# Variant Curation Interface

## Help Documentation - November 2016

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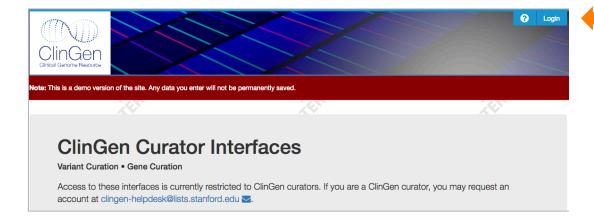
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#### **GENERAL NAVIGATION**

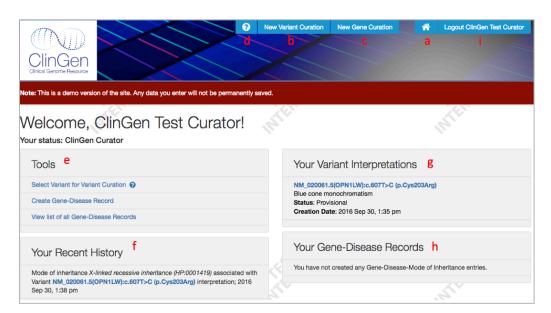
## 1. Logging in to the interfaces

Go to <u>curation.clinicalgenome.org</u> and click the "Login" button. If you are registered but have not yet created a Persona account, you will be prompted to do so.



#### 2. Dashboard view

- a. Dashboard home available from all pages
- b. Navigating to "Select Variant for Variant Curation" available from all pages
- c. Navigating to "Create Gene-Disease Record" available from all pages
- d. Navigating to this Help documentation online available from all pages
- e. Tools useful links
- f. View of your recent history
- g. View of your current Variant Interpretation curation records
- h. View of your current Gene-Disease curation records
- i. Logout available from all pages



#### SELECTING A VARIANT FOR VARIANT CURATION

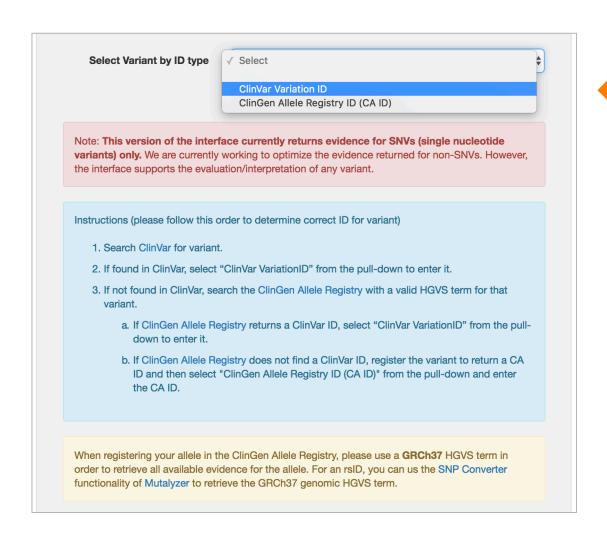
#### 1. Begin variant curation

Select "Select Variant for Variant Curation" under the "Tools" Section

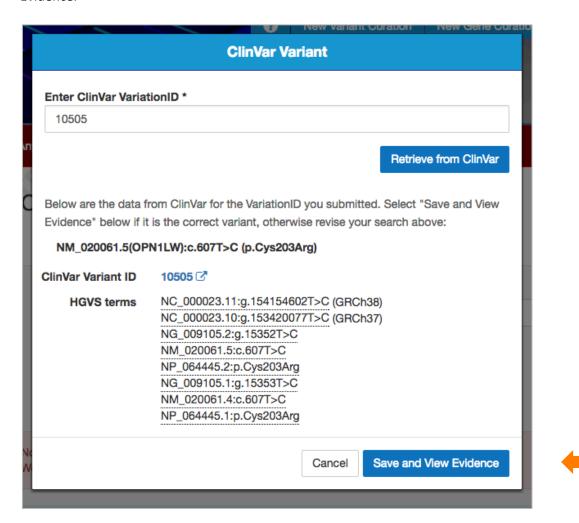


#### 2. Select variant ID

Read instructions carefully on how to select a variant, and then choose whether you want to enter a ClinVar variant using a ClinVar Variation ID or a novel variant that you have registered with Baylor's ClinGen Allele Registry. Select "Add ClinVar ID."



Type in the variant ID (ClinVar VariationID or CA ID, depending on selection); click "Retrieve from ClinVar" (or "Retrieve from ClinGen Allele Registry, if you have entered a CA ID). Once you are convinced the ID you have entered represents the correct variant, select "Save and View Evidence."

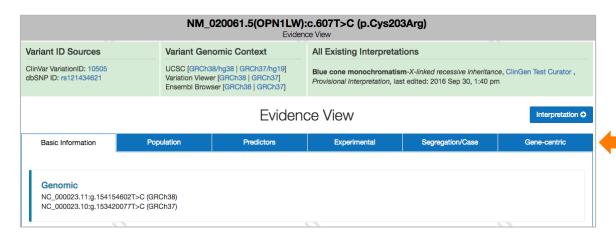


3. You will now be in the "Evidence View" for your selected variant (see next section)

#### GENERAL ORGANIZATION OF INFORMATION AND EVIDENCE

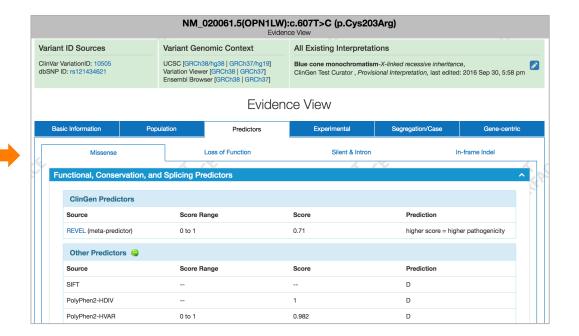
#### 1. Overall tab organization

Once you are in the "Evidence View," you will see the information and evidence for the selected variant is organized into various tabs. These include: **Basic Information**, **Population**, **Predictors**, **Experimental**, **Segregation/Case**, and **Gene-centric**. Click between the tabs to view different types of information and evidence.



#### 2. Predictors tab: sub-tab organization by variant type

The Predictors tab contains sub-tabs such that you can look at the appropriate evidence and evaluate the appropriate criteria according the to the variant type (Missense, Loss of Function, Silent & Intron, and In-frame indel).



#### **OVERALL WORKFLOW**

Once you have selected a variant, there are currently 3 major modes:

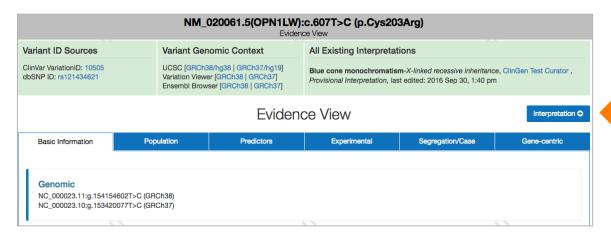
- 1. Evidence View (described above)
- 2. Interpretation
- 3. Interpretation with Disease Association

#### 1. Evidence View (see above)

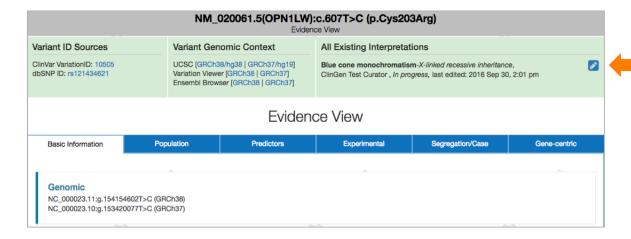
In this mode, you can view all the evidence associated with a variant, clicking between tabs. The ACMG criteria do not appear in this mode.

## 2. Interpretation Mode

To begin an Interpretation in which you can evaluate the evidence according to the ACMG criteria, select "Interpretation +" (see arrow below).



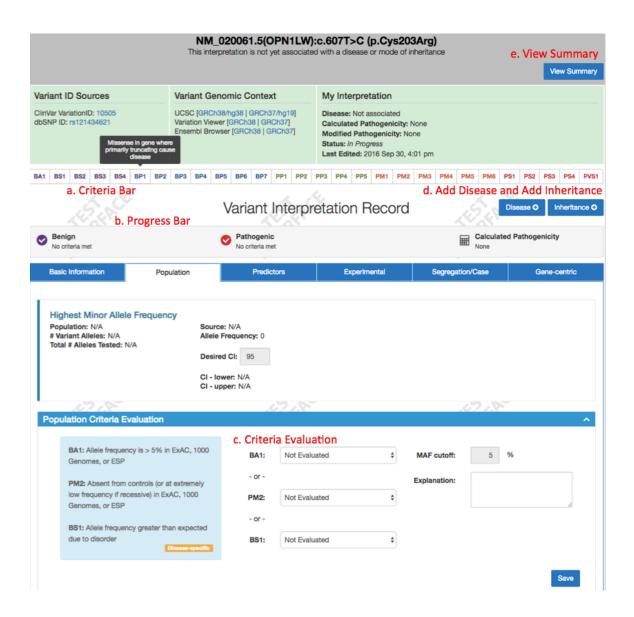
Note: if you had previously begun an Interpretation for the variant, you can continue by selecting the pencil icon (see arrow below) next to your previous Interpretation in the 'All Existing Interpretations' table in the header.



Once you click on "Interpretation +" or the pencil icon if you have previously begun an Interpretation, you will be in Interpretation mode.

Once in Interpretation mode, the following will appear:

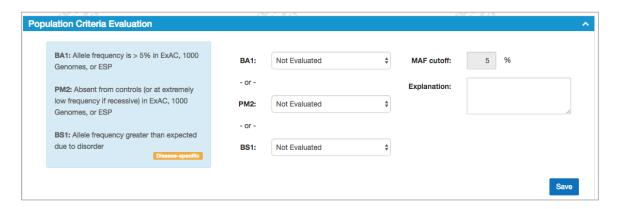
- a. Criteria bar scroll over individual criteria codes to see a description for each criteria
- b. Interpretation Progress bar that indicates the strength of criteria met and the calculated pathogenicity
- c. The criteria evaluations where you can indicate whether an individual criterion is "Met" (see next section, "Evaluating Criteria")
- d. "Disease +" and "Inheritance +" buttons for associating a Disease and Mode of Inheritance with the variant
- e. "View Summary" button to view a Summary of all the evaluations



#### **EVALUATING CRITERIA**

## 1. Criteria placement & organization

Criteria are grouped according to the evidence required for their evaluation and on the appropriate tab page.



#### 2. Criteria evaluation choices:

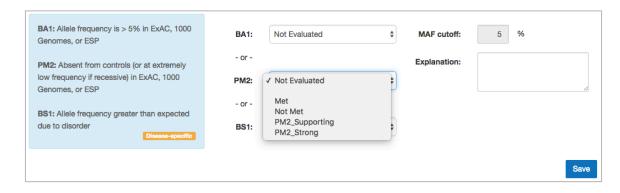
The pull-downs allow the following criteria evaluation choices:

- Not Evaluated: The default state of an Evaluation is "Not Evaluated"
- **Met**: If the evidence supports a positive evaluation of a criterion at its original strength (e.g. PM2 = moderate strength in the pathogenic range), the curator should select "Met"
- Not Met: If the evidence does not support a positive evaluation of the criterion, the curators should select "Not Met."
- \_Strong, \_Moderate, \_Supporting, \_Very strong, \_Stand-alone: The strength of evaluation for a criterion can be adjusted by selecting one of the above representations of the criterion (e.g. PM2\_Supporting would be PM2 evaluated at the "Supporting" level rather than its inherent level, Moderate. Note: Benign criteria allow \_Supporting, \_Strong, and \_Stand-alone adjustments. Pathogenic criteria allow \_Supporting, \_Moderate, and \_Strong adjustments (except for PS2, which also allows \_Very strong).

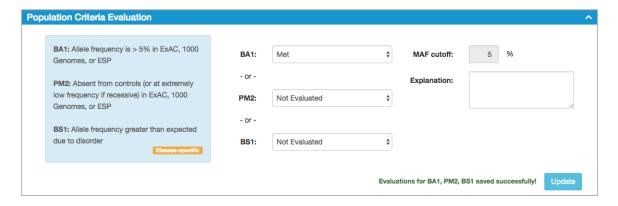
Benign pull-down choices – example:

BA1: Allele frequency is > 5% in ExAC, 1000 Genomes, or ESP PM2: Absent from controls (or at extremely	<b>BA1:</b> - or -	✓ Not Evaluated  Met Not Met		MAF cutoff:	5 %
low frequency if recessive) in ExAC, 1000 Genomes, or ESP  BS1: Allele frequency greater than expected	<b>PM2:</b> - or -	BA1_Supporting BA1_Strong			le le
due to disorder  Disease-apocific	BS1:	Not Evaluated	<b>*</b>		
					Save

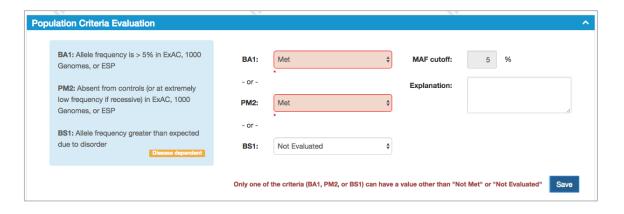
#### Pathogenic pull-down choices – example:



- 3. Steps for evaluating a criterion or criteria:
  - Examine evidence associated with criteria being evaluated
  - Select an evaluation for all criteria related to the evidence from the pull-down
  - Select Save
  - Note that the button will now change from "Save" to "Update" if you would like to change an evaluation, change it and be sure to click "Update" after. The update button appears as a visual clue that the criterion/criteria for that section have already been evaluated.



Note: When 2 (or more) criteria are opposites or cannot otherwise be "Met" at the same time, the interface will not allow "Met" to be selected for more than one of the criteria.



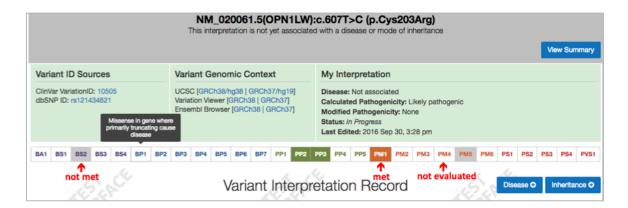
#### 4. Additional note:

PS4 and PM2 may not both have positive evaluations – for instance, you will see this error if you select "Met" for PS2 (Population tab) and PM4 (Segregation/Case tab)



## **CRITERIA BAR**

As you Save your evaluations, you will notice that the Criteria bar will indicate which criteria have been "Met" (solid color background with white criteria code), "Not Met" (grey background with colored criteria code), or remain "Not Evaluated" (white background with colored criteria code).



#### CALCULATED PATHOGENICITY

As you Save your evaluation, you will notice the Progress bar will indicate the number of criteria met according to the strength of the evaluation and whether they are Benign or Pathogenic. Additionally, it will automatically calculate the Pathogenicity each time you Save or update an evaluation:

For instance, if PM2, PVS1 and PM1 are all met, the Progress bar would appear as follows immediately upon saving the last evaluation:

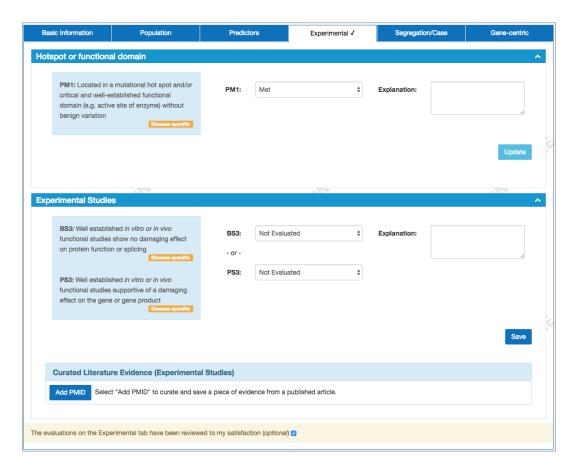


The Calculated Pathogenicity outcomes are as follows:

- 1. Benign
- 2. Likely benign
- 3. Pathogenic
- 4. Likely Pathogenic
- 5. Uncertain significance insignificant evidence: there is not enough evidence to meet any of the above (1-4); there can be conflicting evidence
- 6. Uncertain significance conflicting evidence: there is enough evidence to meet the above (1-4), but some of it is conflicting

#### **CURATION CHECKBOXES ON TAB PAGES**

If you have evaluated all the evidence on a particular tab page to your satisfaction, you can click the checkbox at the bottom of the tab page (for the Predictor tab, this means you have evaluated any relevant sub-tabs to your satisfaction) and a check will appear on the tab for your reference:



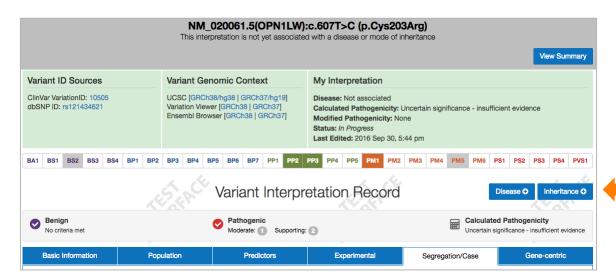
This checkbox will remain regardless of which tab you are on in the interface and can be unchecked as well:



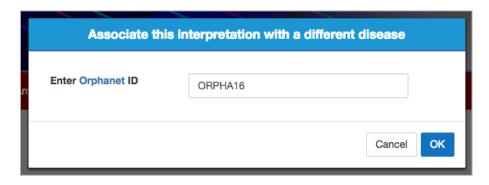
## ADDING DISEASE & MODE OF INHERITANCE

#### 1. Interpretation with Disease Association

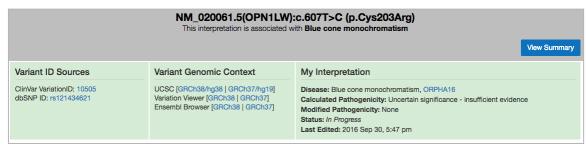
When you are ready to evaluate disease-specific criteria for your Interpretation, you can click the "Disease +" button to add the Orphanet ID for the disease. Be sure you've saved your evaluations before clicking this button.



After clicking the "Associate with Disease" button, you will see an entry box pop up for entering an Orphanet ID. Enter the desired Orphanet ID and click OK.

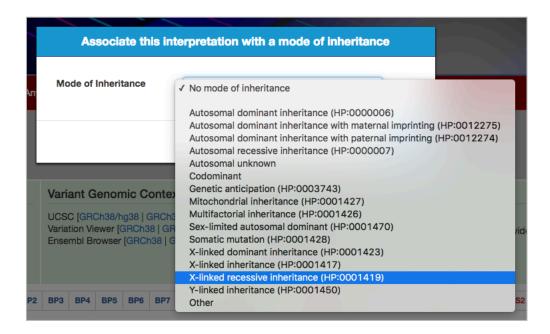


Now you will see the disease term under the variant name in the gray title area and in the green "My Interpretation' section:



#### 2. Interpretation with Mode of Inheritance

You can add the mode of inheritance by clicking the "Inheritance +" button and selecting from the pull-down menu:

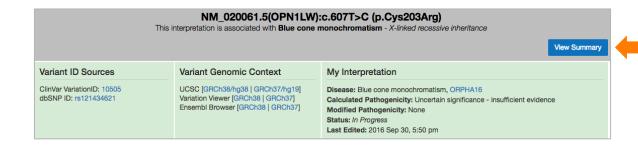


Now you will see the mode of inheritance term under the variant name in the gray title area:



## **EVALUATION SUMMARY/PROVISIONAL INTERPRETATION**

If you have evaluated all the evidence to your satisfaction, you can click the "View Summary" button in the grey header to view a Summary of all your evaluations:

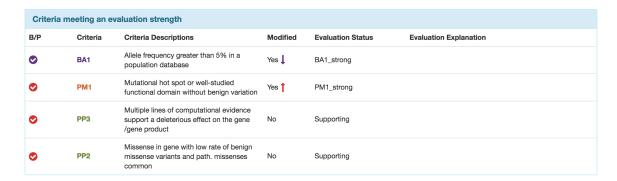


Once in the Summary View, the "View Summary" button will change to a "Return to Interpretation" button. This can be used at any time to return to the "Evidence View".



At the bottom of the Summary page, all the ACMG criteria are split into three separate tables according their evaluation status:

1. **Criteria meeting an evaluation strength:** for criteria with evidence that supports a positive evaluation of the criteria



2. **Criteria evaluated as "Not met":** for criteria with evidence that does not support a positive evaluation of the criterion

Criteria evaluated as "Not met"					
B/P	Criteria	Criteria Descriptions	Modified	<b>Evaluation Status</b>	Evaluation Explanation
8	BS2	Observation in controls inconsistent with disease penetrance	N/A	Not Met	
8	PM5	Novel missense change at an amino acid residue where a different pathogenic missense change has been seen before	N/A	Not Met	
		0.5		0.0	

#### 3. Criteria "Not yet evaluated": for criteria which have yet to be evaluated

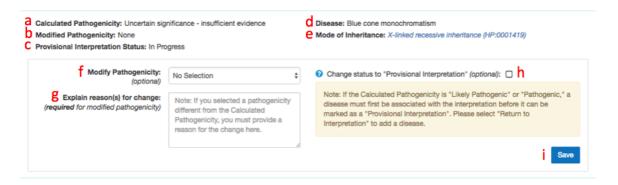
Criteria "Not yet evaluated"					
В/Р	Criteria	Criteria Descriptions	Modified	Evaluation Status	Evaluation Explanation
0	PVS1	Predicted null variant in a gene where LOF is a known mechanism of disease	N/A	Not Evaluated	
0	BS1	MAF is too high for disorder	N/A	Not Evaluated	
0	PS1	Same amino acid change as an established pathogenic variant	N/A	Not Evaluated	
0	BS3	Well-established functional studies show no deleterious effect	N/A	Not Evaluated	
0	BS4	Non-segregation with disease	N/A	Not Evaluated	
0	PS2	De novo (paternity and maternity confirmed)	N/A	Not Evaluated	
0	PS3	Well-established functional studies show a deleterious effect	N/A	Not Evaluated	
0	PS4	Prevalence in affecteds statistically increased over controls	N/A	Not Evaluated	

These tables summarize the evaluations made for each criteria into the following fields:

- **B/P**: The color of these icons, red for pathogenic and purple for benign, indicates whether each criteria is pathogenic or benign. "Met" criteria have ticks in a circle, "Not met" have crosses in a circle, and "Not evaluated" criteria have an empty circle.
- **Criteria**: All of the criteria are listed using their ACMG criteria codes, and their color indicates their pathogenicity on a scale from 'purple' benign to 'red' pathogenic.
- Criteria Descriptions: Short descriptions to explain the ACMG criteria
- **Modified**: 'yes' or 'no' indicates whether or not a criterion has been modified. If it has, then 'purple down arrows' indicate a benign modification, and 'red up arrows' indicate a pathogenic modification.
- Evaluation Status: Criteria are shown as "Met", "Not Met" and "Not evaluated". Additionally, "Met" indicates any modifications: \_Strong, \_Moderate, \_Supporting, \_Very strong, \_Stand-alone.
- **Evaluation Explanation**: This shows the explanation provided by the curator when evaluating each criteria.

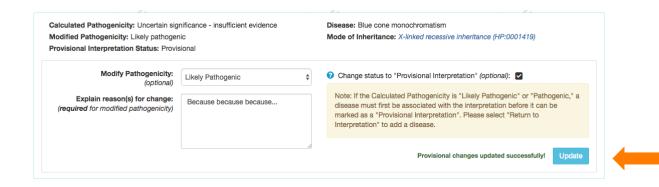
Above these Summary tables is an overview of the interpretation so far, including the pathogenicity calculations:

- a. Calculated Pathogenicity the pathogenicity calculated based on all the evaluations saved so far
- b. Modified Pathogenicity the pathogenicity selected by the curator
- c. Provisional Interpretation Status indicates the current status of the Interpretation
- d. Disease shows a disease where one has been associated with the variant
- e. Mode of inheritance shows inheritance type where one has been associated with the variant
- f. Modify Pathogenicity pull-down which allows curator to select the pathogenicity
- g. Explain reason(s) for change allows curators to add free text to explain why they have selected an alternative pathogenicity to the one calculated
- h. Change status to "Provisional Interpretation" this tick box allows curators to change the status of their Interpretation to "Provisional"
- i. Save must be clicked to save a modification to the pathogenicity and/or a change in the status of the Interpretation



If the curator decides to select an alternative pathogenicity to the one calculated, they can do so by selecting an alternative option from the "Modify Pathogenicity" pull-down (f), however they must provide a reason for the change in the free text box (g) provided. The 'Modified Pathogenicity' (b) will only change to the new modified pathogenicity when the Save' button (i) is clicked. Likewise once a curator feels they have fully evaluated the variant they can select the tick box to change the Interpretation status (c) to "Provisional", but this will only be saved when the Save' button (i) is clicked.

Upon saving a modified pathogenicity and/or change in the status of an interpretation the 'Save' button will change to an 'Update' button and an adjacent "Provisional changes updated successfully!" text will appear.



Feedback and Comments?
Please email us at: clingen-helpdesk@lists.stanford.edu