

Resource Summary Report

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IFOM ETS Cogentech Cancer Genetic Test Laboratory Laboratory Core Facility

RRID:SCR_026940

Type: Tool

Proper Citation

IFOM ETS Cogentech Cancer Genetic Test Laboratory Laboratory Core Facility
(RRID:SCR_026940)

Resource Information

URL: <https://www.cogentech.it/diagnostic-services-overview.php>

Proper Citation: IFOM ETS Cogentech Cancer Genetic Test Laboratory Laboratory Core Facility (RRID:SCR_026940)

Description: Cogentech's CGT lab is offering its diagnostic services for Hereditary Tumors (Cancer Risk) and for Personalized Medicine (Therapy) to clinicians, laboratories and hospitals.

Synonyms: , Cogentech Cancer Genetic Test Laboratory, Cogentech CGT lab (Cancer Genetic Test Laboratory)

Resource Type: access service resource, core facility, service resource

Keywords: ABRF, diagnostic services, Hereditary Tumors, Personalized Medicine,

Resource Name: IFOM ETS Cogentech Cancer Genetic Test Laboratory Laboratory Core Facility

Resource ID: SCR_026940

Alternate IDs: ABRF_3220

Alternate URLs: <https://coremarketplace.org/?FacilityID=3220&citation=1>

Record Creation Time: 20250514T061509+0000

Record Last Update: 20260905T133535+0000

Ratings and Alerts

No rating or validation information has been found for IFOM ETS Cogentech Cancer Genetic Test Laboratory Laboratory Core Facility.

No alerts have been found for IFOM ETS Cogentech Cancer Genetic Test Laboratory Laboratory Core Facility.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 13 mentions in open access literature.

Listed below are recent publications. The full list is available at [Kravitz](#) .

Urso EDL, et al. (2021) Definition and management of colorectal polyposis not associated with APC/MUTYH germline pathogenic variants: AIFEG consensus statement. Digestive and liver disease : official journal of the Italian Society of Gastroenterology and the Italian Association for the Study of the Liver, 53(4), 409.

Azzollini J, et al. (2020) Pre- and Post-Zygotic TP53 De Novo Mutations in SHH-Medulloblastoma. Cancers, 12(9).

Colombo M, et al. (2018) The BRCA2 c.68-7T > A variant is not pathogenic: A model for clinical calibration of spliceogenicity. Human mutation, 39(5), 729.

Caleca L, et al. (2018) Two Missense Variants Detected in Breast Cancer Probands Preventing BRCA2-PALB2 Protein Interaction. Frontiers in oncology, 8, 480.

Kuchenbaecker KB, et al. (2017) Evaluation of Polygenic Risk Scores for Breast and Ovarian Cancer Risk Prediction in BRCA1 and BRCA2 Mutation Carriers. Journal of the National Cancer Institute, 109(7).

, et al. (2016) No clinical utility of KRAS variant rs61764370 for ovarian or breast cancer. Gynecologic oncology, 141(2), 386.

Berrino J, et al. (2015) Estimate of the penetrance of BRCA mutation and the COS software for the assessment of BRCA mutation probability. Familial cancer, 14(1), 117.

Blein S, et al. (2015) An original phylogenetic approach identified mitochondrial haplogroup T1a1 as inversely associated with breast cancer risk in BRCA2 mutation carriers. Breast cancer research : BCR, 17(1), 61.

Orr N, et al. (2015) Fine-mapping identifies two additional breast cancer susceptibility loci at 9q31.2. Human molecular genetics, 24(10), 2966.

Mavaddat N, et al. (2015) Prediction of breast cancer risk based on profiling with common genetic variants. Journal of the National Cancer Institute, 107(5).

Rebbeck TR, et al. (2015) Association of type and location of BRCA1 and BRCA2 mutations with risk of breast and ovarian cancer. JAMA, 313(13), 1347.

Kabisch M, et al. (2015) Inherited variants in the inner centromere protein (INCENP) gene of the chromosomal passenger complex contribute to the susceptibility of ER-negative breast cancer. Carcinogenesis, 36(2), 256.

Peterlongo P, et al. (2015) Candidate genetic modifiers for breast and ovarian cancer risk in BRCA1 and BRCA2 mutation carriers. Cancer epidemiology, biomarkers & prevention : a publication of the American Association for Cancer Research, cosponsored by the American Society of Preventive Oncology, 24(1), 308.