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INSTRUCTIONS: Please review all of the below sections carefully. Your test ordering option will be indicated based on your selection made in the "Test Catalog" section. Please include as much supporting documentation and information as you can, and fill out all fields for which you are able to do so.
If you have any questions or concerns, please reach out to our office for clarification.

COMPREHENSIVE NEUROLOGY TESTING REQUISITION FORM

ORDERING DETAILS

1. ELIGIBILITY CRITERIA

This test is available to individuals 18 or older who are suspected of or at risk of having a Comprehensive Neurology disorder based on one or more of the following *(please select all that apply)*:

REQUIRED:

To avoid processing delays, you *must* select the appropriate eligibility criteria for the patient from the provided list of options below.

- o Amyotrophic Lateral Sclerosis
- o Ataxia
- o Autism Spectrum Disorder
- o Cerebral Cavernous Malformation
- o Charcot-Marie-Tooth Neuropathy
- o Coenzyme Q10 Deficiency
- o Cognitive Impairment
- o Collagen Type VI-Related Disorders
- o Epilepsy
- o Muscular Dystrophy/Myopathy
- o Congenital Myasthenic Syndrome(s)
- o Creatine Metabolism Deficiency
- o Dementia
- o Dystonia
- o Emery-Dreifuss Muscular Dystrophy
- o Epileptic Encephalopathy
- o Holoprosencepahly
- o Idiopathic Generalized and Focal Epilepsy
- o Leukodystrophy/Leukoencephalopathy
- o LGMD/Congenital Muscular Dystrophy
- o Lissencephaly
- o Macrocephaly/Overgrowth Syndrome
- o Metabolic Epilepsy
- o Metabolic Myopathy/Rhabdomyolysis
- o Microcephaly/Pontocerebellar Hypoplasia
- o Migraines
- o NCL/Progressive Myoclonic Epilepsy
- o Nemaline Myopathy
- o Neuro-Ophthalmology
- o Neuronal Migration Disorder
- o Parkinson Disease
- o Periodic Paralysis
- o Polymicrogyria
- o Porphyria
- o Septo-Optic Dysplasia
- o Spastic Paraplegia
- o Spinal Muscular Atrophy
- o Tuberous Sclerosis
- o X-Linked Intellectual Disabilities

Does the patient have a family member with a known disease-causing variant in one of the genes included on the Amyotrophic Lateral Sclerosis Panel, the Dementia Panel, *or* the Parkinson Disease Panel?
If yes, please list the family member relationship to patient, gene, and variant, if known:

_____

2. GENE-SPECIFIC FAMILY FOLLOW-UP TESTING

For relatives of testing participants who received a Pathogenic/Likely Pathogenic result, or approved VUS, who would like to receive gene-specific follow-up testing at no additional charge

Relatives do not need to meet the eligibility criteria listed above. *If participating in gene-specific follow-up testing, please check the following box.* ☐

PATIENT INFORMATION

First Name	MI	Last Name
Date of Birth (MM/DD/YYYY)	Biological Sex ☐ M ☐ F	MRN (medical record number, if available)

Ancestry ☐ Asian ☐ Black/African American ☐ White/Caucasian ☐ Ashkenazi Jewish ☐ Hispanic ☐ Native American ☐ Pacific Islander ☐ French Canadian ☐ Sephardic Jewish ☐ Mediterranean ☐ Other: _____

Phone	Email address	
Street Address		City
State/Prov	ZIP/Postal	Country (if other than US)

ORDERING PHYSICIAN & CLINIC INFORMATION

Clinic/Practice Name		
Phone	Fax	
Street Address		City
State/Prov	ZIP/Postal	Country (if other than US)
Primary Clinic Contact Name		Extension (if applicable)
Primary Clinic Contact Title		

Ordering Provider (Please select *one* physician per order.)

	Physician Name	Physician NPI
☐		
☐		
☐		
☐		
☐		
☐		
☐		

SPECIMEN INFORMATION

Specimen type (please select and indicate number):

☐ Buccal Swab(s) - (OCD-100 kit)

Number of Swabs Provided: _____

Specimen collection date (MM/DD/YYYY): ☐☐ ☐☐ ☐☐☐☐

CLINICAL HISTORY (It is strongly encouraged to include notes, reports and/or previous genetic test results for this individual)

Cognitive Features	YES	NO	UNKNOWN
Progressive cognitive decline - amnestic presentation (memory loss, impairment in learning and recall)	☐	☐	☐
Progressive cognitive decline - language presentation (word-finding deficits)	☐	☐	☐
Progressive cognitive decline - visuospatial presentation (spatial cognition-object agnosia, facial recognition, simultagnosia and alexia)	☐	☐	☐
Progressive cognitive decline - executive dysfunction (impaired reasoning, judgment and problem solving)	☐	☐	☐
Behavioral changes (disinhibition/ impulsivity, apathy/inertia, and/or loss of sympathy/empathy)	☐	☐	☐
Behavioral changes (perseverative/compulsive behaviors and/or hyperorality)	☐	☐	☐
Psychiatric illness (psychosis, mania, hallucinations, delusions, etc.)	☐	☐	☐
Other: _____	☐	☐	☐
Motor Features			
Cerebellar ataxia (gait and/or limb ataxia)	☐	☐	☐
Oculomotor dysfunction (ex: oculomotor apraxia, strabismus, and/or nystagmus)	☐	☐	☐
Increased muscle tone and/or increased extremity deep-tendon reflexes/ hyperreflexia (jaw jerk, Hoffman sign, positive Babinski sign, crossed adductors, extensor plantor response)	☐	☐	☐
Spasticity	☐	☐	☐
Pseudobulbar affect (inappropriate laughing/crying/forced yawning)	☐	☐	☐

Motor Features (continued)	YES	NO	UNKNOWN
Progressive muscle weakness and/or atrophy	☐	☐	☐
Muscle fasciculations and/or cramps	☐	☐	☐
Hyporeflexia and/or decreased or absent deep tendon reflexes	☐	☐	☐
Parkinsonism (bradykinesia, postural instability, rigidity, facial masking, resting tremor)	☐	☐	☐
Tardive dyskinesia (irregular, jerky movements), dystonia (patterned/ twisting movements and postures) and/or myoclonus (muscle jerks)	☐	☐	☐
Dysarthria (difficulty speaking)	☐	☐	☐
Dysphagia (swallowing difficulties)	☐	☐	☐

Neuroimaging, biomarkers, genetic, and/or neuropathophysiology findings:

- ☐ Abnormal MRI
  Major finding(s)? _____
- ☐ Abnormal PET scan or CSF analysis
  Major finding(s)? _____
- ☐ Abnormal brain pathology findings (typically only available post-mortem)
  Major finding(s)? _____
- ☐ Abnormal EMG
  Major finding(s)? _____
- ☐ Previously tested for C9orf72 gene at outside laboratory?
  Test result (positive, negative, intermediate) _____
  [please include copy of previous test result if available]

Other features

- ☐ Paget disease of bone
- ☐ Supranuclear palsy
- ☐ Autonomic dysfunction (ex: orthostatic hypotension, urinary incontinence)
- ☐ Familial insomnia
- ☐ Other relevant clinical features: _____

OPTIONAL - REQUESTED VARIANTS FOR THIS PATIENT'S REPORT, IF KNOWN

To have the presence or absence of specific variants commented on in this patient's report, provide the details requested below.

For gene-specific family follow-up, see the note following test selection menu.

Was the proband (individual with variant) tested at OmniHealth Diagnostics. If yes, list Accession ID:_____ If no, attach a copy of the test results (required).

Variant(s) Requested (e.g. GENE c.2200A>T (p.Thr734Ser) NM_00012345) If left blank, all variants identified in the proband will be commented on.		***What is this patient's relationship to the proband? (Please select one)***
		☐ Parent ☐ Child ☐ Self ☐ Grandparent ☐ Grandchild ☐ Sibling ☐ Aunt/Uncle ☐ Niece/Nephew ☐ Other:_____

BILLING/PAYMENT INFORMATION

INSURANCE BILLING To avoid delays, please include a front and back copy of your insurance card, along with clinical notes, medical records, and/or a letter of medical necessity (LMN).

Policy Holder Name	Patient Relationship to Policy Holder ☐ Spouse ☐ Child ☐ Self ☐ Other: _____		**FOR MEDICARE PATIENTS ONLY**	**CASH PAY/SELF-PAY**
Primary Insurance Name	Primary Insurance Policy #	Primary Insurance Group #	Have you, the patient, been treated as a hospital inpatient (more than a twenty-four [24] hour stay) in the last fourteen (14) days? ☐ Yes ☐ No	If you would prefer to pay by credit card, please include a fully filled out Credit Card Authorization Form with this test order form.
Secondary Insurance Name	Secondary Insurance Policy #	Secondary Insurance Group #		

CLINICAL HISTORY

FAMILY HISTORY

Is there a family history of the disease(s) for which the patient is being tested? ☐ Yes ☐ No If yes, describe below and attach pedigree and/or clinical notes.

Relative / Relationship to the patient	Maternal or paternal	Diagnosed condition	Age at diagnosis	Relative / Relationship to the patient	Maternal or paternal	Diagnosed condition	Age at diagnosis

PERSONAL HISTORY

Is/was this patient affected or symptomatic?† ☐ Yes ☐ No
Provide details in the required clinical history questions (if applicable).

†***Symptomatic means this patient has features or signs known or suspected to be related to the genetic testing being ordered and could include findings on physical examination, laboratory tests, and/or imaging.***

COMPREHENSIVE NEUROLOGY TEST CATALOG

Custom Neurology NGS Testing (Select the genes below) or ☐ Comprehensive Neurology NGS Testing Panel (Test All Genes)

☐ADNP	☐BCL11A	☐EGR2	☐GRN	☐NDUFA1	☐PRRT2	☐SPG11	☐APOE	☐GALT	☐RRM2B
☐AFF2	☐BSCL2	☐EHMT1	☐HEXA	☐NLGN3	☐PSEN1	☐STXBP1	☐APP	☐GBE1	☐SCO1
☐ALDH7A1	☐C12orf4	☐EN2	☐HFE	☐NLGN4X	☐PTEN	☐SYNGAP1	☐ARSA	☐GJB1	☐SETX
☐ANG	☐CACNA1A	☐EZH2	☐HSPB1	☐NOTCH3	☐REEP1	☐TARDBP	☐ATM	☐HBB	☐SLC25A4
☐APTX	☐CACNA1C	☐FBXO11	☐HTT	☐NSD1	☐SCN1A	☐TBP	☐BCKDHA	☐MCOLN1	☐SPAST
☐ARX	☐CC2D1A	☐FMR1	☐IKBKAP	☐NTRK1	☐SCN1B	☐TCF4	☐BCKDHB	☐MFN2	☐SPTLC1
☐ASPA	☐CDKL5	☐FOXG1	☐KCNQ2	☐NTRK2	☐SCN2A	☐TH	☐BCS1L	☐MPV17	☐SUCLA2
☐ASXL1	☐CHD2	☐FOXP1	☐KDM5C	☐PABPN1	☐SCN8A	☐THAP1	☐BLM	☐MPZ	☐SUCLG1
☐ATN1	☐CNOT3	☐FTSJ1	☐L1CAM	☐PCDH19	☐SCO2	☐TOR1A	☐C10orf2	☐NPC1	☐TAZ
☐ATP1A2	☐CNTN6	☐FXN	☐LRRK2	☐PDGFB	☐SGCE	☐TPP1	☐COQ2	☐OPA1	☐TK2
☐ATP7B	☐COL4A1	☐GABRG2	☐MAPT	☐PDHA1	☐SLC16A2	☐TSC1	☐COX10	☐OPTN	☐TYMP
☐ATXN1	☐COL4A3BP	☐GAMT	☐MBOAT7	☐PIK3CA	☐SLC2A1	☐TSC2	☐DGUOK	☐PAH	
☐ATXN10	☐CSNK2A1	☐GARS	☐MECP2	☐PINK1	☐SLC6A8	☐TTR	☐ERBB4	☐PDSS2	
☐ATXN2	☐CSTB	☐GATM	☐MED12	☐PMP22	☐SLC9A6	☐UBA1	☐FANCC	☐PLCG2	
☐ATXN3	☐CTNND2	☐GBA	☐MTHFR	☐PNKD	☐SMN1	☐ZEB2	☐FUS	☐POLG2	
☐ATXN7	☐DHCR7	☐GCH1	☐MTM1	☐POLG	☐SMN2	☐ZNF41	☐G6PC	☐PRNP	
☐ATXN8OS	☐DPYD	☐GRIN2A	☐NDP	☐PPP2R2B	☐SOD1	☐ACADM	☐GAA	☐PSEN2	

INDICATION (S) FOR TESTING — ICD-10 Codes

Inflammatory diseases of the central nervous system (G00-G09)

ICD Category - Bacterial meningitis, not elsewhere classified (G00)
- ☐ G00.0 Hemophilus meningitis
- ☐ G00.1 Pneumococcal meningitis
- ☐ G00.2 Streptococcal meningitis
- ☐ G00.3 Staphylococcal meningitis
- ☐ G00.8 Other bacterial meningitis
- ☐ G00.9 Bacterial meningitis, unspecified

ICD Category - Meningitis in bacterial diseases classified elsewhere (G01)
- ☐ G01 Meningitis in bacterial diseases classified elsewhere

ICD Category - Meningitis in oth infec/parastc diseases classd elswhr (G02)
- ☐ G02 Meningitis in other infectious and parasitic diseases classified elsewhere

ICD Category - Meningitis due to other and unspecified causes (G03)
- ☐ G03.0 Nonpyogenic meningitis
- ☐ G03.1 Chronic meningitis
- ☐ G03.2 Benign recurrent meningitis [Mollaret]
- ☐ G03.8 Meningitis due to other specified causes
- ☐ G03.9 Meningitis, unspecified

ICD Category - Encephalitis, myelitis and encephalomyelitis (G04)
- ☐ G04.00 Acute disseminated encephalitis and encephalomyelitis, unspecified
- ☐ G04.01 Postinfectious acute disseminated encephalitis and encephalomyelitis (postinfectious ADEM)
- ☐ G04.02 Postimmunization acute disseminated encephalitis, myelitis encephalomyelitis
- ☐ G04.1 Tropical spastic paraplegia
- ☐ G04.2 Bacterial meningoencephalitis and meningomyelitis, not elsewhere classified
- ☐ G04.30 unspecified
- ☐ G04.31 Postinfectious acute necrotizing hemorrhagic encephalopathy
- ☐ G04.32 Postimmunization acute necotizing hemorrhagic encephalopathy
- ☐ G04.39 Other acute necrotizing hemorrhagic encephalopathy
- ☐ G04.81 Other encephalitis and encephalomyelitis
- ☐ G04.82 Acute flaccid myelitis
- ☐ G04.89 Other myelitis
- ☐ G04.90 Encephalitis and encephalomyelitis, unspecified
- ☐ G04.91 Myelitis, unspecified

ICD Category - Encphlts, myelitis & encephalomyelitis in dis classd elswhr (G05)
- ☐ ☐ G05.3 Encephalitis and encephalomyelitis in diseases classified elsewhere
- G05.4 Myelitis in diseases classified elsewhere

ICD Category - Intracranial and intraspinal abscess and granuloma (G06)
- ☐ G06.0 Intracranial abscess and granuloma
- ☐ G06.1 Intraspinal abscess and granuloma
- ☐ G06.2 Extradural and subdural abscess, unspecified

ICD Category - Intcrn & intraspinal abscs & granuloma in dis classd elswhr (G07)
- ☐ G07 Intracranial and intraspinal abscess and granuloma in diseases classified elsewhere

ICD Category - Intracranial and intraspinal phlebitis and thrombophlebitis (G08)
- ☐ G08 Intracranial and intraspinal phlebitis and thrombophlebitis

ICD Category - Sequelae of inflammatory diseases of central nervous system (G09)
- ☐ G09 Sequelae of inflammatory diseases of central nervous system ease

Systemic atrophies primary affecting the central nervous system (G10-G14)

ICD Category - Huntington's disease (G10)
- ☐ G10 Huntington's dis

ICD Category - Hereditary ataxia (G11)
- ☐ G11.0 Congenital nonprogressive ataxia
- ☐ G11.10 Early-onset cerebellar ataxia, unspecified
- ☐ G11.11 Friedreich ataxia
- ☐ G11.19 Other early-onset cerebellar ataxia
- ☐ G11.2 Late-onset cerebellar ataxia
- ☐ G11.3 Cerebellar ataxia with defective DNA repair

ICD Category - Systemic atrophies aff cnsl in diseases classd elswhr (G13)
- ☐ G13.0 Paraneoplastic neuromyopathy and neuropathy
- ☐ G13.1 Other systemic atrophy primarily affecting central nervous system in neoplastic disease
- ☐ G13.2 Systemic atrophy primarily affecting the central nervous system in myxedema
- ☐ G13.8 Systemic atrophy primarily affecting central nervous system in other diseases classified elsewhere

ICD Category - Postpolio syndrome (G14)
- ☐ G14 Postpolio syndrome

Extrapyramidal and movement disorders (G20-G26)

ICD Category - Parkinson's disease (G20)
- G20 Parkinson's disease

ICD Category - Secondary parkinsonism (G21)
- ☐ G21.0 Malignant neuroleptic syndrome
- ☐ G21.11 Neuroleptic induced parkinsonism
- ☐ G21.19 Other drug induced secondary parkinsonism
- ☐ G21.2 Secondary parkinsonism due to other external agents
- ☐ G21.3 Postencephalitic parkinsonism
- ☐ G21.4 Vascular parkinsonism
- ☐ G21.8 Other secondary parkinsonism
- ☐ G21.9 Secondary parkinsonism, unspecified

ICD Category - Other degenerative diseases of basal ganglia (G23)
- ☐ G23.0 Hallervorden-Spatz disease
- ☐ G23.1 Progressive supranuclear ophthalmoplegia [Steele-Richardson-Olszewski]
- ☐ G23.2 Striatonigral degeneration
- ☐ G23.8 Other specified degenerative diseases of basal ganglia
- ☐ G23.9 Degenerative disease of basal ganglia, unspecified

ICD Category - Dystonia (G24)
- ☐ G24.01 Drug induced subacute dyskinesia
- ☐ G24.02 Drug induced acute dystonia
- ☐ G24.09 Other drug induced dystonia
- ☐ G24.1 Genetic torsion dystonia
- ☐ G24.2 Idiopathic nonfamilial dystonia
- ☐ G24.3 Spasmodic torticollis
- ☐ G24.4 Idiopathic orofacial dystonia
- ☐ G24.5 Blepharospasm
- ☐ ☐ G24.8 Other dystonia
- G24.9 Dystonia, unspecified

ICD Category - Other extrapyramidal and movement disorders (G25)
- ☐ G25.0 Essential tremor
- ☐ G25.1 Drug-induced tremor
- ☐ G25.2 Other specified forms of tremor
- ☐ G25.3 Myoclonus
- ☐ G25.4 Drug-induced chorea
- ☐ G25.5 Other chorea
- ☐ G25.61 Drug induced tics
- ☐ G25.69 Other tics of organic origin
- ☐ G25.70 Drug induced movement disorder, unspecified
- ☐ G25.71 Drug induced akathisia
- ☐ G25.79 Other drug induced movement disorders
- ☐ G25.81 Restless legs syndrome
- ☐ G25.82 Stiff-man syndrome
- ☐ G25.83 Benign shuddering attacks
- ☐ G25.89 Other specified extrapyramidal and movement disorders
- ☐ G25.9 Extrapyramidal and movement disorder, unspecified

ICD Category - Extrapyramidal and movement disord in diseases classd elswhr (G26)
- ☐ G26 Extrapyramidal and movement disorders in diseases classified elsewhere

☐ G11.4 Hereditary spastic paraplegia
☐ G11.8 Other hereditary ataxias
☐ G11.9 Hereditary ataxia, unspecified

ICD Category - Spinal muscular atrophy and related syndromes (G12)
☐ G12.0 Infantile spinal muscular atrophy, type I [Werdnig-Hoffman]
☐ G12.1 Other inherited spinal muscular atrophy
☐ G12.20 Motor neuron disease, unspecified
☐ G12.21 Amyotrophic lateral sclerosis
☐ G12.22 Progressive bulbar palsy
☐ G12.23 Primary lateral sclerosis
☐ G12.24 Familial motor neuron disease
☐ G12.25 Progressive spinal muscle atrophy
☐ G12.29 Other motor neuron disease
☐ G12.8 Other spinal muscular atrophies and related syndromes
☐ G12.9 Spinal muscular atrophy, unspecified

ICD Category - Oth degeneratv disord of nervous sys in dis classd elswhr (G32)
☐ G32.0 Subacute combined degeneration of spinal cord in diseases classified elsewhere
☐ G32.81 Cerebellar ataxia in diseases classified elsewhere
☐ G32.89 Other specified degenerative disorders of nervous system in diseases classified elsewhere

Demyelinating diseases of the central nervous system (G35-G37)

ICD Category - Multiple sclerosis (G35)
☐ G35 Multiple sclerosis

ICD Category - Other acute disseminated demyelination (G36)
☐ G36.0 Neuromyelitis optica [Devic]
☐ G36.1 Acute and subacute hemorrhagic leukoencephalitis [Hurst]
☐ G36.8 Other specified acute disseminated demyelination
☐ G36.9 Acute disseminated demyelination, unspecified

ICD Category - Other demyelinating diseases of central nervous system (G37)
☐ G37.0 Diffuse sclerosis of central nervous system
☐ G37.1 Central demyelination of corpus callosum
☐ G37.2 Central pontine myelinolysis
☐ G37.3 Acute transverse myelitis in demyelinating disease of central nervous system
☐ G37.4 Subacute necrotizing myelitis of central nervous system
☐ G37.5 Concentric sclerosis [Balo] of central nervous system
☐ G37.8 Other specified demyelinating diseases of central nervous system
☐ G37.9 Demyelinating disease of central nervous system, unspecified

Episodic and paroxysmal disorders (G40-G47)

ICD Category - Epilepsy and recurrent seizures (G40)
☐ G40.001 Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, not intractable with status epilepticus
☐ G40.009 Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, not intractable, without status epilepticus
☐ G40.011 Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, with status epilepticus
☐ G40.019 Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, without status epilepticus
☐ G40.101 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, not intractable, with status epilepticus
☐ G40.109 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, not intractable, without status epilepticus
☐ G40.111 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, with status epilepticus
☐ G40.119 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, without status epilepticus
☐ G40.201 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, not intractable, with status epilepticus
☐ G40.209 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, not intractable, without status epilepticus
☐ G40.211 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, with status epilepticus
☐ G40.219 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, without status epilepticus
☐ G40.301 Generalized idiopathic epilepsy and epileptic syndromes, not intractable, with status epilepticus
☐ G40.309 Generalized idiopathic epilepsy and epileptic syndromes, not intractable, without status epilepticus
☐ G40.311 Generalized idiopathic epilepsy and epileptic syndromes, intractable, with status epilepticus
☐ G40.319 Generalized idiopathic epilepsy and epileptic syndromes, intractable, without status epilepticus
☐ G40.A01 Absence epileptic syndrome, not intractable, with status epilepticus
☐ G40.A09 Absence epileptic syndrome, not intractable, without status epilepticus
☐ G40.A11 Absence epileptic syndrome, intractable, with status epilepticus
☐ G40.A19 Absence epileptic syndrome, intractable, without status epilepticus
☐ G40.B01 Juvenile myoclonic epilepsy, not intractable, with status epilepticus
☐ G40.B09 Juvenile myoclonic epilepsy, not intractable, without status epilepticus
☐ G40.B11 Juvenile myoclonic epilepsy, intractable, with status epilepticus
☐ G40.B19 Juvenile myoclonic epilepsy, intractable, without status epilepticus
☐ G40.401 Other generalized epilepsy and epileptic syndromes, not intractable, with status epilepticus
☐ G40.409 Other generalized epilepsy and epileptic syndromes, not intractable, without status epilepticus
☐ G40.411 Other generalized epilepsy and epileptic syndromes, intractable, with status epilepticus
☐ G40.419 Other generalized epilepsy and epileptic syndromes, intractable, without status epilepticus

Other degenerative diseases of the nervous system (G30-G32)

ICD Category - Alzheimer's disease (G30)
☐ G30.0 Alzheimer's disease with early onset
☐ G30.1 Alzheimer's disease with late onset
☐ G30.8 Other Alzheimer's disease
☐ G30.9 Alzheimer's disease, unspecified

ICD Category - Oth degenerative diseases of nervous system, NEC (G31)
☐ G31.01 Pick's disease
☐ G31.09 Other frontotemporal dementia
☐ G31.1 Senile degeneration of brain, not elsewhere classified
☐ G31.2 Degeneration of nervous system due to alcohol
☐ G31.81 Alpers disease
☐ G31.82 Leigh's disease
☐ G31.83 Dementia with Lewy bodies
☐ G31.84 Mild cognitive impairment, so stated
☐ G31.85 Corticobasal degeneration
☐ G31.89 Other specified degenerative diseases of nervous system
☐ G31.9 Degenerative disease of nervous system, unspecified
☐ G40.804 Other epilepsy, intractable, without status epilepticus
☐ G40.811 Lennox-Gastaut syndrome, not intractable, with status epilepticus
☐ G40.812 Lennox-Gastaut syndrome, not intractable, without status epilepticus
☐ G40.813 Lennox-Gastaut syndrome, intractable, with status epilepticus
☐ G40.814 Lennox-Gastaut syndrome, intractable, without status epilepticus
☐ G40.821 Epileptic spasms, not intractable, with status epilepticus
☐ G40.822 Epileptic spasms, not intractable, without status epilepticus
☐ G40.823 Epileptic spasms, intractable, with status epilepticus
☐ G40.824 Epileptic spasms, intractable, without status epilepticus
☐ G40.833 Dravet syndrome, intractable, with status epilepticus
☐ G40.834 Dravet syndrome, intractable, without status epilepticus
☐ G40.89 Other seizures
☐ G40.901 Epilepsy, unspecified, not intractable, with status epilepticus
☐ G40.909 Epilepsy, unspecified, not intractable, without status epilepticus
☐ G40.911 Epilepsy, unspecified, intractable, with status epilepticus
☐ G40.919 Epilepsy, unspecified, intractable, without status epilepticus

ICD Category - Migraine (G43)
☐ G43.001 Migraine without aura, not intractable, with status migrainosus
☐ G43.009 Migraine without aura, not intractable, without status migrainosus
☐ G43.011 Migraine without aura, intractable, with status migrainosus
☐ G43.019 Migraine without aura, intractable, without status migrainosus
☐ G43.101 Migraine with aura, not intractable, with status migrainosus
☐ G43.109 Migraine with aura, not intractable, without status migrainosus
☐ G43.111 Migraine with aura, intractable, with status migrainosus
☐ G43.119 Migraine with aura, intractable, without status migrainosus
☐ G43.401 Hemiplegic migraine, not intractable, with status migrainosus
☐ G43.409 Hemiplegic migraine, not intractable, without status migrainosus
☐ G43.411 Hemiplegic migraine, intractable, with status migrainosus
☐ G43.419 Hemiplegic migraine, intractable, without status migrainosus
☐ G43.501 Persistent migraine aura without cerebral infarction, not intractable, with status migrainosus
☐ G43.509 Persistent migraine aura without cerebral infarction, not intractable, without status migrainosus
☐ G43.511 Persistent migraine aura without cerebral infarction, intractable, with status migrainosus
☐ G43.519 Persistent migraine aura without cerebral infarction, intractable, without status migrainosus
☐ G43.601 Persistent migraine aura with cerebral infarction, not intractable, with status migrainosus
☐ G43.609 Persistent migraine aura with cerebral infarction, not intractable, without status migrainosus
☐ G43.611 Persistent migraine aura with cerebral infarction, intractable, with status migrainosus
☐ G43.619 Persistent migraine aura with cerebral infarction, intractable, without status migrainosus
☐ G43.701 Chronic migraine without aura, not intractable, with status migrainosus
☐ G43.709 Chronic migraine without aura, not intractable, without status migrainosus
☐ G43.711 Chronic migraine without aura, intractable, with status migrainosus
☐ G43.719 Chronic migraine without aura, intractable, without status migrainosus
☐ G43.A0 Cyclical vomiting, in migraine, not intractable
☐ G43.A1 Cyclical vomiting, in migraine, intractable
☐ G43.B0 Ophthalmoplegic migraine, not intractable
☐ G43.B1 Ophthalmoplegic migraine, intractable
☐ G43.C0 Periodic headache syndromes in child or adult, not intractable
☐ G43.C1 Periodic headache syndromes in child or adult, intractable
☐ G43.D0 Abdominal migraine, not intractable
☐ G43.D1 Abdominal migraine, intractable
☐ G43.801 Other migraine, not intractable, with status migrainosus
☐ G43.809 Other migraine, not intractable, without status migrainosus
☐ G43.811 Other migraine, intractable, with status migrainosus
☐ G43.819 Other migraine, intractable, without status migrainosus
☐ G43.821 Menstrual migraine, not intractable, with status migrainosus
☐ G43.829 Menstrual migraine, not intractable, without status migrainosus
☐ G43.831 Menstrual migraine, intractable, with status migrainosus
☐ G43.839 Menstrual migraine, intractable, without status migrainosus
☐ G43.901 Migraine, unspecified, not intractable, with status migrainosus
☐ G43.909 Migraine, unspecified, not intractable, without status migrainosus
☐ G43.911 Migraine, unspecified, intractable, with status migrainosus
☐ G43.919 Migraine, unspecified, intractable, without status migrainosus

- ☐ G40.42 Cyclin-Dependent Kinase-Like 5 Deficiency Disorder
- ☐ G40.501 Epileptic seizures related to external causes, not intractable, with status
- ☐ G40.509 Epileptic seizures related to external causes, not intractable
- ☐ G40.801 Other epilepsy, not intractable, with status epilepticus
- ☐ G40.802 Other epilepsy, not intractable, without status epilepticus
- ☐ G40.803 Other epilepsy, intractable, with status epilepticus
- ☐ G44.039 Episodic paroxysmal hemicrania, not intractable
- ☐ G44.041 Chronic paroxysmal hemicrania, intractable
- ☐ G44.049 Chronic paroxysmal hemicrania, not intractable
- ☐ G44.051 Short lasting unilateral neuralgiform headache with conjunctival injection and tearing (SUNCT), intractable
- ☐ G44.059 lasting unilateral neuralgiform headache with conjunctival injection and tearing (SUNCT), not intractable
- ☐ G44.091 Other trigeminal autonomic cephalgias (TAC), intractable
- ☐ G44.099 Other trigeminal autonomic cephalgias (TAC), not intractable
- ☐ G44.1 Vascular headache, not elsewhere classified
- ☐ G44.201 Tension-type headache, unspecified, intractable
- ☐ G44.209 Tension-type headache, unspecified, not intractable
- ☐ G44.211 Episodic tension-type headache, intractable
- ☐ G44.219 Episodic tension-type headache, not intractable
- ☐ G44.221 Chronic tension-type headache, intractable
- ☐ G44.229 Chronic tension-type headache, not intractable
- ☐ G44.301 Post-traumatic headache, unspecified, intractable
- ☐ G44.309 Post-traumatic headache, unspecified, not intractable
- ☐ G44.311 Acute post-traumatic headache, intractable
- ☐ G44.319 Acute post-traumatic headache, not intractable
- ☐ G44.321 Chronic post-traumatic headache, intractable
- ☐ G44.329 Chronic post-traumatic headache, not intractable
- ☐ G44.40 Drug-induced headache, not elsewhere classified, not intractable
- ☐ G44.41 Drug-induced headache, not elsewhere classified, intractable
- ☐ G44.51 Hemicrania continua
- ☐ G44.52 New daily persistent headache (NDPH)
- ☐ G44.53 Primary thunderclap headache
- ☐ G44.59 Other complicated headache syndrome
- ☐ G44.81 Hypnic headache
- ☐ G44.82 Headache associated with sexual activity
- ☐ G44.83 Primary cough headache
- ☐ G44.84 Primary exertional headache
- ☐ G44.85 Primary stabbing headache
- ☐ G44.86 Cervicogenic headache
- ☐ G44.89 Other headache syndrome

ICD Category - Transient cerebral ischemic attacks and related syndromes (G45)

- ☐ G45.0 Vertebro-basilar artery syndrome
- ☐ G45.1 Carotid artery syndrome (hemispheric)
- ☐ G45.2 Multiple and bilateral precerebral artery syndromes
- ☐ G45.3 Amaurosis fugax
- ☐ G45.4 Transient global amnesia
- ☐ G45.8 Other transient cerebral ischemic attacks and related syndromes
- ☐ G45.9 Transient cerebral ischemic attack, unspecified

ICD Category - Vascular syndromes of brain in cerebrovascular diseases (G46)

- ☐ G46.0 Middle cerebral artery syndrome
- ☐ G46.1 Anterior cerebral artery syndrome
- ☐ G46.2 Posterior cerebral artery syndrome
- ☐ G46.3 Brain stem stroke syndrome
- ☐ G46.4 Cerebellar stroke syndrome
- ☐ G46.5 Pure motor lacunar syndrome
- ☐ G46.6 Pure sensory lacunar syndrome
- ☐ G46.7 Other lacunar syndromes
- ☐ G46.8 Other vascular syndromes of brain in cerebrovascular diseases

ICD Category - Sleep disorders (G47)

- ☐ G47.00 Insomnia, unspecified
- ☐ G47.01 Insomnia due to medical condition
- ☐ G47.09 Other insomnia
- ☐ G47.10 Hypersomnia, unspecified
- ☐ G47.11 Idiopathic hypersomnia with long sleep time
- ☐ G47.12 Idiopathic hypersomnia without long sleep time
- ☐ G47.13 Recurrent hypersomnia
- ☐ G47.14 Hypersomnia due to medical condition
- ☐ G47.19 Other hypersomnia
- ☐ G47.20 Circadian rhythm sleep disorder, unspecified type
- ☐ G47.21 Circadian rhythm sleep disorder, delayed sleep phase type
- ☐ G47.22 Circadian rhythm sleep disorder, advanced sleep phase type
- ☐ G47.23 Circadian rhythm sleep disorder, irregular sleep wake type
- ☐ G47.24 Circadian rhythm sleep disorder, free running type
- ☐ G47.25 Circadian rhythm sleep disorder, jet lag type
- ☐ G47.26 Circadian rhythm sleep disorder, shift work type
- ☐ G47.27 Circadian rhythm sleep disorder in conditions classified elsewhere
- ☐ G47.29 Other circadian rhythm sleep disorder
- ☐ G47.30 Sleep apnea, unspecified
- ☐ G47.31 Primary central sleep apnea
- ☐ G47.32 High altitude periodic breathing
- ☐ G47.33 Obstructive sleep apnea (adult) (pediatric)
- ☐ G47.34 Idiopathic sleep related nonobstructive alveolar hypoventilation
- ☐ G56.41 Causalgia of right upper limb
- ☐ G56.42 Causalgia of left upper limb
- ☐ G56.43 Causalgia of bilateral upper limbs
- ☐ G56.80 Other specified mononeuropathies of unspecified upper limb
- ☐ G56.81 Other specified mononeuropathies of right upper limb

ICD Category - Other headache syndromes (G44)

- ☐ G44.001 Cluster headache syndrome, unspecified, intractable
- ☐ G44.009 Cluster headache syndrome, unspecified, not intractable
- ☐ G44.011 Episodic cluster headache, intractable
- ☐ G44.019 Episodic cluster headache, not intractable
- ☐ G44.021 Chronic cluster headache, intractable
- ☐ G44.029 Chronic cluster headache, not intractable
- ☐ G44.031 Episodic paroxysmal hemicrania, intractable
- ☐ G47.35 Congenital central alveolar hypoventilation syndrome
- ☐ G47.36 Sleep related hypoventilation in conditions classified elsewhere
- ☐ G47.37 Central sleep apnea in conditions classified elsewhere
- ☐ G47.39 Other sleep apnea
- ☐ G47.411 Narcolepsy with cataplexy
- ☐ G47.419 Narcolepsy without cataplexy
- ☐ G47.421 Narcolepsy in conditions classified elsewhere with cataplexy
- ☐ G47.429 Narcolepsy in conditions classified elsewhere without cataplexy
- ☐ G47.50 Parasomnia, unspecified
- ☐ G47.51 Confusional arousals
- ☐ G47.52 REM sleep behavior disorder
- ☐ G47.53 Recurrent isolated sleep paralysis
- ☐ G47.54 Parasomnia in conditions classified elsewhere
- ☐ G47.59 Other parasomnia
- ☐ G47.61 Periodic limb movement disorder
- ☐ G47.62 Sleep related leg cramps
- ☐ G47.63 Sleep related bruxism
- ☐ G47.69 Other sleep related movement disorders
- ☐ G47.8 Other sleep disorders
- ☐ G47.9 Sleep disorder, unspecified

Nerve, nerve root and plexus disorders (G50-G59)

ICD Category - Disorders of trigeminal nerve (G50)

- ☐ G50.0 Trigeminal neuralgia
- ☐ G50.1 Atypical facial pain
- ☐ G50.8 Other disorders of trigeminal nerve
- ☐ G50.9 Disorder of trigeminal nerve, unspecified

ICD Category - Facial nerve disorders (G51)

- ☐ G51.0 Bell's palsy
- ☐ G51.1 Geniculate ganglionitis
- ☐ G51.2 Melkersson's syndrome
- ☐ G51.31 Clonic hemifacial spasm, right
- ☐ G51.32 Clonic hemifacial spasm, left
- ☐ G51.33 Clonic hemifacial spasm, bilateral
- ☐ G51.39 Clonic hemifacial spasm, unspecified
- ☐ G51.4 Facial myokymia
- ☐ ☐ G51.8 Other disorders of facial nerve

G51.9 Disorder of facial nerve, unspecified

ICD Category - Disorders of other cranial nerves (G52)

- ☐ G52.0 Disorders of olfactory nerve
- ☐ G52.1 Disorders of glossopharyngeal nerve
- ☐ G52.2 Disorders of vagus nerve
- ☐ G52.3 Disorders of hypoglossal nerve
- ☐ G52.7 Disorders of multiple cranial nerves
- ☐ G52.8 Disorders of other specified cranial nerves
- ☐ G52.9 Cranial nerve disorder, unspecified

ICD Category - Cranial nerve disorders in diseases slassified elsewhere (G53)

- ☐ G53 Cranial nerve disorders in diseases classified elsewhere

ICD Category - Nerve root and plexus disorders (G54)

- ☐ G54.0 Brachial plexus disorders
- ☐ G54.1 Lumbosacral plexus disorders
- ☐ G54.2 Cervical root disorders, not elsewhere classified
- ☐ G54.3 Thoracic root disorders, not elsewhere classified
- ☐ G54.4 Lumbosacral root disorders, not elsewhere classified
- ☐ G54.5 Neuralgic amyotrophy
- ☐ G54.6 Phantom limb syndrome with pain
- ☐ G54.7 Phantom limb syndrome without pain
- ☐ G54.8 Other nerve root and plexus disorders
- ☐ G54.9 Nerve root and plexus disorder, unspecified

ICD Category - Nerve root and plexus compressions in diseases classd elswhr (G55)

- ☐ G55 Nerve root and plexus compressions in diseases classified elsewhere

ICD Category - Mononeuropathies of upper limb (G56)

- ☐ G56.00 Carpal tunnel syndrome, unspecified upper limb
- ☐ G56.01 Carpal tunnel syndrome, right upper limb
- ☐ G56.02 Carpal tunnel syndrome, left upper limb
- ☐ G56.03 Carpal tunnel syndrome, bilateral upper limbs
- ☐ G56.10 Other lesions of median nerve, unspecified upper limb
- ☐ G56.11 Other lesions of median nerve, right upper limb
- ☐ G56.12 Other lesions of median nerve, left upper limb
- ☐ G56.13 Other lesions of median nerve, bilateral upper limbs
- ☐ G56.20 Lesion of ulnar nerve, unspecified upper limb
- ☐ G56.21 Lesion of ulnar nerve, right upper limb
- ☐ G56.22 Lesion of ulnar nerve, left upper limb
- ☐ G56.23 Lesion of ulnar nerve, bilateral upper limbs
- ☐ G56.30 Lesion of radial nerve, unspecified upper limb
- ☐ G56.31 Lesion of radial nerve, right upper limb
- ☐ G56.32 Lesion of radial nerve, left upper limb
- ☐ G56.33 Lesion of radial nerve, bilateral upper limbs
- ☐ G56.40 Causalgia of unspecified upper limb

ICD Category - Polyneuropathy in disease classified elsewhere (G63)

- ☐ G63 Polyneuropathy in diseases classified elsewhere

- ☐ G56.82 Other specified mononeuropathies of left upper limb
- ☐ G56.83 Other specified mononeuropathies of bilateral upper limbs
- ☐ G56.90 Unspecified mononeuropathy of unspecified upper limb
- ☐ G56.91 Unspecified mononeuropathy of right upper limb
- ☐ G56.92 Unspecified mononeuropathy of left upper limb
- ☐ G56.93 Unspecified mononeuropathy of bilateral upper limbs

ICD Category - Mononeuropathies of lower limb (G57)

- ☐ G57.00 Lesion of sciatic nerve, unspecified lower limb
- ☐ G57.01 Lesion of sciatic nerve, right lower limb
- ☐ G57.02 Lesion of sciatic nerve, left lower limb
- ☐ G57.03 Lesion of sciatic nerve, bilateral lower limbs
- ☐ G57.10 Meralgia paresthetica, unspecified lower limb
- ☐ G57.11 Meralgia paresthetica, right lower limb
- ☐ G57.12 Meralgia paresthetica, left lower limb
- ☐ G57.13 Meralgia paresthetica, bilateral lower limbs
- ☐ G57.20 Lesion of femoral nerve, unspecified lower limb
- ☐ G57.21 Lesion of femoral nerve, right lower limb
- ☐ G57.22 Lesion of femoral nerve, left lower limb
- ☐ G57.23 Lesion of femoral nerve, bilateral lower limbs
- ☐ G57.30 Lesion of lateral popliteal nerve, unspecified lower limb
- ☐ G57.31 Lesion of lateral popliteal nerve, right lower limb
- ☐ G57.32 Lesion of lateral popliteal nerve, left lower limb
- ☐ G57.33 Lesion of lateral popliteal nerve, bilateral lower limbs
- ☐ G57.40 Lesion of medial popliteal nerve, unspecified lower limb
- ☐ G57.41 Lesion of medial popliteal nerve, right lower limb
- ☐ G57.42 Lesion of medial popliteal nerve, left lower limb
- ☐ G57.43 Lesion of medial popliteal nerve, bilateral lower limbs
- ☐ G57.50 Lesion of medial popliteal nerve, bilateral lower limbs
- ☐ G57.51 Tarsal tunnel syndrome, right lower limb
- ☐ G57.52 Tarsal tunnel syndrome, left lower limb
- ☐ G57.53 Tarsal tunnel syndrome, bilateral lower limbs
- ☐ G57.60 Lesion of plantar nerve, unspecified lower limb
- ☐ G57.61 Lesion of plantar nerve, right lower limb
- ☐ G57.62 Lesion of plantar nerve, left lower limb
- ☐ G57.63 Lesion of plantar nerve, bilateral lower limbs
- ☐ G57.70 Causalgia of unspecified lower limb
- ☐ G57.71 Causalgia of right lower limb
- ☐ G57.72 Causalgia of left lower limb
- ☐ G57.73 Causalgia of bilateral lower limbs
- ☐ G57.80 Other specified mononeuropathies of unspecified lower limb
- ☐ G57.81 Other specified mononeuropathies of right lower limb
- ☐ G57.82 Other specified mononeuropathies of left lower limb
- ☐ G57.83 Other specified mononeuropathies of bilateral lower limbs
- ☐ G57.90 Unspecified mononeuropathy of unspecified lower limb
- ☐ G57.91 Unspecified mononeuropathy of right lower limb
- ☐ G57.92 Unspecified mononeuropathy of left lower limb
- ☐ G57.93 Unspecified mononeuropathy of bilateral lower limbs

ICD Category - Other mononeuropathies (G58)

- ☐ G58.0 Intercostal neuropathy
- ☐ G58.7 Mononeuritis multiplex
- ☐ G58.8 Other specified mononeuropathies
- ☐ G58.9 Mononeuropathy, unspecified

ICD Category - Mononeuropathy in diseases classified elsewhere (G59)

- ☐ G59 Mononeuropathy in diseases classified elsewhere

Polyneuropathies and other disorders of the peripheral nervous system (G60-G65)

ICD Category - Hereditary and idiopathic neuropathy (G60)

- ☐ G60.0 Hereditary motor and sensory neuropathy
- ☐ G60.1 Refsum's disease
- ☐ G60.2 Neuropathy in association with hereditary ataxia
- ☐ G60.3 Idiopathic progressive neuropathy
- ☐ G60.8 Other hereditary and idiopathic neuropathies
- ☐ G60.9 Hereditary and idiopathic neuropathy, unspecified

ICD Category - Inlammatory polyneuropathy (G61)

- ☐ G61.0 Guillain-Barre syndrome
- ☐ G61.1 Serum neuropathy
- ☐ G61.81 Chronic inflammatory demyelinating polyneuritis
- ☐ G61.82 Multifocal motor neuropathy
- ☐ G61.89 Other inflammatory polyneuropathies
- ☐ G61.9 Inflammatory polyneuropathy, unspecified

ICD Category - Other and unspecified polyneuropathies (G62)

- ☐ G62.0 Drug-induced polyneuropathy
- ☐ G62.1 Alcoholic polyneuropathy
- ☐ G62.2 Polyneuropathy due to other toxic agents
- ☐ G62.81 Critical illness polyneuropathy
- ☐ G62.82 Radiation-induced polyneuropathy
- ☐ G62.89 Other specified polyneuropathies
- ☐ G62.9 Polyneuropathy, unspecified
- ☐ G81.92 Hemiplegia, unspecified affecting left dominant side
- ☐ G81.93 Hemiplegia, unspecified affecting right nondominant side
- ☐ G81.94 Hemiplegia, unspecified affecting left nondominant side

ICD Category - Other disorders of peripheral nervous system (G64)

- ☐ G64 Other disorders of peripheral nervous system

ICD Category - Sequelae of inflammatory and toxic polyneuropathies (G65)

- ☐ G65.0 Sequelae of Guillain-Barré syndrome
- ☐ ➡G65.1 Sequelae of other inflammatory polyneuropathy

G65.2 Sequelae of toxic polyneuropathy

Diseases of myoneural junction and muscle (G70-G73)

ICD Category G70

- ☐ G70.00 Myasthenia gravis without (acute) exacerbation
- ☐ G70.01 Myasthenia gravis with (acute) exacerbation
- ☐ G70.1 Toxic myoneural disorders
- ☐ G70.2 Congenital and developmental myasthenia
- ☐ G70.80 Lambert-Eaton syndrome, unspecified
- ☐ G70.81 Lambert-Eaton syndrome in disease classified elsewhere
- ☐ G70.89 Other specified myoneural disorders
- ☐ G70.9 Myoneural disorder, unspecified

ICD Category - Myasthenia gravis and other myoneural disorders (G70)

- ☐ G71.00 Muscular dystrophy, unspecified
- ☐ G71.01 Duchenne or Becker muscular dystrophy
- ☐ G71.02 Facioscapulohumeral muscular dystrophy
- ☐ G71.09 Other specified muscular dystrophies
- ☐ G71.11 Myotonic muscular dystrophy
- ☐ G71.12 Myotonia congenita
- ☐ G71.13 Myotonic chondrodystrophy
- ☐ G71.14 Drug induced myotonia
- ☐ G71.19 Other specified myotonic disorders
- ☐ G71.20 Congenital myopathy, unspecified
- ☐ G71.21 Nemaline myopathy
- ☐ G71.220 X-linked myotubular myopathy
- ☐ G71.228 Other centronuclear myopathy
- ☐ G71.29 Other congenital myopathy
- ☐ G71.3 Mitochondrial myopathy, not elsewhere classified
- ☐ G71.8 Other primary disorders of muscles
- ☐ G71.9 Primary disorder of muscle, unspecified

ICD Category - Primary disorders of muscles (G71)

- ☐ G72.0 Drug-induced myopathy
- ☐ G72.1 Alcoholic myopathy
- ☐ G72.2 Myopathy due to other toxic agents
- ☐ G72.3 Periodic paralysis
- ☐ G72.41 Inclusion body myositis [IBM]
- ☐ G72.49 Other inflammatory and immune myopathies, not elsewhere classified
- ☐ G72.81 Critical illness myopathy
- ☐ G72.89 Other specified myopathies
- ☐ G72.9 Myopathy, unspecified

ICD Category - Other and unspecified myopathies (G72)

- ☐ G72.0 Drug-induced myopathy
- ☐ G72.1 Alcoholic myopathy
- ☐ G72.2 Myopathy due to other toxic agents
- ☐ G72.3 Periodic paralysis
- ☐ G72.41 Inclusion body myositis [IBM]
- ☐ G72.49 Other inflammatory and immune myopathies, not elsewhere classified
- ☐ G72.81 Critical illness myopathy
- ☐ ☐ G72.89 Other specified myopathies

G72.9 Myopathy, unspecified

ICD Category - Disord of myoneural junction and muscle in dis classd elswhr (G73)

- ☐ G73 Disorders of myoneural junction and muscle in diseases classified elsewhere

Cerebral palsy and other paralytic syndromes (G80-G83)

ICD Category - Cerebral palsy (G80)

- ☐ G80.0 Spastic quadriplegic cerebral palsy
- ☐ G80.1 Spastic diplegic cerebral palsy
- ☐ G80.2 Spastic hemiplegic cerebral palsy
- ☐ G80.3 Athetoid cerebral palsy
- ☐ G80.4 Ataxic cerebral palsy
- ☐ G80.8 Other cerebral palsy
- ☐ G80.9 Cerebral palsy, unspecified

ICD Category - Hemiplegia and hemiparesis (G81)

- ☐ G81.00 Flaccid hemiplegia affecting unspecified side
- ☐ G81.01 Flaccid hemiplegia affecting right dominant side
- ☐ G81.02 Flaccid hemiplegia affecting left dominant side
- ☐ G81.03 Flaccid hemiplegia affecting right nondominant side
- ☐ G81.04 Flaccid hemiplegia affecting left nondominant side
- ☐ G81.10 Spastic hemiplegia affecting unspecified side
- ☐ G81.11 Spastic hemiplegia affecting right dominant side
- ☐ G81.12 Spastic hemiplegia affecting left dominant side
- ☐ G81.13 Spastic hemiplegia affecting right nondominant side
- ☐ G81.14 Spastic hemiplegia affecting left nondominant side
- ☐ G81.90 Hemiplegia, unspecified affecting unspecified side
- ☐ G81.91 Hemiplegia, unspecified affecting right dominant side
- ☐ G92.05 Immune effector cell-associated neurotoxicity syndrome, grade 5
- ☐ G92.8 Other toxic encephalopathy
- ☐ G92.9 Unspecified toxic encephalopathy

ICD Category G82

- ☐ G82.20 Paraplegia, unspecified
- ☐ G82.21 Paraplegia, complete
- ☐ G82.22 Paraplegia, incomplete
- ☐ G82.50 Quadriplegia, unspecified
- ☐ G82.51 C1-C4 complete
- ☐ G82.52 C1-C4 Incomplete
- ☐ G82.53 C5-C7 complete
- ☐ G82.54 C5-C7 Incomplete

ICD Category G83

- ☐ G83.0 Diplegia of upper limbs
- ☐ G83.10 Monoplegia of lower limb affecting unspecified side
- ☐ G83.11 Monoplegia of lower limb affecting right dominant side
- ☐ G83.12 Monoplegia of lower limb affecting left dominant side
- ☐ G83.13 Monoplegia of lower limb affecting right nondominant side
- ☐ G83.14 Monoplegia of lower limb affecting left nondominant side
- ☐ G83.20 Monoplegia of upper limb affecting unspecified side
- ☐ G83.21 Monoplegia of upper limb affecting right dominant side
- ☐ G83.22 Monoplegia of upper limb affecting left dominant side
- ☐ G83.23 Monoplegia of upper limb affecting right nondominant side
- ☐ G83.24 Monoplegia of upper limb affecting left nondominant side
- ☐ G83.30 Monoplegia, unspecified affecting unspecified side
- ☐ G83.31 Monoplegia, unspecified affecting right dominant side
- ☐ G83.32 Monoplegia, unspecified affecting left dominant side
- ☐ G83.33 Monoplegia, unspecified affecting right nondominant side
- ☐ G83.34 Monoplegia, unspecified affecting left nondominant side
- ☐ G83.4 Cauda equina syndrome
- ☐ G83.5 Locked-in state
- ☐ G83.81 Brown-Séquard syndrome
- ☐ G83.82 Anterior cord syndrome
- ☐ G83.83 Posterior cord syndrome
- ☐ G83.84 Todd's paralysis (postepileptic)
- ☐ G83.89 Other specified paralytic syndromes
- ☐ G83.9 Paralytic syndrome, unspecified
- ☐ G89-G99

ICD Category G89

- ☐ G89.0 Central pain syndrome
- ☐ G89.11 Acute pain due to trauma
- ☐ G89.12 Acute post-thoracotomy pain
- ☐ G89.18 Other acute postprocedural pain
- ☐ G89.21 Chronic pain due to trauma
- ☐ G89.22 Chronic post-thoracotomy pain
- ☐ G89.28 Other chronic postprocedural pain
- ☐ G89.29 Other chronic pain
- ☐ G89.3 Neoplasm related pain (acute) (chronic)
- ☐ G89.4 Chronic pain syndrome

ICD Category G90

- ☐ G90.01 Carotid sinus syncope
- ☐ G90.09 Other idiopathic peripheral autonomic neuropathy
- ☐ G90.1 Familial dysautonomia [Riley-Day]
- ☐ G90.2 Horner's syndrome
- ☐ G90.3 Multi-system degeneration of the autonomic nervous system
- ☐ G90.4 Autonomic dysreflexia
- ☐ G90.50 Complex regional pain syndrome I, unspecified
- ☐ G90.511 Complex regional pain syndrome I of right upper limb
- ☐ G90.512 Complex regional pain syndrome I of left upper limb
- ☐ G90.513 Complex regional pain syndrome I of upper limb, bilateral
- ☐ G90.519 Complex regional pain syndrome I of unspecified upper limb
- ☐ G90.521 Complex regional pain syndrome I of right lower limb
- ☐ G90.522 Complex regional pain syndrome I of left lower limb
- ☐ G90.523 Complex regional pain syndrome I of lower limb, bilateral
- ☐ G90.529 Complex regional pain syndrome I of unspecified lower limb
- ☐ G90.59 Complex regional pain syndrome I of other specified site
- ☐ G90.8 Other disorders of autonomic nervous system
- ☐ G90.9 Disorder of the autonomic nervous system, unspecified

ICD Category G91

- ☐ G91.0 Communicating hydrocephalus
- ☐ G91.1 Obstructive hydrocephalus
- ☐ G91.2 (Idiopathic) normal pressure hydrocephalus
- ☐ G91.3 Post-traumatic hydrocephalus, unspecified
- ☐ G91.4 Hydrocephalus in diseases classified elsewhere
- ☐ G91.8 Other hydrocephalus
- ☐ G91.9 Hydrocephalus, unspecified

ICD Category G92

- ☐ G92.00 Immune effector cell-associated neurotoxicity syndrome, grade unspecified
- ☐ G92.01 Immune effector cell-associated neurotoxicity syndrome, grade 1
- ☐ G92.02 Immune effector cell-associated neurotoxicity syndrome, grade 2
- ☐ G92.03 Immune effector cell-associated neurotoxicity syndrome, grade 3
- ☐ G92.04 Immune effector cell-associated neurotoxicity syndrome, grade 4

ICD Category G93

- ☐ G93.0 Cerebral cysts
- ☐ G93.1 Anoxic brain damage, not elsewhere classified
- ☐ G93.2 Benign intracranial hypertension
- ☐ G93.3 Postviral fatigue syndrome
- ☐ G93.40 Encephalopathy, unspecified
- ☐ G93.41 Metabolic encephalopathy
- ☐ G93.49 Other encephalopathy
- ☐ G93.5 Compression of brain
- ☐ G93.6 Cerebral edema
- ☐ G93.7 Reye's syndrome
- ☐ G93.81 Temporal sclerosis
- ☐ G93.82 Brain death
- ☐ G93.89 Other specified disorders of brain
- ☐ G93.9 Disorder of brain, unspecified

ICD Category G94

- ☐ G94 Other disorders of brain in diseases classified elsewhere

ICD Category G95

- ☐ G95.0 Syringomyelia and syringobulbia
- ☐ G95.11 Acute infarction of spinal cord (embolic) (nonembolic)
- ☐ G95.19 Other vascular myelopathies
- ☐ G95.20 Unspecified cord compression
- ☐ G95.29 Other cord compression
- ☐ G95.81 Conus medullaris syndrome
- ☐ G95.89 Other specified diseases of spinal cord
- ☐ G95.9 Disease of spinal cord, unspecified

ICD Category G96

- ☐ G96.00 Cerebrospinal fluid leak, unspecified
- ☐ G96.01 Cranial cerebrospinal fluid leak, spontaneous
- ☐ G96.02 Spinal cerebrospinal fluid leak, spontaneous
- ☐ G96.08 Other cranial cerebrospinal fluid leak
- ☐ G96.09 Other spinal cerebrospinal fluid leak
- ☐ G96.11 Dural tear
- ☐ G96.12 Meningeal adhesions (cerebral) (spinal)
- ☐ G96.191 Perineural cyst
- ☐ G96.198 Other disorders of meninges, not elsewhere classified
- ☐ G96.810 Intracranial hypotension, unspecified
- ☐ G96.811 Intracranial hypotension, spontaneous
- ☐ G96.819 Other intracranial hypotension
- ☐ G96.89 Other specified disorders of central nervous system
- ☐ G96.9 Disorder of central nervous system, unspecified

ICD Category G97

- ☐ G97.0 Cerebrospinal fluid leak from spinal puncture
- ☐ G97.1 Other reaction to spinal and lumbar puncture
- ☐ G97.2 Intracranial hypotension following ventricular shunting
- ☐ G97.31 Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure
- ☐ G97.32 Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure
- ☐ G97.41 Accidental puncture or laceration of dura during a procedure
- ☐ G97.48 Accidental puncture and laceration of other nervous system organ or structure during a nervous system procedure
- ☐ G97.49 Accidental puncture and laceration of other nervous system organ or structure during other procedure
- ☐ G97.51 Postprocedural hemorrhage of a nervous system organ or structure following a nervous system procedure
- ☐ G97.52 Postprocedural hemorrhage of a nervous system organ or structure following other procedure
- ☐ G97.61 Postprocedural hematoma of a nervous system organ or structure following a nervous system procedure
- ☐ G97.62 Postprocedural hematoma of a nervous system organ or structure following other procedure
- ☐ G97.63 Postprocedural seroma of a nervous system organ or structure following a nervous system procedure
- ☐ G97.64 Postprocedural seroma of a nervous system organ or structure following other procedure
- ☐ G97.81 Other intraoperative complications of nervous system
- ☐ G97.82 Other postprocedural complications and disorders of nervous system
- ☐ G97.83 Intracranial hypotension following lumbar cerebrospinal fluid shunting
- ☐ G97.84 Intracranial hypotension following other procedure

ICD Category G98

- ☐ G98.0 Neurogenic arthritis, not elsewhere classified
- ☐ G98.8 Other disorders of nervous system

ICD Category G99

- ☐ G99.0 Autonomic neuropathy in diseases classified elsewhere
- ☐ G99.2 Myelopathy in diseases classified elsewhere
- ☐ G99.8 Other specified disorders of nervous system in diseases classified elsewhere

Additional ICD Codes:.....

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Physician Consent for Genetic Testing

OmniHealth Diagnostics, LLC continually updates its panels based on the most recent evidence. If an order is placed using an outdated test requisition form, **OmniHealth Diagnostics, LLC** reserves the right to upgrade ordered tests to their current versions. Test IDs containing add-on codes will include the original panel as well as the add-on.
By signing this form, the medical professional acknowledges that the individual/family member authorized to make decisions for the individual (collectively, the "Patient") has been supplied information regarding and consented to undergo genetic testing, substantially as set forth in **OmniHealth Diagnostics, LLC** Informed Consent for Genetic Testing (**OmniHealth Diagnostics, LLC**). The medical professional will retain evidence that the patient consented to genetic testing. The Patient has been informed that **OmniHealth Diagnostics, LLC** may notify them of clinical updates related to genetic Test results (in consultation with the ordering medical professional as indicated) and has been informed that DE identified(also referred to as pseudonymised) patient data may be used and shared with third parties in connection with the Program, for research and commercial purposes. For orders originating outside the United States, the Patient has been informed that their personal information and specimen will be transferred to and processed in the United States. The medical professional warrants that (i) he/she will not seek reimbursement for No charge test from any third, including but not limited to government healthcare programs: (ii) participation in the program will not influence the his/her medical this decisions; (iii) he/ She is not obligated to purchase or prescribe any product or service offered by a sponsor of the program; (iv) he/she is not obligated to participate in or to encourage patients to participate in any clinical trial or other research program conducted by a sponsor; and (v) he/she will participate in the Program in accordance with applicable laws. The medical professional consents to the sharing of organization and clinician contact information with third parties, including commercial organizations, who may contact the medical professional directly in connection with the Program. A list of third party partners will be provided upon request. I attest that I am authorized under applicable law to order this test.

Medical professional signature (required)	Date (MM/DD/YYYY)

Patient Informed Consent for Genetic Testing

(Patient's or Patient's Legal Guardian's Full Name) (Test Type/Name)

I, _____ , authorize **OmniHealth Diagnostics, LLC** to conduct _____genetic (Patient's or Patient's Legal Guardian's Full Name) (Test Type/Name) testing, as ordered by my physician/authorized healthcare provider or as ordered by my child's/dependent's physician/authorized healthcare provider, and also authorize the collection of a sample for the purpose of this testing.

By signing below, I acknowledge and/or consent to the following statements:

1. My physician or his/her designee (such as a genetic counselor) has fully explained to me the following:
   (A) the purpose, description, and nature of this test and its potential uses.
   (B) the reliability of positive or negative results and the level of certainty that a positive result for a disease or condition(s) holds, serving as a predictor of such disease or condition(s).
   (C) the effectiveness and limitations of the genetic test and the meaning of the possible genetic test results.
   (D) the implications of conducting this genetic testing, including the medical risks and benefits.
   (E) the description of the disease or condition(s) being tested for.
   (F) the availability and importance of meeting with a genetic counselor or medical geneticist, which I have been provided information on identifying an individual from whom I might obtain counseling, that I may seek prior to signing this consent.
   (G) that a positive result is an indication I may be predisposed to or could have the specific disease or condition(s) tested for. That if I wish to discuss my results and their meaning, I should consult with my physician and/or pursue genetic counseling. That if I wish to consider further independent testing after reviewing my r esults, I should consult with my physician.
2. I understand that I will receive my test results from my physician/authorized healthcare provider unless I have explicitly directed otherwise.
3. I understand that I have a right to confidential treatment of my sample and results, and that my results will only be disclosed as I have authorized in this consent.
   (A) I authorize my test results to be disclosed to the following person(s), should they be requested:
   * Please list all authorized person(s) below with first name, last name, and relation to patient.

_____

_____

_____

_____

4. I understand that only my physician's office and **OmniHealth Diagnostics, LLC** will have access to my sample and that my sample will only be used for the purposes which I have authorized in this consent.

Patient's Statement

I, the undersigned, have been informed about the test's purpose, procedures, possible benefits, possible risks, and I have been provided a copy of this consent for my records. I have been provided the opportunity to ask questions before signing this consent, and I have been assured that I can ask further questions at any time. I voluntarily agree to this genetic testing.

Patient signature (required)	Date (MM/DD/YYYY)