>B11</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SESSION</th>
<th>ATTENDANCE VERIFICATION CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>B12</td>
<td></td>
</tr>
<tr>
<td>B13</td>
<td></td>
</tr>
<tr>
<td>B14</td>
<td></td>
</tr>
<tr>
<td>B15</td>
<td></td>
</tr>
<tr>
<td>B16</td>
<td></td>
</tr>
<tr>
<td>B17</td>
<td></td>
</tr>
<tr>
<td>B18</td>
<td></td>
</tr>
<tr>
<td>B19</td>
<td></td>
</tr>
<tr>
<td>C01</td>
<td></td>
</tr>
<tr>
<td>C02</td>
<td></td>
</tr>
<tr>
<td>C03</td>
<td></td>
</tr>
<tr>
<td>C04</td>
<td></td>
</tr>
<tr>
<td>C05</td>
<td></td>
</tr>
<tr>
<td>C06</td>
<td></td>
</tr>
<tr>
<td>C07</td>
<td></td>
</tr>
<tr>
<td>C08</td>
<td></td>
</tr>
<tr>
<td>C09</td>
<td></td>
</tr>
<tr>
<td>C10</td>
<td></td>
</tr>
<tr>
<td>C11</td>
<td></td>
</tr>
<tr>
<td>C12</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SESSION</th>
<th>ATTENDANCE VERIFICATION CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>C13</td>
<td></td>
</tr>
<tr>
<td>C14</td>
<td></td>
</tr>
<tr>
<td>C15</td>
<td></td>
</tr>
<tr>
<td>C16</td>
<td></td>
</tr>
<tr>
<td>D01</td>
<td></td>
</tr>
<tr>
<td>D02</td>
<td></td>
</tr>
<tr>
<td>D03</td>
<td></td>
</tr>
<tr>
<td>D04</td>
<td></td>
</tr>
<tr>
<td>D05</td>
<td></td>
</tr>
<tr>
<td>D06</td>
<td></td>
</tr>
<tr>
<td>D07</td>
<td></td>
</tr>
<tr>
<td>D08</td>
<td></td>
</tr>
<tr>
<td>D09</td>
<td></td>
</tr>
<tr>
<td>D10</td>
<td></td>
</tr>
<tr>
<td>D11</td>
<td></td>
</tr>
<tr>
<td>D12</td>
<td></td>
</tr>
<tr>
<td>D13</td>
<td></td>
</tr>
</tbody>
</table>
Our advanced genetic testing solutions in neurology, women's health, and oncology help you make accurate diagnoses, guide targeted patient management, and provide important familial implications—because the more you know, the more you can do.

Learn more about how Quest Diagnostics is helping advance the science of genomics by attending one of more than a dozen presentations by our genetic counselors during the NSGC's 2016 Annual Education Conference. Highlights include:

- **When hoofbeats mean horses: new insights into the science and personal impact of diagnosing and treating alzheimer's disease**
  Susan Hahn, MS, CGC, Neurogenetic Outreach Specialist
  Thursday, September 29, 1:30-3:00 pm, Room B16

- **Genetic counselors in emerging roles**
  Steven Keiles, MS, LCGC, Director, Genetic Counselor Organization
  Friday, September 30, 5:00-5:45 pm, Room C15

To see a complete list of Quest Diagnostics speakers at the NSGC, visit [QuestDiagnostics.com/2016NSGCPresentations](http://www.QuestDiagnostics.com/2016NSGCPresentations)
ACMG...Be a Part of It

Education for Your Professional Development
ACMG provides a full range of learning experiences from introductory content for students to advanced practice education for medical genetics professionals. Learn in the environment that meets your needs; attend live conference and training events or access CME anywhere using our Genetics Academy site for online webinars, learning modules and recorded content.
Visit www.acmg.net/education to start your learning experience today.

Save The Dates:
2017 Genetics and Genomics Review Course | May 4–7 | www.acmg.net

Collaborate and Share Your Knowledge and Expertise – Network, Volunteer, Comment, Advocate
• Network with medical genetics professionals from around the world through our LinkedIn, Facebook and Twitter pages.
• Connect with the leaders in medical genetics by joining an ACMG committee, workgroup or special interest group.
• Take action – look for ACMG Advocacy alerts or visit our Advocacy page and help with our public policy activities.
• Respond to our email alerts asking for input on draft ACMG standards and guidelines.

Products, Tools and Resources to Help Your Practice, Lab or Career
• ACMG/NBSTRN connects researchers to essential tools with the Longitudinal Pediatric Data Resource (LPDR), the Laboratory Performance Database (R4S) and the Virtual Repository of Dried Blood Spots (VRDBS). Visit www.nbstrn.org to learn more.
• ACMG ACT Sheets Mobile App is available to download on Apple and Android devices, a clinical decision support tool that informs clinicians about genetic conditions.
• ACMG’s National Coordinating Center for the Regional Genetic Services Collaboratives seeks to improve the availability, accessibility, and quality of genetic services for individuals with, or at risk, for genetic conditions and their families. Visit nccrcg.org to learn more about the NCC and your Regional Collaborative.
• Genetics in Medicine, the ACMG in Action electronic newsletter and The ACMG Medical Geneticist magazine provide members with timely research, industry news, tools, advocacy updates and resources.
• ACMG ICD-10 Pocket Guides and The ACMG Salary Survey provide Genetics professionals with genetic services coding and compensation standards within the field.
• Find a job or list an opening on the ACMG Employment Resource Center at http://careers.acmg.net/.

ACMG...BE A PART OF IT
Learn more today! Visit www.acmg.net