

Variant: *NM_000546.6(TP53):c.375+5G>A*

Version: 1.0

[CA645589233](#) 

[481015 \(ClinVar\)](#) 

Gene: TP53 ([HGNC:7157](#))

Condition: Li-Fraumeni syndrome ([MONDO:0018875](#))

Inheritance Mode: Autosomal dominant inheritance

UUID: 9f4d2b30-c424-4a1b-b116-f50eb532e233

Approved on: 2025-12-05

Published on: 2025-12-05

HGVS expressions

NM_000546.6:c.375+5G>A

NM_000546.6(TP53):c.375+5G>A

NC_000017.11:g.7675989C>T

CM000679.2:g.7675989C>T

NC_000017.10:g.7579307C>T

CM000679.1:g.7579307C>T

NC_000017.9:g.7520032C>T

NG_017013.2:g.16562G>A

ENST00000503591.2:c.375+5G>A

ENST00000508793.6:c.375+5G>A

ENST00000509690.6:c.-21-753G>A

ENST00000514944.6:c.96+393G>A

ENST00000604348.6:c.375+5G>A

ENST00000269305.9:c.375+5G>A

ENST00000269305.8:c.375+5G>A

ENST00000359597.8:c.375+5G>A

ENST00000413465.6:c.375+5G>A

ENST00000420246.6:c.375+5G>A

ENST00000445888.6:c.375+5G>A

ENST00000455263.6:c.375+5G>A

ENST00000503591.1:c.375+5G>A

ENST00000505014.5:n.631+5G>A

ENST00000508793.5:c.375+5G>A

ENST00000509690.5:c.-21-753G>A

ENST00000514944.5:c.96+393G>A

ENST00000604348.5:c.375+5G>A

ENST00000610292.4:c.258+5G>A

ENST00000610538.4:c.258+5G>A

ENST00000615910.4:c.340+36G>A

ENST00000617185.4:c.375+5G>A

ENST00000619485.4:c.258+5G>A

ENST00000620739.4:c.258+5G>A

ENST00000622645.4:c.258+5G>A

ENST00000635293.1:c.258+5G>A

NM_000546.5:c.375+5G>A

NM_001126112.2:c.375+5G>A

NM_001126113.2:c.375+5G>A

NM_001126114.2:c.375+5G>A
NM_001126118.1:c.258+5G>A
NM_001276695.1:c.258+5G>A
NM_001276696.1:c.258+5G>A
NM_001276760.1:c.258+5G>A
NM_001276761.1:c.258+5G>A
NM_001276695.2:c.258+5G>A
NM_001276696.2:c.258+5G>A
NM_001276760.2:c.258+5G>A
NM_001276761.2:c.258+5G>A
NM_001126112.3:c.375+5G>A
NM_001126113.3:c.375+5G>A
NM_001126114.3:c.375+5G>A
NM_001126118.2:c.258+5G>A
NM_001276695.3:c.258+5G>A
NM_001276696.3:c.258+5G>A
NM_001276760.3:c.258+5G>A
NM_001276761.3:c.258+5G>A

Likely Pathogenic

Met criteria codes 5

PVS1_Strong PS4_Moderate
PP4_Moderate PM2_Supporting
BS2_Supporting

Not Met criteria codes 4

BA1 BS1 BP4 PP3

Evidence Links 0

Expert Panel

TP53 VCEP [↗](#)

Criteria Specification Information











- [↗ Criteria Specification: ClinGen TP53 Expert Panel Specifications to the ACMG/AMP Variant Interpretation Guidelines for TP53 Version 2.3.0](#)
- [↗ Criteria Specification Approval History](#)
- [↗ Criteria Specifications for this VCEP](#)

Evidence submitted by expert panel








TP53 VCEP

The c.375+5G>A intronic variant results from a G to A substitution 5 nucleotides after coding exon 3 in the TP53 gene. Splicing assay data provides experimental evidence that this variant results in RNA transcript with loss of function (PVS1_Strong (RNA); PMID:31092812). This variant has been reported in 1 family meeting Classic criteria and in 2 families meeting Revised Chompret Criteria. Based on this evidence, this variant scores 2 total points meeting the TP53 VCEP phenotype scoring criteria of 2-3.5 points. (PS4_Moderate; Internal contributors). This variant has been observed in 2-3 heterozygous unrelated females from the same data source with no personal history of cancer prior to age 60 years and no personal history of sarcoma at any age (BS2_Supporting; Internal lab contributor). At least two individuals with this variant were found to have a variant allele fraction of 5-25%, which is a significant predictor of variant pathogenicity (PP4_Moderate, PMID: 34906512, Internal lab contributors). This variant is absent from gnomAD v4.1.0 (PM2_Supporting). In summary, this variant meets the criteria to be classified as Likely Pathogenic for Li Fraumeni syndrome based on the ACMG/AMP criteria applied, as specified by the ClinGen TP53 VCEP: PVS1_Strong (RNA), PS4_Moderate, BS2_Supporting, PP4_Moderate, PM2_Supporting. (Bayesian Points: 8; VCEP specifications version 2.3)

Met criteria codes

PVS1_Strong			Splicing assay data provides experimental evidence that this variant results in RNA transcript with loss of function (PVS1_Strong (RNA); PMID:31092812).
PS4_Moderate			This variant has been reported in 1 family meeting Classic criteria and in 2 families meeting Revised Chompret Criteria. Based on this evidence, this variant scores 2 total points meeting the TP53 VCEP phenotype scoring criteria of 2-3.5 points. (PS4_Moderate; Internal contributors).
PP4_Moderate			At least two individuals with this variant were found to have a variant allele fraction of 5-25%, which is a significant predictor of variant pathogenicity (PP4_Moderate, PMID: 34906512, Internal lab contributors).
PM2_Supporting			This variant is absent from gnomAD v4.1.0 (PM2_Supporting).
BS2_Supporting			This variant has been observed in 2-3 heterozygous unrelated females from the same data source with no personal history of cancer prior to age 60 years and no personal history of sarcoma at any age (BS2_Supporting; Internal lab contributor).

Not Met criteria codes

BA1			No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
BS1			No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
BP4			No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
PP3			PP3 should not be used in combination with PVS1 The computational splicing predictor SpliceAI gives a score of 0.9, predicting that the variant has an impact on splicing (score threshold > 0.20)

Curation History [↗](#)

▼

▼

Showing 1 to 1 of 1 rows

--

The information on this website is not intended for direct diagnostic use or medical decision-making without review by a genetics professional. Individuals should not change their health behavior solely on the basis of information contained on this website. If you have questions about the information contained on this website, please see a health care professional.

[ClinGen Terms of Use.](#)
⌘ [Powered by BCM's Genboree.](#)