

Variant: NM_005343.3(HRAS):c.34G>A (p.Gly12Ser)

CA122549 [↗](#)

12602 (ClinVar) [↗](#)

Gene: LRRC56 (HGNC:3265)

Condition: Costello syndrome (MONDO:0009026)

Inheritance Mode: Autosomal dominant inheritance

UUID: 51947641-2e77-498f-93d6-ca73b8e343de

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HGVS expressions

NM_005343.3:c.34G>A

NM_005343.3(HRAS):c.34G>A (p.Gly12Ser)

NC_000011.10:g.534289C>T

CM000673.2:g.534289C>T

NC_000011.9:g.534289C>T

CM000673.1:g.534289C>T

NC_000011.8:g.524289C>T

NG_007666.1:g.6262G>A

NM_001130442.1:c.34G>A

NM_005343.2:c.34G>A

NM_176795.3:c.34G>A

NM_001130442.2:c.34G>A

NM_001318054.1:c.-286G>A

NM_176795.4:c.34G>A

NM_005343.4:c.34G>A

ENST00000311189.7:c.34G>A

ENST00000397594.5:c.34G>A

ENST00000397596.6:c.34G>A

ENST00000417302.5:c.34G>A

ENST00000451590.5:c.34G>A

ENST00000468682.2:n.522G>A

ENST00000482021.1:n.157G>A

ENST00000493230.5:c.34G>A

Pathogenic

Met criteria codes **7**

PS4 PS3 PP3 PP2 PM2 PM1

PS2_Very Strong

Evidence Links **15**

Expert Panel

RASopathy VCEP [↗](#)

Criteria Specification Information **!**

[↗](#) Criteria Specifications for this VCEP

Evidence submitted by expert panel

RASopathy VCEP

The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404). The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863). In vitro functional studies provide some evidence that the p.Gly12Ser variant may impact protein function (PS3; PMID: 17412879). Computational prediction tools and conservation analysis suggest that the p.Gly12Ser variant may impact the protein (PP3). Furthermore, the variant is in a location that has been defined by the ClinGen RASopathy Expert Panel to be a mutational hotspot or domain of HRAS (PM1; PMID 29493581). This variant was absent from large population studies (PM2; ExAC, <http://exac.broadinstitute.org>). The variant is located in the HRAS gene, which has been defined by the ClinGen RASopathy Expert Panel as a gene with a low rate of benign missense variants and pathogenic missense variants are common (PP2; PMID: 29493581). In summary, this variant meets criteria to be classified as pathogenic for RASopathies in an autosomal dominant manner. Rasopathy-specific ACMG/AMP criteria applied (PMID:29493581): PS2_VeryStrong, PS4, PS3, PM1, PM2, PP2, PP3.

Met criteria codes

PS4



The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:19206176](#)

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:19371735](#)

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[PubMed:16329078](#)

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:16372351](#)

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:16969868](#)

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:16835863](#)

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:20660566](#)

The p.Gly12Ser variant has been identified in >5 independent occurrences in patients with clinical features of a RASopathy (PS4; PMID: 20660566, 16372351, 16329078, 16969868, 18039947, 19371735, 19206176, 16835863).

[PubMed:18039947](#)

PS3



In vitro functional studies provide some evidence that the p.Gly12Ser variant may impact protein function (PS3; PMID: 17412879).

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PP3



Computational prediction tools and conservation analysis suggest that the p.Gly12Ser variant may impact the protein (PP3).

PP2	✓	The variant is located in the HRAS gene, which has been defined by the ClinGen RASopathy Expert Panel as a gene with a low rate of benign missense variants and pathogenic missense variants are common (PP2; PMID: 29493581).
PM2	✓	This variant was absent from large population studies (PM2; ExAC, http://exac.broadinstitute.org).
PM1	✓	Furthermore, the variant is in a location that has been defined by the ClinGen RASopathy Expert Panel to be a mutational hotspot or domain of HRAS (PM1; PMID 29493581)
		Furthermore, the variant is in a location that has been defined by the ClinGen RASopathy Expert Panel to be a mutational hotspot or domain of HRAS (PM1; PMID 29493581) PubMed:29493581
PS2_Very Strong	✓	<p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404)</p> <hr/> <p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404) PubMed:17054105</p> <p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404) PubMed:16443854</p> <p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404) PubMed:19669404</p> <p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404) PubMed:16170316</p> <p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404) PubMed:16881968</p> <p>The c.34G>A (p.Gly12Ser) variant in HRAS has been reported as a confirmed de novo occurrence in at least 2 patients with clinical features of a RASopathy (PS2_VeryStrong; PMID 16170316, 16835863, 16443854, 16835863, 16881968, 17054105, 19669404) PubMed:16835863</p>

[Curation History](#)

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