

## Variant: *NM\_000546.5(TP53):c.396G>C (p.Lys132Asn)*

Version: 1.1

[CA16603044](#) 

[376624 \(ClinVar\)](#) 

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

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

**Inheritance Mode:** Autosomal dominant inheritance

**UUID:** d817c4c8-1df0-4998-acec-3488a11fc4b0

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### *HGVS expressions*

#### **NM\_000546.5:c.396G>C**

NM\_000546.5(TP53):c.396G>C (p.Lys132Asn)

NC\_000017.11:g.7675216C>G

CM000679.2:g.7675216C>G

NC\_000017.10:g.7578534C>G

CM000679.1:g.7578534C>G

NC\_000017.9:g.7519259C>G

NG\_017013.2:g.17335G>C

ENST00000503591.2:c.396G>C

ENST00000508793.6:c.396G>C

ENST00000509690.6:c.-1G>C

ENST00000514944.6:c.117G>C

ENST00000604348.6:c.376-1G>C

ENST00000269305.9:c.396G>C

ENST00000269305.8:c.396G>C

ENST00000359597.8:c.396G>C

ENST00000413465.6:c.396G>C

ENST00000420246.6:c.396G>C

ENST00000445888.6:c.396G>C

ENST00000455263.6:c.396G>C

ENST00000504290.5:c.-1G>C

ENST00000504937.5:c.-1G>C

ENST00000505014.5:n.652G>C

ENST00000508793.5:c.396G>C

ENST00000509690.5:c.-1G>C

ENST00000510385.5:c.-1G>C

ENST00000514944.5:c.117G>C

ENST00000604348.5:c.376-1G>C

ENST00000610292.4:c.279G>C

ENST00000610538.4:c.279G>C

ENST00000610623.4:c.-82G>C

ENST00000615910.4:c.363G>C

ENST00000617185.4:c.396G>C

ENST00000618944.4:c.-82G>C

ENST00000619186.4:c.-82G>C

ENST00000619485.4:c.279G>C

ENST00000620739.4:c.279G>C

ENST00000622645.4:c.279G>C  
ENST00000635293.1:c.279G>C  
NM\_001126112.2:c.396G>C  
NM\_001126113.2:c.396G>C  
NM\_001126114.2:c.396G>C  
NM\_001126115.1:c.-1G>C  
NM\_001126116.1:c.-1G>C  
NM\_001126117.1:c.-1G>C  
NM\_001126118.1:c.279G>C  
NM\_001276695.1:c.279G>C  
NM\_001276696.1:c.279G>C  
NM\_001276697.1:c.-82G>C  
NM\_001276698.1:c.-82G>C  
NM\_001276699.1:c.-82G>C  
NM\_001276760.1:c.279G>C  
NM\_001276761.1:c.279G>C  
NM\_001276695.2:c.279G>C  
NM\_001276696.2:c.279G>C  
NM\_001276697.2:c.-82G>C  
NM\_001276698.2:c.-82G>C  
NM\_001276699.2:c.-82G>C  
NM\_001276760.2:c.279G>C  
NM\_001276761.2:c.279G>C  
NM\_000546.6:c.396G>C  
NM\_001126112.3:c.396G>C  
NM\_001126113.3:c.396G>C  
NM\_001126114.3:c.396G>C  
NM\_001126115.2:c.-1G>C  
NM\_001126116.2:c.-1G>C  
NM\_001126117.2:c.-1G>C  
NM\_001126118.2:c.279G>C  
NM\_001276695.3:c.279G>C  
NM\_001276696.3:c.279G>C  
NM\_001276697.3:c.-82G>C  
NM\_001276698.3:c.-82G>C  
NM\_001276699.3:c.-82G>C  
NM\_001276760.3:c.279G>C  
NM\_001276761.3:c.279G>C

Likely Pathogenic

Met criteria codes 4

PS3 PM1 PP3\_Moderate  
PM2\_Supporting

Not Met criteria codes 13

PS1 PS2 PS4 PP1 PM6  
PM5 BA1 BS2 BS1 BS4  
BS3 BP4 BP2

Evidence Links 4

Expert Panel

TP53 VCEP [↗](#)

Criteria Specification Information **!**

[↗](#) Criteria Specifications for this VCEP

**TP53 VCEP**

Transactivation assays show a low functioning allele according to Kato, et al. and there is evidence of a dominant negative effect and loss of function according to Giacomelli, et al. (PS3; PMID: 12826609, 30224644). This variant has a BayesDel score > 0.16 and Align GVGD (Zebrafish) is Class 65 (PP3\_Moderate). This variant has >10 observations as a somatic hotspot variant in tumors (PM1; cancerhotspots.org v(2)). This variant is absent in the gnomAD cohort (PM2\_Supporting; <http://gnomad.broadinstitute.org>). In summary, TP53 c.396G>C (p.Lys132Asn) meets criteria to be classified as likely pathogenic for Li-Fraumeni syndrome. ACMG/AMP criteria applied, as specified by the TP53 Variant Curation Expert Panel: PS3, PP3\_Moderate, PM1, PM2\_Supporting.

**Met criteria codes**

<b>PS3</b>	✓	Experimental studies show this variant to be non-functional (Kato 2003) and to demonstrate both dominant negative effect (DNE) and loss of function (LOF) (Dearth 2007, Giacomelli 2018 and Kotler 2018).  Evidence for LOF <a href="#">PubMed:29979965</a> Evidence of LOF and DNE <a href="#">PubMed:16861262</a> Shows DNE and LOF <a href="#">PubMed:30224644</a> Shows variant to be non-functional. <a href="#">PubMed:12826609</a>
<b>PM1</b>	✓	Not in hot spot codon but seen in 30 tumor samples on cancerhotspots.org.
<b>PP3_Moderate</b>	✓	aGVGD class C65 and BayesDel >0.16. Strength modified as described by VCEP.
<b>PM2_Supporting</b>	✓	Absent from population databases.

**Not Met criteria codes**

<b>PS1</b>	✗	c.396G>T (p.Lys132Asn) has also been seen (ClinVar ID: 634773) but has not been evaluated by TP53 VCEP and is currently designated a VUS by Invitae
<b>PS2</b>	✗	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PS4</b>	✗	No published case reports of germline variant in the literature. Identified at least once in an unpublished case of a young female with rhabdomyosarcoma (parents not tested) not meeting classic LFS or Chompret criteria.
<b>PP1</b>	✗	No known segregation information.
<b>PM6</b>	✗	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>PM5</b>	✗	NM_000546.5(TP53):c.395A>T (p.Lys132Met) ClinVar ID: 376629 (Not evaluated by VCEP; VUS by Invitae) NM_000546.5(TP53):c.395A>C (p.Lys132Thr) ClinVar ID: 376627 (Not evaluated by VCEP; LP by somatic entries)

only) NM\_000546.5(TP53):c.395A>G (p.Lys132Arg) ClinVar ID: 376625 (Not evaluated by VCEP; VUS by Invitae)  
NM\_000546.5(TP53):c.394A>C (p.Lys132Gln) ClinVar ID: 376628 (Not evaluated by VCEP; LP by somatic entries  
only) NM\_000546.5(TP53):c.394A>G (p.Lys132Glu) ClinVar ID; 376626 (Not evaluated by VCEP; conflicting VUS  
(Invitae)/ LP (Ambry) interpretations

<b>BA1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BS2</b>	✘	Not seen in FLOSSIES database or in individuals age 60+ in the literature.
<b>BS1</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BS4</b>	✘	No known segregation information.
<b>BS3</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP4</b>	✘	No code specific comments provided, please refer to the summary above or general recommendations provided in the guideline
<b>BP2</b>	✘	No reported incidences.

#### Curation History [↗](#)

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