Long QT_WES

Gene panel

Gene panel information

Gene panel	**Long QT_WES**
Version	1
Total genes	13
Activation date	Friday 12 june 2026
Publisher	Center for Medical Genetics, Ghent

Genes

Gene	% at least 20 x covered*	OMIM gene id	OMIM Phenotypes
CACNA1C	99.92 %	114205	Timothy syndrome, 601005 (3), Autosomal dominant; Long QT syndrome 8, 618447 (3), Autosomal dominant; Neurodevelopmental disorder with hypotonia, language delay, and skeletal defects with or without seizures, 620029 (3), Autosomal dominant; Brugada syndrome 3, 611875 (3), Autosomal dominant
CALM1	99.24 %	114180	Ventricular tachycardia, catecholaminergic polymorphic, 4, 614916 (3), Autosomal dominant; Long QT syndrome 14, 616247 (3), Autosomal dominant
CALM2	98.38 %	114182	Long QT syndrome 15, 616249 (3), Autosomal dominant
CALM3	99.9 %	114183	Long QT syndrome 16, 618782 (3), Autosomal dominant; ?Ventricular tachycardia, catecholaminergic polymorphic 6, 618782 (3), Autosomal dominant
CAV3	99.99 %	601253	Myopathy, distal, Tateyama type, 614321 (3), Autosomal dominant; Creatine phosphokinase, elevated serum, 123320 (3), Autosomal dominant; Cardiomyopathy, familial hypertrophic, 192600 (3), Digenic dominant, Autosomal dominant; Rippling muscle disease 2, 606072 (3), Autosomal dominant; Long QT syndrome 9, 611818 (3), Autosomal dominant
KCNE1	86.07 %	176261	Jervell and Lange-Nielsen syndrome 2, 612347 (3), Autosomal recessive; Long QT syndrome 5, 613695 (3), Autosomal dominant
KCNE2	100 %	603796	Long QT syndrome 6, 613693 (3), Autosomal dominant; Atrial fibrillation, familial, 4, 611493 (3)
KCNH2	99.79 %	152427	Short QT syndrome 1, 609620 (3); Long QT syndrome 2, 613688 (3), Autosomal dominant
KCNJ2	100 %	600681	Atrial fibrillation, familial, 9, 613980 (3), Autosomal dominant; Andersen syndrome, 170390 (3), Autosomal dominant; Short QT syndrome 3, 609622 (3), Autosomal dominant
KCNQ1	99.9 %	607542	Short QT syndrome 2, 609621 (3), Autosomal dominant; Atrial fibrillation, familial, 3, 607554 (3), Autosomal dominant; Long QT syndrome 1, 192500 (3), Autosomal dominant; {Long QT syndrome 1, acquired, susceptibility to}, 192500 (3), Autosomal dominant; Jervell and Lange-Nielsen syndrome, 220400 (3), Autosomal recessive
SCN5A	99.86 %	600163	Ventricular fibrillation, familial, 1, 603829 (3); Heart block, progressive, type IA, 113900 (3), Autosomal dominant; Cardiomyopathy, dilated, 1E, 601154 (3), Autosomal dominant; Heart block, nonprogressive, 113900 (3), Autosomal dominant; Long QT syndrome 3, 603830 (3), Autosomal dominant; Sick sinus syndrome 1, 608567 (3), Autosomal recessive; Brugada syndrome 1, 601144 (3), Autosomal dominant; Atrial fibrillation, familial, 10, 614022 (3), Autosomal dominant; {Sudden infant death syndrome, susceptibility to}, 272120 (3), Autosomal recessive
TECRL	99.8 %	617242	Ventricular tachycardia, catecholaminergic polymorphic, 3, 614021 (3), Autosomal recessive
TRDN	99.9 %	603283	Cardiac arrhythmia syndrome, with or without skeletal muscle weakness, 615441 (3), Autosomal recessive

Explanation

OMIM release used for OMIM disease identifiers and descriptions: **2025-11-12**

Gene symbols used are according to the HGNC guidelines (corresponding to Ensembl database release 105).

Each Phenotype is followed by its MIM number, phenotype mapping key and inheritance pattern.

Possible phenotype mapping keys

(1) the disorder is placed on the map based on its association with a gene, but the underlying defect is not known

(2) the disorder has been placed on the map by linkage; no mutation has been found

(3) the molecular basis for the disorder is known; a mutation has been found in the gene

(4) a contiguous gene deletion or duplication syndrome, multiple genes are deleted or duplicated causing the phenotype

Brackets, "[ ]", indicate "nondiseases," mainly genetic variations that lead to apparently abnormal laboratory test values (e.g., dysalbuminemic euthyroidal hyperthyroxinemia).

Braces, "{ }", indicate mutations that contribute to susceptibility to multifactorial disorders (e.g., diabetes, asthma) or to susceptibility to infection (e.g., malaria).

A question mark, "?", before the phenotype name indicates that the relationship between the phenotype and gene is provisional. More details about this relationship are provided in the comment field of the map and in the gene and phenotype OMIM entries.

* The column '% at least 20 x covered' shows the percentage of the coding sequence (+/-20 nucleotides of the flanking introns) of that gene that is on average at least 20 x covered. This according to the experience with exome sequencing in our laboratory and based on the current method.