



GeneDx Announces Transformative Study Supporting Hospital-Wide Adoption of Rapid Genomic Sequencing at Seattle Children's

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Published in Genetics in Medicine, study shows broad inpatient implementation of rapid genome sequencing significantly increased diagnostic rates and reduced time to diagnosis

Children experiencing faltering growth saw striking 63% diagnostic yield

GAITHERSBURG, Md.--(BUSINESS WIRE)--Aug. 24, 2026-- [GeneDx](#) (Nasdaq: WGS), the leader in rare disease diagnosis and improving health through the power of genomic data, today announced new data published in [Genetics in Medicine](#), an official journal of the American College of Medical Genetics and Genomics (ACMG), in collaboration with the clinical genetics team at Seattle Children's. The study demonstrates that implementing first-tier rapid genome sequencing (rGS) broadly across inpatient pediatric care units improves diagnostic rates, patient outcomes, and operational efficiency within health systems.

The publication, "Hospital-wide implementation of inpatient first-tier rapid genome sequencing," details Seattle Children's study evaluating more than 1,000 pediatric inpatients who received rGS across the neonatal intensive care unit (NICU), pediatric intensive care unit (PICU), cardiac intensive care unit (CICU), and non-critical care inpatient wards over a 3.5-year period.

"Historically, rapid genome sequencing has primarily been associated with critically ill infants in intensive care settings," said Tara L. Wenger, MD, PhD. "What this study shows is that the benefits extend far beyond the NICU, PICU, and CICU. Many hospitalized children across pediatric care settings may benefit from earlier genomic diagnosis, particularly patients who have experienced prolonged and unresolved clinical journeys."

Key findings include:

- 35% overall diagnostic yield
- 43% diagnostic yield in non-ICU inpatient wards - the highest of any hospital unit
- 63% diagnostic yield among children evaluated for faltering growth, with 37 distinct genetic diagnoses identified in 36 patients and 4 patients having dual diagnoses

"The exceptionally high diagnostic yield identified in children experiencing faltering growth is particularly striking because these patients have not traditionally been viewed as clear candidates for rapid genome sequencing," said Alexandra C. Keefe, MD, PhD, a clinical genetics physician at Seattle Children's. "These findings suggest what we've long suspected. Many children outside traditional critical care settings may have underlying genetic conditions that are being missed or diagnosed too late. Many children may not even be referred to Genetics in the outpatient setting or recognized to have a genetic condition. Earlier genomic testing and finding a diagnosis during hospitalization meaningfully improves clinical management and long-term outcomes."

This publication outlines a scalable new model for genomic medicine by demonstrating that hospitals can deliver earlier genetic diagnoses to more patients by expanding utilization of rGS outside of critical care units and without significantly expanding genetics staffing.

Broader implementation can lead to meaningful operational benefits for health systems as well, including reduced outpatient genetics wait times and improved equity in access to genetic diagnosis. Additionally, the study found that hospital-wide rGS implementation eliminated race-based disparities in access to testing, underscoring the potential for genomics to support more equitable care delivery at scale.

"This study provides an important blueprint for health systems seeking to make genomic medicine a standard part of inpatient care," said Dr. Linda Genen, MD, MPH, Chief Medical Officer at GeneDx and a former practicing Neonatologist. "By expanding access to testing in non-critical care units, health systems can bring genomic answers to more children, reduce bottlenecks in specialty care, and build a more equitable and scalable model for precision medicine."

About GeneDx

GeneDx's (Nasdaq: WGS) mission is to empower everyone to live their healthiest life through genomics. GeneDx combines unmatched clinical expertise, advanced technology, and the power of GeneDx Infinity™ – the world's largest rare disease genomic dataset. This unparalleled foundation powers GeneDx's ExomeDx™ and GenomeDx® tests – ranked #1 by expert geneticists and granted FDA Breakthrough Device designation – enabling clinicians to deliver precise, fast, and actionable diagnoses. GeneDx Infinity also fuels discovery for biopharma, with the most powerful AI-driven genomic intelligence. A genomics pioneer over the last 25 years, diagnosing more than 4,800 genetic diseases and publishing more than 1,000 research publications, GeneDx is building the network that will drive the future of genomic precision medicine. For more information, visit [genedx.com](https://www.genedx.com) and connect with us on [LinkedIn](#), [Facebook](#), and [Instagram](#).

Forward Looking Statements

This press release may contain “forward-looking statements” within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended, and the U.S. Private Securities Litigation Reform Act of 1995. These forward-looking statements generally are identified by the words “believe,” “project,” “expect,” “anticipate,” “estimate,” “intend,” “strategy,” “future,” “opportunity,” “plan,” “may,” “should,” “will,” “would,” “will be,” “will continue,” “will likely result,” and similar expressions. Forward-looking statements are predictions, projections and other statements about future events that are based on current expectations and assumptions and, as a result, are subject to risks and uncertainties. Many factors could cause actual future events to differ materially from the forward-looking statements in this press release, including but not limited to: (i) our ability to advance gene-disease discovery and implement plans to accelerate and unlock the full potential of precision medicine, (ii) the risk of downturns and a changing regulatory landscape in the highly competitive healthcare industry, (iii) the size and growth of the market in which we operate, and (iv) recalibrating for building long-term, durable performance. The foregoing list of factors is not exhaustive. A further list and description of risks, uncertainties and other matters can be found in the “Risk Factors” section of our Annual Report on Form 10-K for the fiscal year ended December 31, 2025 and our Quarterly Report on Form 10-Q for the fiscal quarter ended March 31, 2026, and other documents filed by us from time to time with the SEC. These filings identify and address other important risks and uncertainties that could cause actual events and results to differ materially from those contained in the forward-looking statements. Forward-looking statements speak only as of the date they are made. Readers are cautioned not to put undue reliance on forward-looking statements, and we assume no obligation and do not intend to update or revise these forward-looking statements, whether as a result of new information, future events, or otherwise. We do not give any assurance that we will achieve our expectations.

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Investor Relations Contact:

Investors@GeneDx.com

Media Contact:

Press@GeneDx.com

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