

Supplementary Appendix

This appendix has been provided by the authors to give readers additional information about their work.

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SUPPLEMENTARY APPENDIX

Resolution of Disease Phenotypes Resulting from Multilocus Genomic Variation

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SECTION S1

R code used in statistical analysis of multiple molecular diagnoses

```
error.bar <- function(x, y, upper, lower=upper, length=0.1,...){  
  if(length(x) != length(y) | length(y) !=length(lower) | length(lower) != length(upper))  
    stop("vectors must be same length")  
  arrows(x,y+upper, x, y-lower, angle=90, code=3, length=length, ...)  
}
```

Poisson model. Rate parameter estimator is the Sample Mean of the observations

```
lam<-(1975*1+92*2+3*3+1*4)/7374
```

variance of the rate parameter estimate is the variance of the sample mean:

```
V(xbar)=V(X)/N = lambda/N. #SE(hat(lambda))= sqrt(lambda/N)  
#sde<-sqrt(lam/7374)
```

the estimator of theta = rate of singleton diagnoses.

```
theta<-1975/7374
```

Constructing a probability mass distribution on 0,1,2,3,4 for the independence model

```
idist<-c(theta,theta^2,theta^3,theta^4)  
idists<-c(1-sum(idist),idist)
```

the random variable for count_singletons is a binomial variate with variance = $p*(1-p)$ where $p=idists[1]$

Using Taylor Approximations to obtain variance estimate for the frequency of multiple diagnoses

using the parameter estimates from each model

```
v.pmodel<-function(k,theta=0.2959045,N=7374){  
  N*theta^1/(prod(k)^2)*(-exp(-theta)*theta^k + k*theta^(k-1)*exp(-theta))^2  
}
```

```
v.imodel<-function(k,theta=idists[2],N=7374){  
  k^2*N*theta^(2*k-1)*(1-theta)  
}
```

```
e.idist<-7374*idists[-1]  
e.pdist<-7374*dpois(1:4,lam)
```

```
intervals.poisson<-sapply(seq(1:4),function(k){c(e.pdist[k]-1.96*sqrt(v.pmodel(k)),  
  e.pdist[k]+1.96*sqrt(v.pmodel(k))}))  
intervals.independence<-sapply(seq(1:4),function(k){c(e.idist[k]-1.96*sqrt(v.imodel(k)),  
  e.idist[k]+1.96*sqrt(v.imodel(k))}))
```

```
ip<-apply(intervals.poisson,2,function(x){paste('(',round(x[1],2),',',round(x[2],2),')',sep='')})
ii<-apply(intervals.independence,2,function(x){paste('(',round(x[1],2),',',round(x[2],2),')',sep='')})

forTable<-cbind(c(1,2,3,4),round(e.pdist,2),round(e.idist,2),ip,ii)
colnames(forTable)<-
c('Diagnoses','Poisson.Expected','Alternative.Expected','CI.95_Poisson','CI.95.Alternative')
write.table(forTable,file='vals_withCI.txt',sep='\t',col.names=T,row.names=F,quote=F)

png('SupplementalFigure_barplot.png')
b<-
barplot(rbind(c(1975,97,3,1),e.pdist,e.idist),beside=T,col=c('black','darkgrey','lightgrey'),ylim=c(0,2500))
legend(10,2000,legend=c("Observed", 'Poisson', 'Independent'),fill=c('black','darkgrey','lightgrey'))
error.bar(b[2,1],e.pdist[1],upper=1.96*sqrt(v.pmodel(1)),lower=0)
error.bar(b[2,2],e.pdist[2],upper=1.96*sqrt(v.pmodel(2)),lower=0)
error.bar(b[2,3],e.pdist[3],upper=1.96*sqrt(v.pmodel(3)),lower=0)
error.bar(b[2,4],e.pdist[4],upper=1.96*sqrt(v.pmodel(4)),lower=0)

error.bar(b[3,1],(idists[2])*7374,upper=1.96*sqrt(v.imodel(1)),lower=0)
error.bar(b[3,2],idists[3]*7374,upper=1.96*sqrt(v.imodel(2)),lower=0)
error.bar(b[3,3],idists[4]*7374,upper=1.96*sqrt(v.imodel(3)),lower=0)
error.bar(b[3,4],idists[5]*7374,upper=1.96*sqrt(v.imodel(4)),lower=0)
dev.off()
```

SECTION S2

METHODS

Variant Analysis

The false positive error rate for variants identified by WES is 2.68% for single nucleotide variants (SNV) and 14.84% for indels. Sanger sequencing was used as an orthogonal approach to eliminate next generation sequencing (NGS)-based false positive calls and segregate candidate diagnostic SNVs and short indels in the proband and available family members. The false positive error rate resulting from classification of variants identified by WES and confirmed by Sanger sequencing represents an additional source of error, and a recent study concordance in variant classification across nine diagnostic laboratories demonstrates only 34% concordance across laboratories.¹

American College of Medical Genetics and Genomics/Association for Molecular Pathology (ACMG/AMP) guidelines for variant interpretation in Mendelian disorders (2015)^{2,3} recommend a five-tier system (pathogenic, likely pathogenic, variant of uncertain significance (VUS), likely benign, benign) for variant classification, but acknowledge that additional tiers for sub-classification of VUS may be added.^{2,3} The Baylor Genetics (BG) diagnostic laboratory uses a modified set of criteria that was developed before professional society guidelines were established and extends beyond the current ACMG guidelines (**File S3**).^{4,5} All variants reported here were re-analyzed by these optimized criteria. Pathogenic, likely pathogenic, or VUS favoring likely pathogenic status in Mendelian disease genes consistent with the expected inheritance and observed phenotype were required for a case to be considered to have a molecular diagnosis (**Table S5**).^{4,5} Phenotypic information was provided upon referral to WES, and in many cases, physicians were re-contacted following issue of the initial WES report to investigate whether the clinical impression supported pathogenicity for the reported variants.

Reported deletions were confirmed by PCR following detection through WES read depth analysis, or known prior to WES analysis (5 cases, **Table S3**). A single reported copy number gain was identified by concurrent WES and cSNP array analysis.

Phenotype Analyses

To determine phenotypic similarity between expected clinical findings associated with each of the dual molecular diagnoses, we used the set of OMIM diseases that have been mapped to the Human Phenotype Ontology (HPO) database,^{6,7} <http://human-phenotype-ontology.github.io/downloads.html>. Copy number variation (CNV) encompassing multiple genes and for which a single candidate gene has not been identified as being responsible for the phenotype were excluded. For the 80 dual molecular diagnoses for which OMIM diseases have been mapped to the HPO database,^{7,8} HPO terms were analyzed to compute phenotype similarity scores between disease pairs using a symmetrized Resnik method (**File S4**).^{8,9} Similarity scores were re-scaled to a value between 0 and 1. GeneMANIA was used to visualize physical interactions between protein pairs.¹⁰

Statistical modeling of multiple diagnoses

No established formalism exists for a statistical model of multiple diagnoses for exome-wide genetic diagnostics in a referral laboratory testing population. There are many attributes to consider in developing such a model. First, the genotypic substrate of multiple diagnoses is the exome-wide exposure of each individual to mutation and transmission of genetic variation that cause disease. This genetic variation must be ascertainable in the exome without causing

embryonic lethality. Many combinations of genetic disease causing variations may exclude viability. The determination of viable and non-viable combinations of variation cannot be ethically determined in humans by experimental means. Second, the referral population comprises the set of individuals and families who have phenotypes consistent with suspected genetic disease and yet who also have socio-economic, geographic or other means to access expensive exome-wide diagnostics. Moreover, the set of diagnoses we are considering are constrained to the reporting criteria as set forth by the ACMG. Recent papers have shown the application of these standards does not produce equivalent results across independent laboratories. Given the challenges set forth above, it is necessary to proceed empirically to establish a statistical model.

Poisson Model

The Poisson model presumes each proband's genome is exposed to a large number of independent potential genetic diagnoses (variations) and that each of these arises rarely in each case, so that the product of the number of potential diagnostic variations and the chance of these occurring converges to a modest non-zero value, which is the Poisson rate parameter. Under a set of well-established probabilistic axioms, such processes yield counting variables with the Poisson distribution, which gives probability values to any non-negative integer number of diagnoses in an individual case. The limitations of this model are that it does not consider exclusionary properties between pairs of diagnostic variations; the model also does not treat the inhomogeneous nature of mutation across the exome, nor does it consider the population load of recessive alleles and the complexity of dominant, recessive or sex-linked modes of inheritance. Still the model forms a strong heuristic to initiate the inquiry. The estimation of the rate parameter of the Poisson is the sample mean number of diagnoses per individual observed across

the exome cohort. The model does not constrain the maximum number of diagnoses. For a distribution with rate parameter λ , the notation below gives the probability for the chance of k diagnoses per individual:

$$P(X = k) = \frac{e^{-\lambda} \lambda^k}{k!}$$

Independence Model

To provide an alternative to the Poisson model, we considered a more direct and constrained independence model for the occurrence of multiple diagnoses. Under this model we considered that singleton diagnoses occur at a rate θ . We then model the chance of doubleton diagnoses as θ^2 , triples as θ^3 and quads as θ^4 . We limit the maximum number of diagnoses at four and considered the chance of no diagnosis as $1 - \theta - \theta^2 - \theta^3 - \theta^4$. The resulting probability distribution places positive mass on the five states $S=\{0,1,2,3,4\}$. We infer θ using the number of singleton diagnoses observed in our cohort, which in the case of this model is a binomial random variable with rate θ . We then use this estimate of θ to determine the expected chance of 2, 3, and 4 diagnoses by squaring, cubing, and raising to the fourth power, respectively.

Confidence intervals:

To determine confidence intervals for the number of multiple diagnoses estimated under the Poisson and alternative statistical models we use the statistical error of the parameter estimate for each model together with established methods for approximating the variance of functions of random variables – in this case these are functions that determine the expected amounts of multiple diagnoses under each model. We then employ the normal approximation to determine interval boundaries.

The first step is to determine the variance of the parameter estimates. For the Poisson model, we have the variance of the sample mean: $V(\hat{\lambda}) = \frac{\lambda}{N}$. For the independence model, we have

$(\hat{\theta}) = \frac{\theta(1-\theta)}{N}$, because our estimate is derived from N observations of a binomial variable with rate θ . We can use the plugin values of the parameter estimates themselves to determine these quantities.

Next we use Taylor approximation to the variance of a function of a random variable, which in this case will be our parameter estimates. Considering $\hat{\lambda}$ as a generic estimator, we have:

$$V(f(\hat{\lambda})) = V(\hat{\lambda})[f'(\hat{\lambda})]^2$$

In the case of each model the probability mass function of the distribution determines f , and we can use differentiation and evaluation at the parameter estimate to obtain the variance values.

Then, using a normal approximation we obtain the factor of 1.96 to determine a 95% confidence interval around the expected number of diagnoses for each model.

SECTION S3

**Baylor Genetics
Procedure Manual**

Document Type:	SOP	Effective date: Oct. 2015
Title:	Criteria for Variant Classification-Modified ACMG Criteria	
Applies to:	BG Molecular Tests	
Author	Yaping Yang, Jing Wang, Eric Schmitt, Fan Xia, Ping Fang, Magdalena Walkiewicz, Jinglan Zhang, Jennifer Scull, Liu Liu, Fangyuan Li and other BG molecular directors	

PURPOSE

Provide criteria for variant classification based on the 2015 ACMG/AMP guidelines (Richards S, et al. ACMG Laboratory Quality Assurance Committee. Standards and guidelines for the interpretation of sequence variants: a joint consensus recommendation of the American College of Medical Genetics and Genomics and the Association for Molecular Pathology. *Genetics in Medicine* (2015) 17, 405-423. PMID: 25741868).

BG approved criteria are labeled with “[BG]”

1. Criteria for Classifying Pathogenic Variants

This section is based on “Table 3. Criteria for Classifying Pathogenic Variants” of the 2015 ACMG guidelines

Notes [BG]

- Avoid applying similar evidence twice: e.g. PS2 and PM6 (*de novo* criteria) cannot be both invoked for a variant in a patient; if all evidences from the literature were considered and counted and related criteria are invoked, then PP5 or BP6 cannot be invoked again as an additional line of evidence.
- Criterion can be “upgraded” or “downgraded” based on the strength of the evidence using lab director’s professional judgements. Suggested classification in BG: “FINAL CLASSIFICATION_ORIGINAL CRITERION”, e.g. PM_PS3 (meaning an evidence considered using PS3 is downgraded to PM as the final classification).

Very strong evidence of pathogenicity

PVS1 Null variant (nonsense, frameshift, canonical +/-1 or 2 splice sites, initiation codon, single or multi-exon deletion) in a gene where loss of function (LOF) is a known mechanism of disease.

Caveats:

- Beware of genes where LOF is not a known disease mechanism (e.g. *GFAP*, *MYH7*)
- Use caution interpreting LOF variants at the extreme 3' end of a gene.
- **[BG]**: Changes in the first and last exon will be auto-alerted in the analysis pipeline and considered on a case by case basis.
- Use caution with splice variants that are predicted to lead to exon skipping but leave the remainder of the protein intact
- Use caution in the presence of multiple transcripts
- **[BG]**: For splice sites, the change should affect the invariant GT/AG (+/-1 or 2 position) sequences for U2 introns
- **[BG]**: A start codon may not be qualified as a *bona fide* pathogenic variant if there is another Methionine downstream and close by. Classification should be on a case-by-case basis

Strong evidence of pathogenicity

PS1 Same amino acid change as a previously established pathogenic variant regardless of nucleotide change

Example: Val->Leu caused by either G>C or G>T in the same codon
 Caveat: Beware of changes that impact splicing rather than at the amino acid/protein level

PS2 *De novo* (both maternity and paternity confirmed) in a patient with the disease and no family history

Note: Confirmation of paternity only is insufficient. Egg donation, surrogate motherhood, errors in embryo transfer, *etc.* can contribute to nonmaternity

Note **[BG]**: use this rule for AD, X-linked disorders or mitochondrial disorders. For AR disorder, PM3 should also be considered.

PS3 Well-established *in vitro* or *in vivo* functional studies supportive of a damaging effect on the gene or gene product *

Note: Functional studies that have been validated and shown to be reproducible and robust in a clinical diagnostic laboratory setting are considered the most well-established

* **[BG]**: Enzyme studies on the patient samples do not necessarily connect a particular change with biochemical results. Mutagenesis studies may be needed. For carrier, the report should only consider well established clinical tests that have confirmative value as valid functional study.

PS4 The prevalence of the variant in affected individuals is significantly increased compared to the prevalence in controls

Note 1: Relative risk (RR) or odds ratio (OR), as obtained from case-control studies, is >5.0 and the confidence interval around the estimate of RR or OR does not include 1.0. See manuscript for detailed guidance.

Note 2: In instances of very rare variants where case-control studies may not reach statistical significance, the prior observation of the variant in multiple unrelated patients with the same phenotype, and its absence in controls, may be used as moderate level of evidence.

PS5 **[BG]**: Mosaicism in a parent for AD or X-linked disorders

PS6 **[BG]**: ≥ 2 independent occurrences of PM6 (assumed *de novo*, but without confirmation of paternity and maternity), from internal and/or published data

PS7 **[BG]**: ≥ 2 independent occurrences of PM7 (PVS1 variant in a gene in which a truncating variant or large deletion was previously reported in a patient) from internal and/or published data

PS8 **[BG]**: in-frame single exon skipping, or gross deletion results in in-frame single exon deletion in a domain of known function

Moderate evidence of pathogenicity

PM1 Located in a mutational hot spot and/or critical and well-established functional domain (e.g. active site of an enzyme) without benign variation

PM2 Absent from controls (or at extremely low frequency if recessive) (see Table 6) in Exome Sequencing Project, 1000 Genomes or ExAC
Caveat: Population data for indels may be poorly called by next generation sequencing

Note **[BG]**: Population specific data can be used

PM3 For recessive disorders, detected in *trans* with a pathogenic variant

Note: This requires testing of parents (or offspring) to determine phase

PM4 Protein length changes due to in-frame deletions/insertions in a non-repeat region or stop-loss variants

PM5 Novel missense change at an amino acid residue where a different

missense change determined to be pathogenic has been seen before

Example: Arg156His is pathogenic; now you observe Arg156Cys
Caveat: Beware of changes that impact splicing rather than at the amino acid/protein level

- PM6 Assumed *de novo*, but without confirmation of paternity and maternity
- PM7 **[BG]**: PVS1 variant in a gene in which a truncating variant or large deletion was previously reported in a patient
- PM8 **[BG]**: Small in-frame changes that are located in a region where similar in-frame change(s) were previously reported in patient(s)

Supporting evidence of pathogenicity

- PP1 Co-segregation with disease in multiple affected family members in a gene definitively known to cause the disease

Note: May be used as stronger evidence with increasing segregation data

- PP2 Missense variant in a gene that has a low rate of benign missense variation and where missense variants are a common mechanism of disease

- PP3 Multiple lines of computational evidence support a deleterious effect on the gene or gene product (conservation, evolutionary, splicing impact, etc)

Caveat: As many *in silico* algorithms use the same or very similar input for their predictions, each algorithm should not be counted as an independent criterion. PP3 can be used only once in any evaluation of a variant.

Note **[BG]**: Current consensus among CSER sites is “all or none”: apply this rule if all prediction programs used in a lab support the variant to be “deleterious” or “benign”. If there are conflicting predictions, then don’t invoke this criterion.

- PP4 Patient’s phenotype or family history is highly specific for a disease with a single genetic etiology

- PP5 Reputable source recently reports variant as pathogenic but the evidence is not available to the laboratory to perform an independent evaluation

Note **[BG]**: only invoke when there is new evidence from the source that was not considered for other criteria during the variant evaluation.

2. Criteria for Classifying Benign Variants

This section is based on “Table 4. Criteria for Classifying Benign Variants” of the 2015 ACMG guidelines

Stand-Alone evidence of benign impact

BA1 Allele frequency is above 5% in Exome Sequencing Project, 1000 Genomes, or ExAC

Note [BG]: Population specific data can be used

Strong evidence of benign impact

BS1 Allele frequency is greater than expected for disorder (see table 6)

Note [BG]: Population specific data can be used

BS2 Observed in a healthy adult individual for a recessive (homozygous), dominant (heterozygous), or X-linked (hemizygous) disorder with full penetrance expected at an early age

Note [BG]: per CSER, it is preferred not to apply both BS1 and BS2 based on the same set of data. e.g. if BS1 is applied based on ExAC data, then other data (such as parental data) is preferred to use if BS2 is to be applied too.

BS3 Well-established *in vitro* or *in vivo* functional studies shows no damaging effect on protein function or splicing

BS4 Lack of segregation in affected members of a family

Caveat: The presence of phenocopies for common phenotypes (*i.e.* cancer, epilepsy) can mimic lack of segregation among affected individuals. Also, families may have more than one pathogenic variant contributing to an autosomal dominant disorder, further confounding an apparent lack of segregation.

Supporting evidence of benign impact

BP1 Missense variant in a gene for which primarily truncating variants are known to cause disease

BP2 Observed in *trans* with a pathogenic variant for a fully penetrant dominant gene/disorder; or observed in *cis* with a pathogenic variant in any inheritance pattern

BP3 In-frame deletions/insertions in a repetitive region without a known

function

- BP4 Multiple lines of computational evidence suggest no impact on gene or gene product (conservation, evolutionary, splicing impact, etc.)

Caveat: As many *in silico* algorithms use the same or very similar input for their predictions, each algorithm cannot be counted as an independent criterion. BP4 can be used only once in any evaluation of a variant.

Note **[BG]**: Current consensus among CSER sites is “all or none”: apply this rule if all prediction programs used in a lab support the variant to be “deleterious” or “benign”. If there are conflicting predictions, then don’t invoke this criterion.

- BP5 Variant found in a case with an alternate molecular basis for disease

- BP6 Reputable source recently reports variant as benign but the evidence is not available to the laboratory to perform an independent evaluation

Note **[BG]**: only invoke when there is new evidence from the source that was not considered for other criteria during the variant evaluation

- BP7 A synonymous (silent) variant for which splicing prediction algorithms predict no impact to the splice consensus sequence nor the creation of a new splice site AND the nucleotide is not highly conserved

3. Rules for Combining Criteria

This section is based on “Table 5. Rules for Combining Criteria” of the 2015 ACMG guidelines

Pathogenic

- 1) 1 Very Strong (PVS1) *AND*
 - a) ≥ 1 Strong (PS1-PS4) *OR*
 - b) ≥ 2 Moderate (PM1-PM6) *OR*
 - c) 1 Moderate (PM1-PM6) and 1 Supporting (PP1-PP5) *OR*
 - d) ≥ 2 Supporting (PP1-PP5)
- 2) ≥ 2 Strong (PS1-PS4) *OR*
- 3) 1 Strong (PS1-PS4) *AND*
 - a) ≥ 3 Moderate (PM1-PM6) *OR*
 - b) 2 Moderate (PM1-PM6) *AND* ≥ 2 Supporting (PP1-PP5) *OR*
 - c) 1 Moderate (PM1-PM6) *AND* ≥ 4 Supporting (PP1-PP5)

Likely Pathogenic

- 1) 1 Very Strong (PVS1) *AND* 1 Moderate (PM1-PM6) *OR*
- 2) 1 Strong (PS1-PS4) *AND* 1-2 Moderate (PM1-PM6) *OR*
- 3) 1 Strong (PS1-PS4) *AND* ≥ 2 Supporting (PP1-PP5) *OR*
- 4) ≥ 3 Moderate (PM1-PM6) *OR*
- 5) 2 Moderate (PM1-PM6) *AND* ≥ 2 Supporting (PP1-PP5) *OR*
- 6) 1 Moderate (PM1-PM6) *AND* ≥ 4 Supporting (PP1-PP5)

Benign

- 1) 1 Stand-Alone (BA1) *OR*
- 2) ≥ 2 Strong (BS1-BS4)

Likely Benign

- 1) 1 Strong (BS1-BS4) and 1 Supporting (BP1-BP7) *OR*
- 2) ≥ 2 Supporting (BP1–BP7)

***Variants should be classified as Uncertain Significance if other criteria are unmet or the criteria for benign and pathogenic are contradictory.**

SECTION S4

R code used in analysis of phenotypic similarity

R Markdown

```
##### DEFINE GOAL. #####  
  
# ' Compare distinct and overlapping dual-diagnosis cases by:  
# ' 1. Loading precomputed pairwise disease scores.  
# ' 2. Normalizing the pairwise disease score for each case pair.  
# ' 3. Comparatively plotting the two disease classes.  
  
##### Load necessary libraries. #####  
library("SemanticSimilarity")  
  
## Loading required package: parallel  
## Loading required package: tools  
## Loading required package: RMySQL  
## Loading required package: DBI  
## Loading required package: RJSONIO  
## Loading required package: RCurl  
## Loading required package: bitops  
  
##### Load necessary objects. #####  
# Cohort summary table.  
load("allSolvedCases_MasterSummaryTable.RData")  
# Precomputed semantic similarity scores between all pairs of HPO-annotated  
OMIM diseases.  
load("allVsAllDiseaseSimilaritiesResnik.RData")  
  
##### Create necessary functions. #####  
computeNormalizedResnikSimilarityScoreBetweenDiseasePair <- function(diseaseMIMid1,diseaseMIMid2)  
{  
  # Convert MIM IDs into disease names.  
  diseaseName1 <- diseasesInBothHPOandOMIMwithIdentityProperty[diseaseMIMid1,2]  
  diseaseName2 <- diseasesInBothHPOandOMIMwithIdentityProperty[diseaseMIMid2,2]  
  # Extract relativized scores: The pair score divided by the max score possible between
```

```

# them (min of max for each)
resnikSimilarityRelativized <- allVsAllDiseaseSimilaritiesResnik[
  diseaseName1,diseaseName2] /
  min(
    max(allVsAllDiseaseSimilaritiesResnik[diseaseName1,]),
    max(allVsAllDiseaseSimilaritiesResnik[diseaseName2,])
  )
# Return the relativized score.
return(resnikSimilarityRelativized)
}

#### Compute the normalized Resnik similarity score between each disease pair
per diagnosis class. ####
# Display the names of the summary table columns.
colnames(allSolvedCases_MasterSummaryTable)

## [1] "Dual Diagnosis?"      "Dual Diagnosis Class" "Qty. Diagnoses"
## [4] "Gene"                 "OMIM Disease ID"     "OMIM Disease Name"
## [7] "HPO Phenotype Name"   "HPO Phenotype ID"

# Identify all dual-diagnosis cases with both diseases mapped to the HPO.
dualDiagnosisCasesWithHPOterms <- names(which(
  allSolvedCases_MasterSummaryTable[, "Qty. Diagnoses"] == 2 &
  unlist(lapply(allSolvedCases_MasterSummaryTable[, "OMIM Disease ID"], 1
length)) == 2
))
# Identify the case IDs in each disease diagnosis class (overlapping vs. di
stinct).
casesPerClass <- split(
  x=dualDiagnosisCasesWithHPOterms,
  f=unlist(
    allSolvedCases_MasterSummaryTable[
      dualDiagnosisCasesWithHPOterms, "Dual Diagnosis Class"
    ]
  )
)
# Compute the normalized Resnik similarity per disease pair for each diagno
sis class.
normalizedDiseasePairSimilaritiesPerClass <- rev(lapply(
  casesPerClass,
  function(currClass)
  {
    unlist(lapply(
      currClass,
      function(currCaseID)
      {
        currCaseDiagnosisMIMids <- allSolvedCases_MasterSummaryTable[[
          currCaseID, "OMIM Disease ID"
        ]]
        #print(currCaseDiagnosisMIMids)

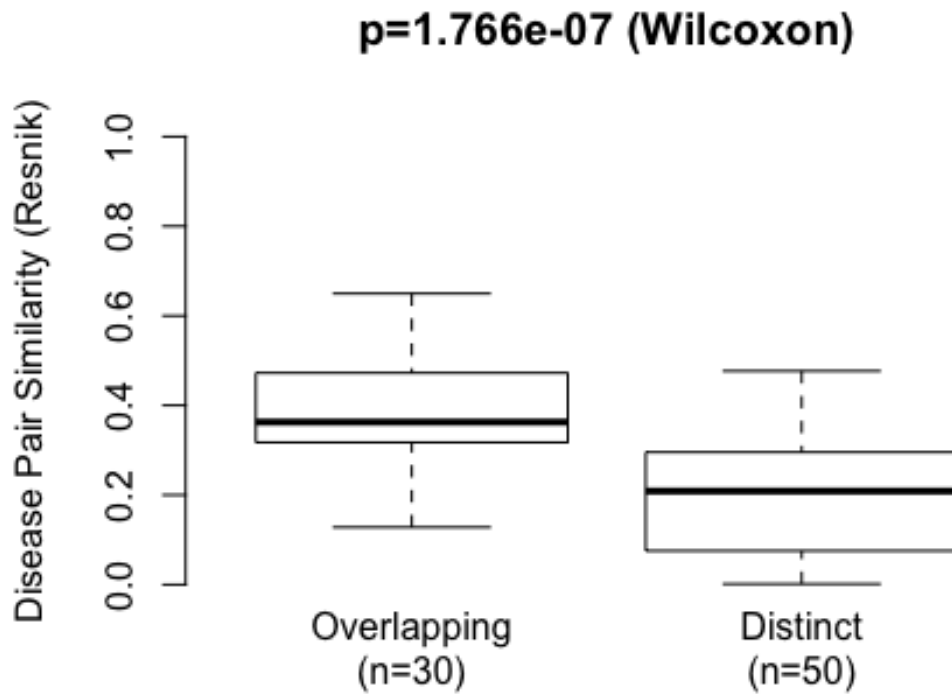
```

```

        computeNormalizedResnikSimilarityScoreBetweenDiseasePair(
            diseaseMIMid1=currCaseDiagnosisMIMids[1],
            diseaseMIMid2=currCaseDiagnosisMIMids[2]
        )
    }
    ))
}
))
save(
    normalizedDiseasePairSimilaritiesPerClass,
    file="normalizedDiseasePairSimilaritiesPerClass.RData"
)

#### Plot the normalized scores. ####
# Similarity scores.
#pdf(file="plots/disease_pair_similarity_per_diagnosis_class_updated.pdf"
,width=7,height=5)
#par(mfrow=c(1,2),mar=c(3,5,3,3))
groupNames <- c(
    paste("Overlapping\n(n=", length(casesPerClass$Overlapping),")", sep=""),
    paste("Distinct\n(n=", length(casesPerClass$Distinct),")", sep="")
)
yAxisLimits <- c(0,1)
# Resnik (relativized)
scoreName <- "Resnik Similarity (relativized)"
pValueResnikRelativized <- paste(
    "p=",
    round(
        wilcox.test(
            normalizedDiseasePairSimilaritiesPerClass$Overlapping,
            normalizedDiseasePairSimilaritiesPerClass$Distinct
        )$p.value,
        digits=10
    ),
    " (Wilcoxon)",
    sep=""
)
boxplot(
    normalizedDiseasePairSimilaritiesPerClass,
    ylab="Disease Pair Similarity (Resnik)", main=pValueResnikRelativized
,
    ylim=yAxisLimits, outline=FALSE, axes=FALSE
)
axis(side=2)
axis(side=1, labels=groupNames, at=1:2, lwd=0)

```



#dev.off()

R code used in statistical analysis of multiple molecular diagnoses

```
error.bar <- function(x, y, upper, lower=upper, length=0.1,...){
  if(length(x) != length(y) | length(y) !=length(lower) | length(lower) != length(upper))
  stop("vectors must be same length")
  arrows(x,y+upper, x, y-lower, angle=90, code=3, length=length, ...)
}

### Poisson model. Rate parameter estimator is the Sample Mean of the observations
lam<-(1975*1+92*2+3*3+1*4)/7374

### variance of the rate parameter estimate is the variance of the sample mean:
V(xbar)=V(X)/N = lambda/N. #SE(hat(lambda))= sqrt(lambda/N)
#sde<-sqrt(lam/7374)

### the estimator of theta = rate of singleton diagnoses.
theta<-1975/7374
### Constructing a probability mass distribution on 0,1,2,3,4 for the independence model
idist<-c(theta,theta^2,theta^3,theta^4)
idists<-c(1-sum(idist),idist)

### the random variable for count_singletons is a binomial variate with variance = p*(1-p) where
p=idists[1]

#### Using Taylor Approximations to obtain variance estimate for the frequency of multiple diagnoses
### using the parameter estimates from each model
v.pmodel<-function(k,theta=0.2959045,N=7374){
  N*theta*1/(prod(k)^2)*(-exp(-theta)*theta^k + k*theta^(k-1)*exp(-theta))^2
}

v.imodel<-function(k,theta=idists[2],N=7374){
  k^2*N*theta^(2*k-1)*(1-theta)
}

e.idist<-7374*idists[-1]
e.pdist<-7374*dpois(1:4,lam)

intervals.poisson<-sapply(seq(1:4),function(k){c(e.pdist[k]-1.96*sqrt(v.pmodel(k)),
  e.pdist[k]+1.96*sqrt(v.pmodel(k)))})
intervals.independence<-sapply(seq(1:4),function(k){c(e.idist[k]-1.96*sqrt(v.imodel(k)),
  e.idist[k]+1.96*sqrt(v.imodel(k)))})

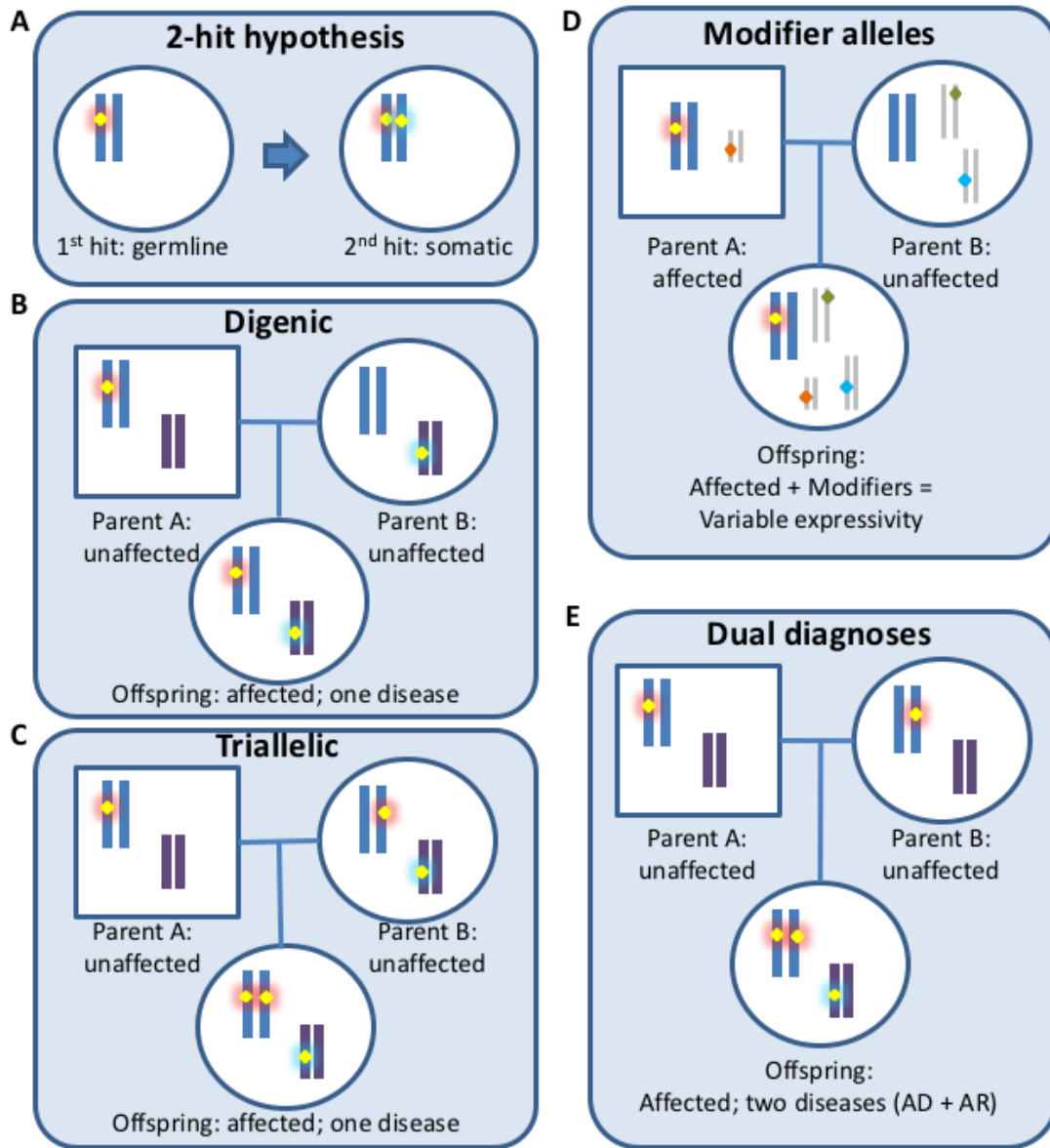
ip<-apply(intervals.poisson,2,function(x){paste('(',round(x[1],2),',',round(x[2],2),')',sep='')})
ii<-apply(intervals.independence,2,function(x){paste('(',round(x[1],2),',',round(x[2],2),')',sep='')})
```

```
forTable<-cbind(c(1,2,3,4),round(e.pdist,2),round(e.idist,2),ip,ii)
colnames(forTable)<-
c('Diagnoses','Poisson.Expected','Alternative.Expected','CI.95_Poisson','CI.95.Alternative')
write.table(forTable,file='vals_withCI.txt',sep='\t',col.names=T,row.names=F,quote=F)

png('SupplementalFigure_barplot.png')
b<-
barplot(rbind(c(1975,97,3,1),e.pdist,e.idist),beside=T,col=c('black','darkgrey','lightgrey'),ylim=c(0,2500))
legend(10,2000,legend=c("Observed", 'Poisson', 'Independent'),fill=c('black','darkgrey','lightgrey'))
  error.bar(b[2,1],e.pdist[1],upper=1.96*sqrt(v.pmodel(1)),lower=0)
  error.bar(b[2,2],e.pdist[2],upper=1.96*sqrt(v.pmodel(2)),lower=0)
  error.bar(b[2,3],e.pdist[3],upper=1.96*sqrt(v.pmodel(3)),lower=0)
  error.bar(b[2,4],e.pdist[4],upper=1.96*sqrt(v.pmodel(4)),lower=0)

  error.bar(b[3,1],(idists[2])*7374,upper=1.96*sqrt(v.imodel(1)),lower=0)
  error.bar(b[3,2],idists[3]*7374,upper=1.96*sqrt(v.imodel(2)),lower=0)
  error.bar(b[3,3],idists[4]*7374,upper=1.96*sqrt(v.imodel(3)),lower=0)
  error.bar(b[3,4],idists[5]*7374,upper=1.96*sqrt(v.imodel(4)),lower=0)
dev.off()
```

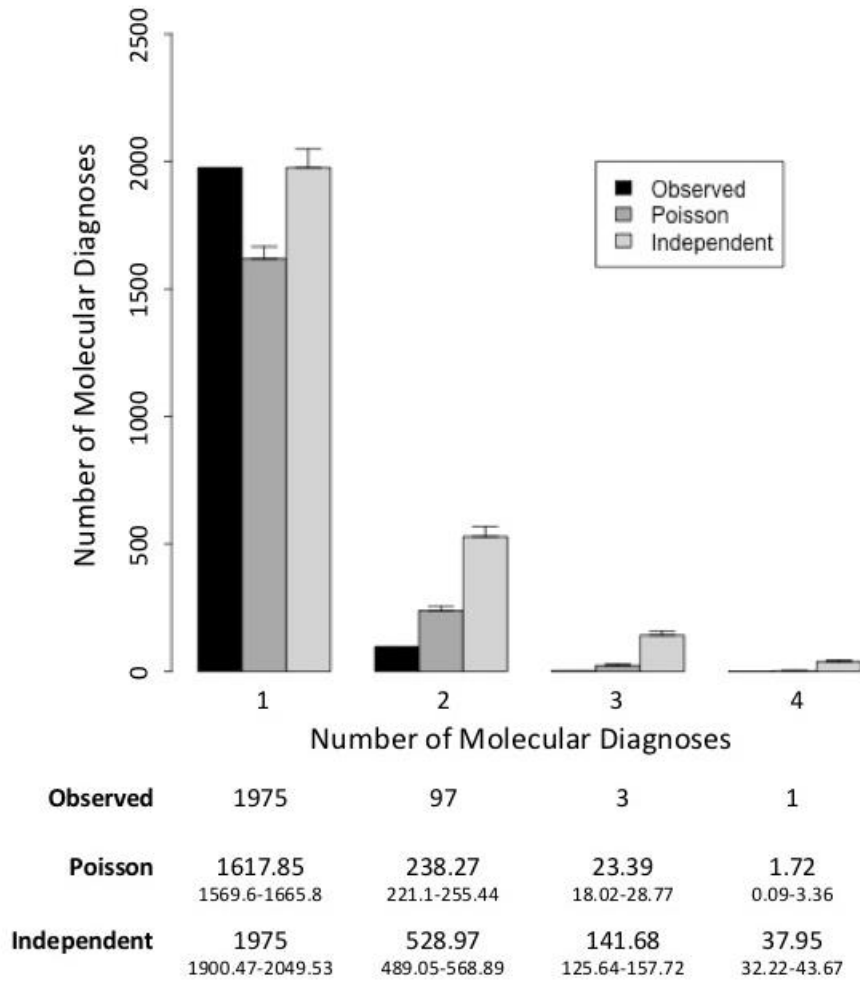
FIGURE S1



SUPPLEMENTAL FIGURE 1. (A-E) Models of non-Mendelian inheritance. (A) Two-hit hypothesis describing inheritance of one pathogenic allele, followed by a somatic event in the second allele. (B) Digenic inheritance of pathogenic alleles at different loci from each parent results in an affected offspring. (C) Triallelic inheritance of pathogenic alleles at two loci resulting in an affected offspring. (D) Genomic mutational burden leading to a modification of a parentally inherited phenotype. (E) Dual molecular diagnoses, in this case one recessive

diagnosis inherited from carrier parents and one *de novo* event resulting in a second, independent AD diagnosis.

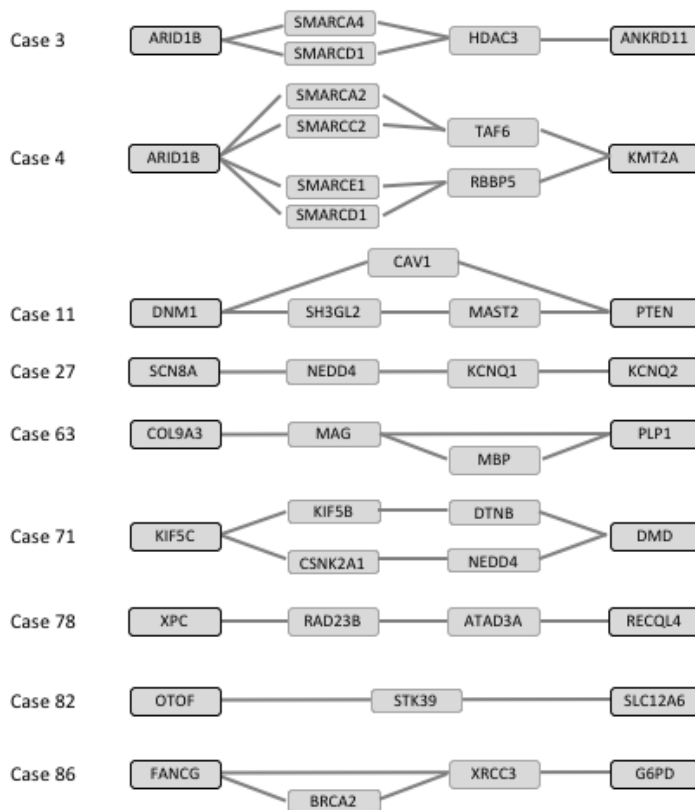
FIGURE S2



SUPPLEMENTAL FIGURE 2. Observed and expected rates of 1, 2, 3, and 4 molecular diagnoses per case in a cohort of 7374 individuals with 2182 independently occurring molecular diagnoses. Expected proportions of molecular diagnoses were determined by estimation of a Poisson model and an alternative model considering independent occurrence of multiple diagnoses: Poisson model, 14.0%, $[238.27 + 23.39 + 1.72] / [1617.85 + 238.27 + 23.39 + 1.72]$; independent model, 26.4%, $[528.97 + 141.68 + 37.95] / [1975.0 + 528.97 + 141.68 + 37.95]$; $P < 0.0001$ by onesided

binomial test for both models. 95% confidence intervals are listed below each value for the two models.

FIGURE S3



SUPPLEMENTAL FIGURE 3. Simplified diagrams of the analysis of physical interactions performed using the GeneMANIA prediction server. Third-degree interactions are observed when the protein products of nine molecular diagnosis pairs are input: ARID1B and ANKRD11 (case 3), ARID1B and KMT2A (case 4), DMN1 and PTEN (case 11), SCN8A AND KCNQ2 (case 27), and COL9A3 and PLP1 (case 63), KIF5C and DMD (case 71), RECQL4 and XPC (case 78), OTOF and SLC12A6 (case 82), and FANCG and G6PD (case 86).

TABLE S1. The rate of multiple molecular diagnoses reported in prior patient cohort studies.^{4,5,11-13}

Study type	% Dx'd Cases with ≥ 2 Mol Dx	# Cases with ≥ 2 Mol Dx	# Cases with Mol Dx	Total # cases	Reference
Pilot, all ages, consecutive cases	6.5%	4	62	250	4
All ages, consecutive cases	4.6%	23	504	2000	5
Age ≥ 18 y, consecutive cases	7.1%	6	85	486	11
All ages, proband- and trio-WES, consecutive cases	7.2%	11	152	500	12
All ages, proband- and trio-WES, consecutive cases	~3.2%	28	~875	3040	13

TABLE S2

Specialty of referring physician for 101 cases with more than one molecular diagnosis.

Specialty	Number of Cases	Percent of cases
Medical Genetics	82	81.2%
Neurology	13	12.9%
Neurogenetics	2	2.0%
Allergy/Immunology	1	1.0%
Unknown	3	3.0%

TABLE S3

Cases for which prior knowledge of a molecular diagnosis, or strong suspicion of a specific genetic diagnosis, was provided at the time of sample submission. The evidence for a clinically suspected diagnosis, when provided, has been included in the table.

Molecular diagnosis	Clinically suspected diagnosis
16p11.2 deletion (array CGH)	Alexander disease
16p13.11 deletion (CMA)	Beta-thalassemia minor
20p11.21 deletion of unclear clinical significance (CMA)	Ethylmalonic aciduria
Homozygous p.F508del <i>CFTR</i> variant	Factor VII deficiency
Xp22.31 deletion encompassing <i>STS</i> (CMA)	G6PD deficiency (2 cases)
Xp22.31 deletion encompassing <i>STS</i> (CMA)	Lysosomal storage disease (absent beta-hexaminidase A activity)
	Medium chain acyl-CoA dehydrogenase deficiency
	Ohtahara syndrome
	Pseudoxanthoma elasticum
	Tyrosinase-negative oculocutaneous albinism

CGH – comparative genomic hybridization; CMA – chromosomal microarray

TABLE S4

Table demonstrating the number of diagnoses for predicted modes of inheritance (AD, AR, XL). Numbers of diagnoses reported as *de novo*, inherited, or for which parental testing was unavailable (n/a) are indicated.

Inheritance		Total Dx	Inheritance status			Dx with inheritance ascertained	% <i>de novo</i> variants
			<i>De novo</i>	N/A	Inh		
Monoallelic	AD	112	61	22	29	90	67.8%
	XL	34	15	5	14	29	51.7%
	TOTAL AD + XL	146	76	27	43	119	63.9%
Other	AR	61	0	8	53	53	

TABLE S5

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
Autosomal Dominant + Autosomal Dominant														
1	2.8	M	AD	<i>ADAR</i>	615010	Het	D	SNV	Missense	p.G1007R	Yes	PS1, PS2	P	
1	2.8	M	AD	<i>APOB</i>	615558	Het	P	InDel	Frameshift	p.G997fs	Yes	PVS1, PS7, PM2, PP1	P	
2*	20	F	AD	<i>ANKRD11</i>	148050	Het	D	InDel	Frameshift	p.E800fs	Yes	PVS1, PS2	P	
2*	20	F	AD	<i>FLG</i>	146700	Het	P	InDel	Frameshift	p.S761fs	No	PVS1, PS1	P	
3*	6.8	F	AD	<i>ANKRD11</i>	148050	Het	D	InDel	Frameshift	p.K635fs	Yes	PVS1, PS2	P	
3*	6.8	F	AD	<i>ARID1B</i>	135900	Het	D	InDel	Frameshift	p.L2234fs	Yes	PVS1, PS2	P	
4	10.2	M	AD	<i>ARID1B</i>	135900	Het	D	SNV	Missense	p.G6D	Yes	PS2, PM2	LP	
4	10.2	M	AD	<i>KMT2A</i>	605130	Het	D	InDel	Frameshift	p.S774fs	Yes	PVS1, PS2	P	
5*	2.2	F	AD	<i>ASXL3</i>	615485	Het	M	SNV	Nonsense	p.R1117*	Yes	PVS1, PS7, PM2	P	
5*	2.2	F	AD	<i>ENG</i>	187300	Het	Unk	SNV	Splice site	c.1273-2A>G	No	PVS1, PS1, PM2	P	
6	4.9	F	AD	<i>CACNA1A</i>	108500	Het	D	SNV	Missense	p.V1393M	Yes	PS2, PM2	LP	

* Previously reported case.

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
6	4.9	F	AD	<i>SLC26A1</i>	n/a	Het	D	SNV	Missense	p.L496R	Yes	PS2	VUS-LP	
7*	8.4	F	AD	<i>CHD2</i>	615369	Het	D	SNV	Missense	p.G646E	Yes	PS2, PM2	LP	
7*	8.4	F	AD	<i>PRRT2</i>	605751	Het	P	InDel	Frameshift	p.T108fs	Yes	PVS1, PS7, PM2	P	
8	5	F	AD	<i>CHD8</i>	615032	Het	Unk	SNV	Nonsense	p.S2173*	Yes	PVS1, PS7	P	
8	5	F	AD	<i>COL5A1</i>	130000	Het	Unk	InDel	Frameshift	p.G1255fs	Yes	PVS1, PS7	P	
9	5.1	F	AD	<i>COL4A1</i>	607595	Het	D	SNV	Missense	p.K1185K	Yes	PS2, PM2	LP	
9	5.1	F	AD	<i>CRYGD</i>	115700	Het	M	InDel	Nonsense	p.Y56*	No	PVS1, PS1	P	
10*	20.8	F	AD	<i>CREBBP</i>	180849	Het	D	SNV	Missense	p.M1872V	Yes	PS2, PM2	LP	
10*	20.8	F	AD	<i>PRICKLE2</i>	613832	Het	D	InDel	Frameshift	p.G127fs	Yes	PVS1, PS2	P	
11	2.4	F	AD	<i>DNM1</i>	616346	Het	D	InDel	Nonframeshift	p.Q155_I156insM	Yes	PS2, PM2	LP	
11	2.4	F	AD	<i>PTEN</i>	153480	Het	D	SNV	Nonsense	p.R335*	No	PVS1, PS1	P	
12	5.6	F	AD	<i>FBN1</i>	154700	Het	M	SNV	Missense	p.R1170H	No	PS1, PP1 (moderate), PP3	LP	
12	5.6	F	AD	<i>MYO1F</i>	n/a	Het	D	SNV	Missense	p.R594Q	Yes	PS2, PM2	VUS-LP	
13*	18.1	F	AD	<i>FLG</i>	146700	Het	Unk	InDel	Frameshift	p.S761fs	No	PVS1, PS1	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
13*	18.1	F	AD	<i>MEF2C</i>	613443	Het	D	SNV	Missense	p.K23R	Yes	PS2, PM2	LP	
14	1.5	M	AD	<i>FLG</i>	146700	Het	P	InDel	Frameshift	p.S761fs	No	PVS1, PS1	P	
14	1.5	M	AD	<i>PACS1</i>	615009	Het	D	SNV	Missense	p.R203W	No	PS1, PS2	P	
15	4.1	M	AD	<i>GDF6</i>	118100	Het	P	SNV	Missense	p.K424R	No	PS1, PS3, PM1, PP3	P	
15	4.1	M	AD	<i>SOX10</i>	611584	Het	D	SNV	Missense	p.R106G	Yes	PS2, PM2	LP	
16*	10.4	M	AD	<i>GLI2</i>	610829	Het	Unk	InDel	Frameshift	p.S579fs	Yes	PVS1, PM2, PM7	P	
16*	10.4	M	AD	<i>IRF6</i>	608864	Het	Unk	SNV	Nonsense	p.R412*	No	PVS1, PS1	P	
17	8.2	M	AD	<i>GLI2</i>	610829	Het	D	SNV	Missense	p.T1552S	Yes	PS2, PM2	LP	
17	8.2	M	AD	<i>SCN2A</i>	613721	Het	D	InDel	Frameshift	p.K743fs	Yes	PVS1, PS2	P	
18	7.6	M	AD	<i>HBB</i>	613985	Het	Unk	SNV	Nonsense	p.Q40*	No	PVS1, PS1	P	
18	7.6	M	AD	<i>KANSL1</i>	610443	Het	Unk	InDel	Frameshift	p.L329fs	Yes	PVS1, PM2	LP	
19	2.4	M	AD	<i>PTPN11</i>	163950	Het	D	SNV	Missense	p.G60V	Yes	PS2, PM5 (strong)	LP	
19	2.4	M	AD	<i>SHH</i>	142945	Het	D	InDel	Frameshift	p.T429fs	Yes	PS2, PS7, PM2	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
20*	10	F	AD	SCN1A	607208	Het	D	SNV	Missense	p.P1171L	Yes	PS2, PM2	LP	
20*	10	F	AD	SMARCA2	601358	Het	D	SNV	Missense	p.T756I	Yes	PS2, PM2	LP	
21	0.2	M	AD	16p11.2	n/a	Het	Unk	Deletion	n/a		No			0.53 Mb deletion
21	0.2	M	AD	KAT6A	616268	Het	P	SNV	Nonsense	p.R1169*	Yes	PVS1, PM2	LP	
22	5.1	M	AD	NOTCH1	109730	Het	P	SNV	Nonsense	p.Y2216*	Yes	PVS1, PS7	P	
22	5.1	M	AD	TTN	604145	Het	M	SNV	Nonsense	p.R4186*	Yes	PVS1, PS7	P	
23	1.5	M	AD	KCNQ2	613720	Het	D	InDel	Frameshift	p.E778fs	Yes	PVS1, PS2	P	
23	1.5	M	AD	PRRT2	128200	Het	P	InDel	Frameshift	p.R217fs	No	PVS1, PS1	P	
24	6.1	F	AD	ANKRD11	148050	Het	P	SNV	Nonsense	p.S1041*	Yes	PVS1, PS7	P	
24	6.1	F	AD	SLC6A1	616421	Het	M	SNV	Missense	p.R44Q	No	PS1 (moderate), PM2, PP1, PP2, PP3	LP	
25	1.8	F	AD	PTCH1	109400	Het	D	InDel	Frameshift	p.L39fs	Yes	PVS1, PS2	P	
25	1.8	F	AD	TCF12	615314	Het	P	SNV	Nonsense	p.R626*	Yes	PVS1, PS7	P	
26	7.6	F	AD	COL11A1	604841	Het	Unk	SNV	Splice site	c.2754+5 G>A	No	PS3, PM2	LP	
26	7.6	F	AD	KRIT1	116860	Het	M	InDel	Frameshift	p.R49fs	Yes	PVS1, PS7	LP	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
27	5.7	M	AD	KCNQ2	613720	Het	D	InDel	Frameshift	p.L766fs	Yes	PVS1, PS2	P	
27	5.7	M	AD	SCN8A	614558	Het	D	SNV	Missense	p.N1468S	Yes	PS2, PM2	LP	
28	0.6	F	AD	NF1	162200	Het	D	SNV	Missense	p.N1883S	Yes	PS2, PM2	LP	
28	0.6	F	AD	SOX9	114290	Het	D	SNV	Missense	p.M476T	Yes	PS2, PM2	LP	
29	19.4	F	AD	MYH2	605637	Het	D	SNV	Missense	p.A387V	Yes	PS2, PM2	LP	
29	19.4	F	AD	SMC1A	300590	Het	D	SNV	Nonsense	p.S39*	Yes	PVS1, PS2	P	
30	0.1	M	AD	SCN1A	607208	Het	D	SNV	Missense	p.V1784A	Yes	PS2, PM1, PM2	LP	
30	0.1	M	AD	16p13.11		Het	D	Deletion	n/a		No			1.166 Mb
31	3.2	M	AD	CTNNB1	615075	Het	D	SNV	Nonsense	p.R95X	No	PVS1, PS2	P	
31	3.2	M	AD	1q21.1q21.2		Het	Unk	Deletion	n/a		No			0.86 Mb
32	8.9	M	AD	SOX11	615866	Het	Unk	SNV	Nonsense	p.W429X	Yes	PVS1, PM2, PM7	P	
32	8.9	M	AD	17q11.2		Het	Unk	Duplication	n/a		No			1.07 Mb
33*	2.8	F	AD	SETBP1	269150	Het	D	SNV	Missense	p.D868N	No	PS1, PS2	P	
33*	2.8	F	AD/AR	CLCN1	255700	Het	M	SNV	Nonsense	p.R894*	No	PVS1, PS1	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
33*	2.8	F	AD/AR	<i>CLCN1</i>	255700	Het	P	SNV	Missense	p.A849T	Yes	PM3	VUS-LP	
Autosomal Dominant + Autosomal Recessive														
34*	14.3	F	AD	<i>KCNT1</i>	614959	Het	D	SNV	Missense	p.A934T	No	PS1, PS2	P	
34*	14.3	F	AR	<i>TTN</i>	608807	Het	P	SNV	Nonsense	p.R19931*	Yes	PVS1, PS7	P	
34*	14.3	F	AR	<i>TTN</i>	608807	Het	M	SNV	Missense	p.K12032N	Yes	PM3	VUS-LP	
35*	9.1	M	AD	<i>ABCC9</i>	608569	Het	M	InDel	Frameshift	p.V1525fs	No	PVS1 (strong), PS1, PS3	P	
35*	9.1	M	AR	<i>RAPSN</i>	608931	Het	P	SNV	Missense	p.G291D	No	PS1 (moderate), PM2, PM3, PP3	LP	
35*	9.1	M	AR	<i>RAPSN</i>	608931	Het	M	SNV	Missense	p.A153T	No	PS1 (moderate)	VUS-LP	
36	5.2	M	AD	<i>ACTG1</i>	614583	Het	D	SNV	Missense	p.H40Y	Yes	PS2, PM2	LP	
36	5.2	M	AR	<i>WFS1</i>	222300	Het	M	SNV	Missense	p.M731V	Yes	PM2	VUS-LP	
36	5.2	M	AR	<i>WFS1</i>	222300	Het	P	SNV	Missense	p.C360Y	Yes	PM2	VUS-LP	
37*	47.5	M	AD	<i>DES</i>	601419	Het	Unk	SNV	Missense	p.S13F	No	PS1, PS7, PM2, PP3	P	
37*	47.5	M	AR	<i>CLCN1</i>	255700	Het	Unk	SNV	Missense	p.F167L	No	PS1, PS3 (moderate), PP3	LP	
37*	47.5	M	AR	<i>CLCN1</i>	255700	Het	Unk	InDel	Missense	p.G190S	Yes	PM3	VUS-LP	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
38	5.8	M	AD	GATAD2B	615074	Het	D	SNV	Nonsense	p.Q232*	Yes	PVS1, PS2	P	
38	5.8	M	AR	WVOX	614322	Het	M	InDel	Nonframeshift	p.S411del	Yes	PM2	VUS-LP	
38	5.8	M	AR	WVOX	614322	Het	P	SNV	Missense	p.C183F	Yes	PM2	VUS-LP	
39	4.4	F	AD	GNAO1	615473	Het	D	SNV	Missense	p.Y231C	Yes	PS2, PM2	LP	
39	4.4	F	AR	ACADM	201450	Het	M	SNV	Splice site	c.287-2A>G	Yes	PVS1, PS7, PM2	P	
39	4.4	F	AR	ACADM	201450	Het	P	SNV	Missense	p.K329E	No	PS1, PS3, PM2, PM3	P	
40	4.4	F	AD	HBB	613985	Het	D	SNV	Splice site	c.92+6T>C	No	PS1, PS4	P	cSNP 142 Mb AOH
40	4.4	F	AR	TJP2	607748	Hom	M+P	InDel	Frameshift	p.S415fs	Yes	PVS1, PM2, PM3	P	cSNP 142 Mb AOH
41*	6.3	M	AD	KIF5C	615282	Het	D	SNV	Missense	p.Y135C	Yes	PS2, PM2	LP	cSNP 170 Mb AOH
41*	6.3	M	AR	NRXN1	614325	Hom	M+P	SNV	Missense	p.D612G	Yes	PM2, PP3	VUS-LP	cSNP 170 Mb AOH
42	1.6	M	AD	KMT2D	147920	Het	D	SNV	Missense	p.L797V	Yes	PS2, PM2	LP	
42	1.6	M	AR	HEXA	272800	Het	M	InDel	Frameshift	p.Y427fs	No	PVS1, PS1, PM3	P	
42	1.6	M	AR	HEXA	272800	Het	P	SNV	Splice site	c.1073+1G>A	No	PVS1, PS1, PM3	P	
43*	1.6	M	AD	NF1	162200	Het	D	InDel	Frameshift	p.R1970fs	Yes	PVS1, PS2	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
43*	1.6	M	AR	<i>MEGF8</i>	614976	Het	M	SNV	Missense	p.A2037S	Yes	PM2	VUS-LP	
43*	1.6	M	AR	<i>MEGF8</i>	614976	Het	P	SNV	Missense	p.P1020L	Yes	PM2	VUS-LP	
44*	16.9	F	AD	<i>NF1</i>	162200	Het	D	SNV	Missense	p.G2093C	Yes	PS2, PM2	LP	cSNP 271 Mb AOH
44*	16.9	F	AR	<i>GALNT3</i>	211900	Hom	M+P	SNV	Nonsense	p.R169*	Yes	PVS1, PM2, PM3	P	cSNP 271 Mb AOH
45	10	M	AD	<i>PUF60</i>	615583	Het	D	SNV	Splice site	c.1381-2A>G	No	PVS1, PS2	P	
45	10	M	AR	<i>LOXHD1</i>	613079	Het	M	SNV	Missense	p.A1406V	Yes	PM3	VUS-LP	
45	10	M	AR	<i>LOXHD1</i>	613079	Het	P	SNV	Nonsense	p.K148*	No	PVS1, PS7	P	
46	2.6	F	AD	<i>SCN8A</i>	614306	Het	D	SNV	Missense	p.V216G	Yes	PS2, PM2	LP	
46	2.6	F	AR	<i>MAN2B1</i>	248500	Het	M	SNV	Missense	p.G928R	Yes	PM3	VUS-LP	
46	2.6	F	AR	<i>MAN2B1</i>	248500	Het	P	SNV	Nonsense	p.Y461*	No	PVS1, PS1	P	
47	3	M	AD	<i>SLC2A9</i>	612076	Het	Unk	SNV	Missense	p.R380W	No	PS1, PS3, PP3	P	cSNP 226 Mb AOH
47	3	M	AR	<i>ETHE1</i>	602473	Hom	Unk	Deletion	n/a	n/a		PVS1, PS1	P	cSNP 226 Mb AOH
48	0.5	F	AD	<i>SPRED1</i>	611431	Het	D	SNV	Nonsense	p.R325*	No	PVS1, PS1	P	cSNP 98 Mb AOH
48	0.5	F	AR	<i>MEGF10</i>	614399	Hom	M+P	InDel	Frameshift	p.W520fs	Yes	PVS1, PS7	P	cSNP 98 Mb AOH

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
49*	11.9	F	AD	SYNGAP1	612621	Het	D	SNV	Nonsense	p.R544*	Yes	PVS1, PS2	P	
49*	11.9	F	AR	<i>MTFMT</i>	614947	Het	M	SNV	Missense	p.S125L	No	PS1, PM1, PM2, PM3	P	
49*	11.9	F	AR	<i>MTFMT</i>	614947	Het	P	SNV	Missense	p.S209L	No	PVS1, PS1, PM2, PM3	P	
50	9.8	M	AD	TGFB2	614816	Het	D	SNV	Missense	p.R153H	Yes	PS2, PM2	LP	
50	9.8	M	AR	<i>TYR</i>	203100	Het	M	SNV	Missense	p.A355V	No	PS1, PM2, PM3, PP3, PP4	P	
50	9.8	M	AR	<i>TYR</i>	203100	Het	P	SNV	Missense	p.R77W	No	PS1, PM2, PM3, PP3, PP4	P	
51	10.7	M	AD	<i>GFAP</i>	203450	Het	D	SNV	Missense	p.E72G	Yes	PS2, PM2	LP	cSNP 244 Mb AOH
51	10.7	M	AR	<i>MPZ</i>	605253	Hom	Unk	Deletion	n/a	Deletion exons 4-6	Yes	PVS1, PS7	P	cSNP 244 Mb AOH
52	0.6	F	AD	<i>ARHGEF10</i>	608236	Het	P	SNV	Missense	p.S688N	Yes		VUS-LP	cSNP 124.7 Mb AOH
52	0.6	F	AR	<i>ECEL1</i>	615065	Hom	M+P	SNV	Nonsense	p.W490*	Yes	PVS1, PS7	P	cSNP 124.7 Mb AOH
53	3	F	AD	<i>FLG</i>	146700	Het	Unk	SNV	Missense	p.A1427T	Yes	PM2	VUS-LP	cSNP 0 Mb AOH
53	3	F	AR	<i>TECPR2</i>	615031	Hom	M+P	InDel	Frameshift	p.L440fs	Yes	PVS1, PS7	P	cSNP 0 Mb AOH
54	0.8	F	AD	<i>TUBB3</i>	614039	Het	D	SNV	Missense	p.E328K	Yes	PS2, PM2	LP	cSNP 183 Mb AOH
54	0.8	F	AR	<i>ISCA2</i>	616370	Hom	M+P	SNV	Missense	p.G77S	No	PS1, PS4, PM2, PM3	P	cSNP 183 Mb AOH

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
55	0.1	F	AD	<i>NLRC4</i>	616050	Het	D	SNV	Missense	p.S171F	Yes	PS2, PM2	LP	
55	0.1	F	AR	<i>SERPINA1</i>	613490	Het	M	SNV	Missense	p.E288V	No	PS1, PS3, PM3	P	
55	0.1	F	AR	<i>SERPINA1</i>	613490	Het	P	SNV	Missense	p.E366K	No	PS1, PS3, PM3	P	
56	9.2	F	AD	<i>CACNB4</i>	607682	Het	P	InDel	Frameshift	p.Q204fs	Yes	PVS1, PM2, PM7	P	
56	9.2	F	AR	<i>TANGO2</i>	616878	Hom	M+P	Deletion	Deletion	Deletion exon 3-9	Yes	PVS1, PS1	P	
57	63.7	M	AD	<i>CPOX</i>	121300	Het	Unk	SNV	Missense	p.R447C	No	PS1, PS3	P	cSNP 54 Mb AOH
57	63.7	M	AR	<i>ABCA1</i>	205400	Hom	Unk	SNV	Missense	p.N935D	Yes	PM1, PM2, PM5	LP	cSNP 54 Mb AOH
58	5.8	M	AD	<i>GLI2</i>	610829	Het	D	InDel	Frameshift	p.T1088fs	Yes	PVS1, PS2, PS7	P	
58	5.8	M	AR	<i>BLM</i>	210900	Het	M	SNV	Missense	p.S1380R	Yes	PM3	VUS-LP	
58	5.8	M	AR	<i>BLM</i>	210900	Het	P	InDel	Frameshift	p.N515fs	Yes	PVS1, PS7	P	
Autosomal Dominant + X-linked														
59	4.5	F	AD	<i>CHD8</i>	615032	Het	D	SNV	Missense	p.R812W	Yes	PS2, PM2	LP	
59	4.5	F	XL	<i>BRWD3</i>	300659	Het	D	SNV	Nonsense	p.R190*	Yes	PVS1, PS2	P	
60*	10.4	F	AD	<i>ARID1B</i>	135900	Het	D	InDel	Frameshift	p.D1630fs	Yes	PVS1, PS2	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
60*	10.4	F	XL	GRIA3	300699	Het	D	SNV	Missense	p.M706L	Yes	PS2, PM5	LP	
61	8.1	F	AD	ARID1B	135900	Het	D	SNV	Splice site	c.3689+1G>C	Yes	PVS1, PS2	P	
61	8.1	F	XL	G6PD	300908	Het	M	SNV	Missense	p.S188F	No	PS1, PS3, PS4	P	
62	14.2	M	AD	CHD7	214800	Het	D	SNV	Missense	p.I2688R	Yes	PS2, PM2	LP	
62	14.2	M	XL	DMD	310200	Hem	M	InDel	Frameshift	p.R1884fs	Yes	PVS1, PS7	P	
63	23.6	M	AD	COL9A3	600969	Het	M	SNV	Splice site	c.369+2T>C	Yes	PVS1, PS7	P	
63	23.6	M	XL	PLP1	312080	Hem	M	SNV	Initiation codon	p.M1?	No	PVS1, PS1	P	
64	0	F	AD	DNM1L	614388	Het	D	SNV	Missense	p.E379K	Yes	PS2, PM2	LP	
64	0	F	XL	PDHA1	312170	Het	D	SNV	Missense	p.G150R	Yes	PS2	VUS-LP	
65*	15.2	F	AD	EFHC1	254770	Het	P	SNV	Nonsense	p.R538*	Yes	PVS1(moderate)	VUS-LP	
65*	15.2	F	XL	SMC1A	300590	Het	D	SNV	Missense	p.G100R	Yes	PS2, PM2	LP	
66	4.3	M	AD	GLI2	610829	Het	M	InDel	Frameshift	p.Q297fs	Yes	PVS1, PS7	P	
66	4.3	M	XL	KDM5C	300534	Hem	D	SNV	Missense	p.P480L	No	PS2, PM2	LP	
67	4	M	AD	GLI3	174200	Het	P	InDel	Frameshift	p.D751fs	Yes	PVS1, PS7	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
67	4	M	XL	LAS1L		Hem	D	SNV	Missense	p.R415W	No	PS2, PM2	LP	
68	16.4	M	AD	GRIN2B	613970	Het	D	SNV	Missense	p.W607C	Yes	PS2, PM2	LP	
68	16.4	M	XL	SHOXY	300582	Hem	P	SNV	Splice site	c.544+1 G>A	Yes	PVS1, PS7	P	
69	8.3	M	AD	PAFAH1B 1	607432	Het	D	SNV	Missense	p.G162S	No	PS2, PM2	LP	
69	8.3	M	XL	FGD1	305400	Hem	D	InDel	Frameshift	p.P176fs	Yes	PVS1, PS2	P	
70	3.2	M	AD	SCN1A	607208	Het	P	SNV	Missense	p.S570N	Yes	PM2, PP1, PP3	VUS-LP	
70	3.2	M	XL	PDHA1	312170	Hem	M	SNV	Splice site	c.292-2A>G	No	PVS1, PS1	P	
71	7.3	M	AD	KIF5C	615282	Het	Unk	SNV	Missense	p.E237K	No	PS3, PS6	P	
71	7.3	M	XL	DMD	310200	Hem	Unk	Deletion	n/a	Deletion exon 49	No	PVS1, PS1	P	
72	5.9	F	AD	MED13L	608808	Het	D	SNV	Splice site	c.4956-2A>C	Yes	PVS1, PS2	P	
72	5.9	F	XL	HUWE1	300706	Het	D	SNV	Missense	p.R1080H	Yes	PS2, PM2	LP	
73	2.4	M	AD	COL7A1	131750	Het	P	SNV	Splice site	c.6900+4 A>G	No	PS1, PS3, PM2, PP1	P	
73	2.4	M	XL	DDX3X	300958	Hem	M	SNV	Missense	p.R351Q	No	PS1, PM1, PM2, PP2, PP3	P	
74	9.8	M	AD	COL9A1	614135	Het	Unk	SNV	Splice site	c.876+2T >A	Yes	PVS1, PM2, PM7	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
74	9.8	M	XL	<i>ATRX</i>	301040	Hem	Unk	SNV	Missense	p.P190L	No	PS1, PM2	LP	
Autosomal Recessive + Autosomal Recessive														
75	2.8	M	AR	<i>AGL</i>	232400	Hom	M+P	SNV	Missense	p.W1451C	Yes	PS3, PM2, PP2, PP3	LP	cSNP 367.5 Mb AOH
75	2.8	M	AR	<i>PCCA</i>	606054	Hom	M+P	SNV	Missense	p.G142D	No	PS1, PM2, PP3, PP4	LP	cSNP 367.5 Mb AOH
76	0.5	M	AR	<i>HEXB</i>	268800	Hom	M+P	SNV	Missense	p.C91S	Yes	PM2, PP3	VUS-LP	cSNP 103.9 Mb AOH
76	0.5	M	AR	<i>MCCC2</i>	210210	Hom	M+P	SNV	Missense	p.V339M	No	PS1, PS3	P	cSNP 103.9 Mb AOH
77	10.1	M	AR	<i>MTPAP</i>	613672	Hom	M+P	SNV	Missense	p.V490L	Yes	PP1	VUS-LP	cSNP 268 Mb AOH
77	10.1	M	AR	<i>NPC1</i>	257220	Het	M	InDel	Frameshift	p.L280fs	Yes	PVS1, PS7	P	cSNP 268 Mb AOH
77	10.1	M	AR	<i>NPC1</i>	257220	Het	Unk	SNV	Missense	p.N916S	Yes	PM2, PP3	VUS-LP	cSNP 268 Mb AOH
78*	15.7	F	AR	<i>RECQL4</i>	268400	Hom	M+P	SNV	Nonsense	p.W383*	No	PVS1, PS7	P	cSNP 187 Mb AOH
78*	15.7	F	AR	<i>XPC</i>	278720	Hom	M+P	SNV	Splice site	c.1872+1G>C	Yes	PVS1, PS7	P	cSNP 187 Mb AOH
79	14.7	M	AR	<i>TPO</i>	274500	Hom	M+P	SNV	Missense	p.R665Q	No	PS1, PM2, PM3, PP2, PP4	P	cSNP 175 Mb AOH
79	14.7	M	AR	<i>MMP2</i>	259600	Hom	M+P	SNV	Missense	p.D180V	Yes	PP3	VUS-LP	cSNP 175 Mb AOH
80	1.3	F	AR	<i>AGL</i>	232400	Hom	M+P	SNV	Splice site	c.3836+1G>A	Yes	PVS1, PS7	P	cSNP 182 Mb AOH

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
80	1.3	F	AR	<i>LPAR6</i>	278150	Hom	M+P	SNV	Missense	p.G146R	No	PS1, PS3, PM2	LP	cSNP 182 Mb AOH
81*	7.4	M	AR	<i>PAPSS2</i>	612847	Hom	Unk	SNV	Nonsense	p.R329*	No	PVS1, PS1	P	cSNP 610 Mb AOH
81*	7.4	M	AR	<i>TRDN</i>	615441	Hom	Unk	SNV	Splice site	c.1187-2A>G	Yes	PVS1, PS7	P	cSNP 610 Mb AOH
82	4.5	F	AR	<i>OTOF</i>	601071	Hom	M+P	SNV	Missense	p.R1172Q	Yes	PM2	VUS-LP	cSNP 132 Mb AOH
82	4.5	F	AR	<i>SLC12A6</i>	218000	Hom	M+P	InDel	Frameshift	p.S25fs	Yes	PVS1, PS7	P	cSNP 132 Mb AOH
83	0.4	M	AR	<i>AGPAT2</i>	608594	Het	M	InDel	Splice site	c.492+4_492+7del AGTG	Yes	PM2, PM3	VUS-LP	
83	0.4	M	AR	<i>AGPAT2</i>	608594	Het	P	SNV	Nonsense	p.W168*	Yes	PVS1, PS7	P	
83	0.4	M	AR	<i>OBSL1</i>	612921	Het	M	InDel	Frameshift	p.V825fs	Yes	PVS1, PS7	P	
83	0.4	M	AR	<i>OBSL1</i>	612921	Het	P	SNV	Nonsense	p.Q1319*	Yes	PVS1, PS7	P	
Autosomal Recessive + X-linked														
84*	3	F	AR	<i>BBS10</i>	209900	Het	M	InDel	Frameshift	p.V230fs	Yes	PVS1, PS7	P	
84*	3	F	AR	<i>BBS10</i>	209900	Het	P	SNV	Missense	p.A479E	Yes	PM3	VUS-LP	
84*	3	F	XL	<i>PDHA1</i>	312170	Het	D	InDel	Frameshift	p.R343fs	Yes	PVS1, PS2	P	
85	3.3	F	AR	<i>F7</i>	227500	Hom	M+P	SNV	Missense	p.A429T	No	PS1 (moderate), PM2, PP3, PP4	LP	cSNP 79 Mb AOH

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
85	3.3	F	XL	MECP2	312750	Het	D	SNV	Missense	p.R111K	Yes	PS2, PM2	LP	cSNP 79 Mb AOH
86	0.7	F	AR	<i>FANCG</i>	614082	Hom	M+P	InDel	Frameshift	p.Y213fs	No	PVS1, PS1	P	cSNP 287 Mb AOH
86	0.7	F	XL	<i>G6PD</i>	300908	Het	P	SNV	Missense	p.S188F	No	PS1, PS3, PS4	P	cSNP 287 Mb AOH
87	16.6	M	AR	<i>TCF12</i>	615314	Hom	M+P	SNV	Missense	p.K574Q	Yes	PM2	VUS-LP	cSNP 180 Mb AOH
87	16.6	M	XL	<i>SLC35A2</i>	300896	Hem	M	InDel	Frameshift	p.Q206fs	Yes	PVS1, PS7	P	cSNP 180 Mb AOH
88*	3.7	M	AR	<i>TREX1</i>	225750	Het	M	InDel	Nonframeshift	p.A123dup	No	PS1, PM1, PM2, PM3, PM8	P	
88*	3.7	M	AR	<i>TREX1</i>	225750	Het	P	SNV	Missense	p.R114H	No	PS1, PS3	P	
88*	3.7	M	XL	<i>PHEX</i>	307800	Hem	M	SNV	Splice site	c.733-1G>C	Yes	PVS1, PS7	P	
89	3.7	M	AR	<i>PLA2G6</i>	256600	Hom	Unk	Deletion	n/a	Deletion exon 2	Yes	PVS1, PM2, PM7	P	cSNP 0 Mb AOH, 1/17 exons deleted
89	3.7	M	XL	<i>BCAP31</i>	300475	Hem	M	SNV	Nonsense	p.S36*	Yes	PVS1, PS7	P	cSNP 0 Mb AOH
90*	2.6	F	AR	<i>CFTR</i>	219700	Hom	M+P	InDel	Nonframeshift	p.F508del	No	PVS1, PS1	P	cSNP 0 Mb AOH
90*	2.6	F	XL	<i>SMC1A</i>	300590	Het	D	SNV	Missense	p.F47C	Yes	PS2, PM2	LP	cSNP 0 Mb AOH
91	0.8	M	AR	<i>SLC45A2</i>	606574	Hom	M+P	InDel	Frameshift	p.Y55fs	Yes	PVS1, PS7	P	cSNP 309 Mb AOH
91	0.8	M	XL	<i>AVPR2</i>	304800	Hem	M (mosaic)	SNV	Missense	p.C112F	Yes	PS5, PM2	LP	cSNP 309 Mb AOH

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
92	0.1	F	AR	<i>ALG6</i>	603147	Het	M	SNV	Missense	p.V330F	Yes	PM2, PM3	VUS-LP	
92	0.1	F	AR	<i>ALG6</i>	603147	Het	P	SNV	Splice site	c.257+5 G>A	No	PS1, PS3, PM3	P	
92	0.1	F	XL	<i>SHOX</i>	127300	Het	D	SNV	Missense	p.R173C	No	PS1, PS3, PM5	P	
93	12.4	F	AR	<i>IRX5</i>	611174	Het	M	InDel	Nonframeshift	p.S81del	Yes	PM2, PM3	VUS-LP	
93	12.4	F	AR	<i>IRX5</i>	611174	Het	P	InDel	Frameshift	p.K455fs	Yes	PVS1, PM2	P	
93	12.4	F	XL	<i>HDAC8</i>	300882	Het	D	SNV	Missense	p.D176G	Yes	PS2, PM2	LP	
94	13.2	M	AR	<i>BCS1L</i>	124000	Het	M	SNV	Missense	p.R69C	Yes	PM2, PP3	VUS-LP	
94	13.2	M	AR	<i>BCS1L</i>	124000	Het	P	SNV	Nonsense	p.R200*	Yes	PVS1, PS7	P	
94	13.2	M	XL	<i>NLGN4X</i>	300495	Hem	M	SNV	Nonsense	p.R101*	Yes	PVS1, PS7	P	
X-linked + X-linked														
95	5.7	M	XL	<i>KIAA2022</i>	300912	Hem	M	InDel	Frameshift	p.G1417fs	Yes	PVS1, PS7	P	
95	5.7	M	XL	<i>PHF8</i>	300263	Hem	M	InDel	Frameshift	p.L126fs	Yes	PVS1, PS7	P	
96	0.6	M	XL	<i>SMC1A</i>	300590	Hem	D	SNV	Missense	p.R196C	Yes	PS2, PM2	LP	
96	0.6	M	XL	<i>DMD</i>	310200	Hem	Unk	Deletion	n/a	Deletion exons 49-51	No	PVS1, PS1	P	

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
97	1	M	XL	KIAA2022	300912	Hem	D	InDel	Nonsense	p.C459*	Yes	PVS1, PS2	P	
97	1	M	XL	Xp22.31		Hem	Unk	Deletion	n/a					1.41 Mb deletion, includes STS
Autosomal Dominant + Autosomal Dominant + X-linked														
98*	17.1	M	AD	KMT2A	605130	Het	Unk	InDel	Frameshift	p.P1247fs	Yes	PVS1, PS7	P	
98*	17.1	M	AD	MYF6	614408	Het	Unk	InDel	Frameshift	p.L197fs	Yes	PVS1, PS7	P	
98*	17.1	M	XL	Xp22.31 deletion		Het	Unk	Deletion						
Autosomal Recessive + Autosomal Recessive + Autosomal Recessive														
99*	39.7	M	AR	ABCC6	264800	Het	M	SNV	Missense	p.R265G	No	PS1, PM3	LP	cSNP 0 Mb AOH
99*	39.7	M	AR	ABCC6	264800	Het	P	SNV	Nonsense	p.R518*	No	PVS1, PS1	P	cSNP 0 Mb AOH
99*	39.7	M	AR	MTRR	236270	Het	M	SNV	Missense	p.L401I	Yes	PM2	VUS-LP	cSNP 0 Mb AOH
99*	39.7	M	AR	MTRR	236270	Het	P	SNV	Missense	p.I290T	Yes	PM2	VUS-LP	cSNP 0 Mb AOH
99*	39.7	M	AR	YARS2	613561	Het	M	InDel	Frameshift	p.D121fs	Yes	PVS1, PS7	P	cSNP 0 Mb AOH
99*	39.7	M	AR	YARS2	613561	Het	P	SNV	Missense	p.I251V	Yes	PM3	VUS-LP	cSNP 0 Mb AOH
100	21.2	F	AR	CA2	259730	Hom	M + P	SNV	Splice site	c.232+1 G>A	No	PVS1, PS1	P	cSNP 359 Mb AOH

No	Age	Sex	Inh	Gene	Dse MIM #	Zyg	Prnt orig	NT	AA	Variant	Nvl	BG Criteria	Class	Comment
100	21.2	F	AR	MCCC2	210210	Hom	M + P	SNV	Missense	p.V339M	No	PS1, PS3	P	cSNP 359 Mb AOH
100	21.2	F	AR	SPG11	604360	Hom	M + P	SNV	Nonsense	p.R2034*	No	PVS1, PS1	P	cSNP 359 Mb AOH
Autosomal Dominant + Autosomal Dominant + Autosomal Dominant + Autosomal Recessive														
101*	5.8	F	AD	COL4A3	104200	Het	M	SNV	Missense	p.P1109 S	Yes	PP4	VUS- LP	cSNP 0 Mb AOH
101*	5.8	F	AD	SCN1B	615377	Het	P	SNV	Missense	p. G257R	Yes	PP1	VUS- LP	cSNP 0 Mb AOH
101*	5.8	F	AD	THRA	614450	Het	P	SNV	Splice site	c.54- 1G>A	Yes	PVS1, PS7	P	cSNP 0 Mb AOH
101*	5.8	F	AR	DGAT	615863	Hom	M+P	SNV	Splice site	c.751+2T >C	No	PVS1, PS1 (moderate), PS3	P	cSNP 0 Mb AOH

TABLE S6

Combinations of modes of inheritance in 97 cases with two molecular diagnoses.

Mode of Inheritance	AD	AR	XL
AD	33	25	16
AR		9	11
XL			3

TABLE S7

Parental ages in years at time of birth for 101 cases with more than one molecular diagnosis.

The number of *de novo* (DN) variants for each case is indicated.

Number of DN diagnoses	Average Maternal Age	Average Paternal Age
0	28.5	32.8
1	30.2	32.7
2	31.3	35.5

APPENDIX REFERENCES

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