# UNDERSTAND YOUR GENOMEシンポジウム登録手順

参加登録: http://www.mediproduce.com/17jaam/understand.html

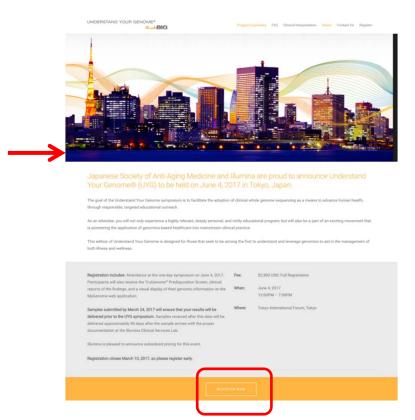
上記リンクから、ページ最下段の「参加申し込み・本シンポジウムの詳細」ボタンをクリックしてください。 クリック後、UNDERSTAND YOUR GENOMEページへ遷移します。(左図から右図へ) 登録はページ中ほどにある「REGISTR NOW」ボタンをクリックして登録にお進みください。

※ブラウザによってはブラウザのBackボタンで戻ると登録したデータが保存されていない場合がございますのでご注意ください。

# 注意事項 スケジュール 2017年2月~3月 血液採取キット送付 2017年3月10日(金) 参加登録締め切り 2017年3月24日(金) 血液サンブル送付必着期限 2017年4月~5月 イルミナ社にて全ゲノム解析 2017年6月4日(日) セミナー開催(12時15分~19時00分(予定))

- 本シンポジウムは、第17回総会参加者のみ受講が可能です。
- 定員制のシンポジウムです。満席になり次第申し込みを締め切りますので、お早目にご登録ください。
- 参加申し込み受領後、血液採取キットがイルミナ社より送付されます。血液サンブル送付 必着期限は2017年3月24日(金)です。
- 本シンポジウムに関するお問い合わせは、イルミナ社へ直接ご連絡ください。学会事務局、ならびに、総会事務局ではお応えしかねますのでご了承ください。

参加申込み・本シンボジウムの詳細





# 1. 登録画面



Fill out the information below, then click Next to proceed.

Fee:

Whole-Genome Sequencing Registration: \$2,900

## **Invitee Information**



Already Registered?

<入力例>
①First Name: Taro
②Last Name: Tanaka
③Email Address: tanaka@uyg.com
④Registration Type: Whale Genome Squencingを選択上記入力後、「NEXT」ボタンをクリックしてください。





# 2. ご連絡先入力画面

Fill out the information below, then click Next to proceed.

First Name: Taro

## **Contact Information**

Last Name: Tanaka
Email Address: tanaka@uyg.com

Degrees/Credentials:

\*Organization/Institution⑤Tanaka Co.

\*Title⑥Manager

\*Mobile Phone⑦080-1111-2222

Emergency Contact Name:
Emergency Contact Phone:

\*Country⑧ Japan

\*Address:

\*Country⑧ Japan

\*Address (Please no PO Boxes)⑨XXXBldg. 2F

Shiba 1-1-1

\*City⑪Minato-ku

State/Province௰ Tokyo

\*ZIP/Postal Code௰ 100-1111

\*の付くフィールドは入力必須となります。
⑤Organization/Institution: 所属機関名
⑥Title: 役職
⑦Mobile Phone: 携帯番号
⑧Country: 国
⑨Address(Please no PO Boxes): 町、番地、ビル名(私書箱以外)
⑩City: 市町村名
⑪State / Province: 都道府県
⑫ZIP / Postal Code: 郵便番号

左図は記入例となります。
入力後、「NEXT」ボタンをクリックしてください。
(次ページへ)





# 3. ご参加にあたっての質問

## **Registration Questions**

			_
1	*Please specify your level of education.	•	全てのフィールドが入力必須となります。
2	*What term best describes your organization/institution?	•	13の質問にお答えください。 回答はプルダウンメニューから選択してください。
3	*What best describes your role/position within your institution/organization?	•	(上部より)
4	*Where did you hear about Understand Your Genome?	<b>T</b>	<ul><li>①教育レベル</li><li>②ご所属機関のタイプ</li></ul>
<b>⑤</b>	*How would you rate your understanding of genomics?	•	<b>3</b> 役職
<b>6</b>	*Have you ever been sequenced/tested by any other method?	•	<ul><li>④どこでUYGシンポジウムをお知りになりましたか?</li><li>⑤ゲノムに関する知識レベル</li><li>⑥他の方法でゲノム解析を受けたことがありますか?</li></ul>
7	*What are you looking to gain from your UYG experience (select all that apply)? (please hold the crtl button to select multiple answers)	Experience my genome to develop better tools/resources for managing genomics information   Improved understanding of genomics and how it affects me Improved understanding of the clinical utility of genomics Improved understanding of how genomics is being applied to improve patient care Meet other genetic, scientific, medical, and/or industry experts Understand genomics market Understanding reimbursement and payor environment Other	⑦このシンポジウムから何を期待しますか? (複数回答はctrlキーを押しながら複数選択してください) ⑧組織の中での決定権限レベルを教えてください。 ⑨専門知識を持つ方がいらっしゃいますか? ⑩連絡先を他の出席者と共有してもよろしいでしょうか?
8	*What level of decision-making authority do you have on setting goals/objectives for genomics at your institution?	•	①UYGコミュニティーのメール配信を希望しますか? ②食事に関し、特別なリクエストはありますか? ③抗加齢学会へ出席していましたか?
9	*Do you have professional associates that may be interested in attending?	<b>v</b>	全て回答いただきましたら「NEXT」ボタンをクリックして ください。
10	*Can we share your contact information with the other attendees?	•	※前頁へ戻る場合は「PREVIOUS」ボタンをクリックしてください。 (次ページへ)
1	*Do you want to receive future emails regarding the UYG Community?	•	
12	*Do you have any special dietary needs?	•	
<b>13</b> )	*Are you attending the Japanese Society of Anti-Aging Medicine	T	



Conference?

# 4. 同意書

Answer the question below and then click Next.

#### Genome Upload Consent Form

#### Your Genome Online

As part of your participation in the Understand Your Genome event, your genome can be made available to you through the Understand Your Genome Community website. This website enables you and other UYG attendees to learn about genomics, explore your genome anytime and anywhere online, and discuss important topics with fellow UYG alumni. The Understand Your Genome Community website is not part of nor operated by the Illumina Clinical Services Laboratory that performed your sequencing and interpretation.

#### Security of Your Genome

The Understand Your Genome Community website is hosted on the Amazon AWS service. We chose to host the website on AWS because of it's wide variety of industry-accepted security standards. More information can be found at

http://aws.amazon.com/security. In addition to the security gained through use of the AWS service, we have deployed a number of security measures to protect your genomic data. Using a secure connection, your de-identified genome is uploaded directly to our secure database hosted on AWS. Access is controlled through the use of a Genome Record Name and Genome Activation key. User identity is managed through OpenID Connect using OAuth2.0 authentication and stored in an encrypted database separate from your genome.

Although we have taken measures to secure your genomic data, no system is 100% secure.

#### **Understand Your Genome Community Website Features**

The Understand Your Genome Community website enables you to learn about genomics, discuss important topics with colleagues, and explore your genome with the MyGenome web app. You may also explore other genomes if you have obtained their permission and activation codes. The MyGenome web app includes an interpretation browser and a chromosome browser which can be used to explore how your genetic variants may affect your health.

Features which may be added to the website include comparing your de-identified data to UYG population statistics, sharing your Genome with others, enabling you to donate your genome to research, and allowing you to access your genome through 3<sup>rd</sup> party applications.

#### Genome Uploading Process

In order to facilitate your access to the UYG Community website during the Understand Your Genome event, Illumina will upload your genome to the website prior to the event.

#### Site Registration Process

To access the UYG Community website, you will need to register by entering your email address and creating a password. Once registered, you will need to login with your username and password every time you enter the site. You will be automatically logged off after 10 minutes of inactivity. You may reset your password at any time if lost or forgotte.

#### **Genome Activation Process**

After you have registered for the UYG Community website, you can activate your Genome through the UYG Community portal home page using your Genome Record Name and your Genome Activation Key. Your Genome Record Name is included in your clinical report. You will receive your Genome Activation Key separately.

#### Genome Removal Process

You can remove your genome from the UYG Community website by using the "Remove Genome" feature on the home page.

#### Authorization to Upload Your Genome to the Understand Your Genome Community Website

I agree that I have read the above, understand that the Understand Your Genome Community Website is not a part of or operated by the Illumina Clinical Services Laboratory (ICSL) that performed my sequencing and interpretation, and authorize. Illumina to upload my gVCF file from ICSL to the Understand Your Genome Community website.

\*I understand and give my consent to the authorization above.



承認をお願いいたします。 前頁へ戻る場合は、「PREVIOUS」ボタンをクリックしてください。

間違いがなければ、「NEXT」ボタンをクリックしてください。 前頁へ戻る場合は「PREVIOUS」ボタンをクリックしてください。

# 5. 登録情報確認

Your registration is almost complete. Please review your registration below and if everything is correct, click Next.

#### Registration Summary

CANCEL NEXT ► Taro Tanaka (Edit) Email Address: Degrees/Credentials: tanaka@uyg.com Organization/Institution: Tanaka Co. Manager Mobile Phone: **Emergency Contact Name:** 080-1111-2222 **Emergency Contact Phone:** Address: XXXBIda, 2F Shiba 1-1-1 Minato-ku, Tokyo 100-1111

#### Questions (Edit)

#### REGISTRANT INFORMATION

Please specify your level of education. Master's degree

What term best describes your organization/institution? Academic Institution

What best describes your role/position within your institution/organization? Sales/Marketing

Where did you hear about Understand Your Genome? Understandyourgenome.com

How would you rate your understanding of genomics? Good – I can comprehend genetics/genomics but have limited knowledge on common diseases

Have you ever been sequenced/tested by any other method? No

What are you looking to gain from your UYG experience (select all that apply)? (please hold the crtl button to select multiple answers) Experience my genome to develop better tools/resources for managing genomics information, Understand genomics market

What level of decision-making authority do you have on setting goals/objectives for genomics at your institution? No input; here to learn

Do you have professional associates that may be interested in attending? No

Can we share your contact information with the other attendees? No

Do you want to receive future emails regarding the UYG Community?  ${\tt No}$ 

Do you have any special dietary needs? No

Are you attending the Japanese Society of Anti-Aging Medicine Conference? No

## WHOLE GENOME SEQUENCING

I understand and give my consent to the authorization above. Yes

#### Registration Type (Edit)

#### PROGRAM TRACK

Whole Genome Sequencing



上記の通り、入力した内容が表示されます。 間違いがなければ「NEXT」ボタンをクリックしてください。 前頁へ戻る場合は「CANCEL」ボタンをクリックしてください。



# 6. 支払登録

This page displays your registration selections. Please click **Finish** to complete your registration. If a payment is required, enter the information below. Fields and options marked with an asterisk are required to complete your registration.

### **Submit Payment**

#### **ORDERS**

## Taro Tanaka

Pr	oa	rai	m '	T	a	ck
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Name	Price	Total
Whole Genome Sequencing	\$2,900.00	\$2,900.00

Order Subtotal:

\$2,900.00

Total: \$2,900.00

## **Payment Method**

© Credit Card - Enter your information in the section below. VISA DISC®VER Credit Card Payment: \$2,900.00 クレジットカード情報を入力してください。 \*Name on Card: \*Type: Visa \*Credit Card Number: **1**Name on Card: カード名義 \*Card Security Code: (What is this?) **2Type:** VISA, MasterCard, American Express, Discover \*Expiration Data: Month Year 3 Credit Card Number: クレジットカード番号 ▼ 2017 January **4**Card Security Code: セキュリティコード \*Country: Japan ⑤Expiration Date: 有効期限 (月、年) \*Address (Please no PO Boxes): XXXBldg. 2F Shiba 1-1-1 ⑥Country: 国 **7**Address: 町、番地 Minato-ku 8City: 市区町村 State/Province: Tokyo ※⑤以下はカード名義住所を入力ください。 ZIP/Postal Code: 100-1111 **▼ PREVIOUS** CANCEL

> 間違いがなければ、「FINISH」ボタンをクリックしてください。 以上で登録は完了です。

