Principle Values:

1. Clinical grade mutation database
   a. Evidence towards or against pathogenicity
2. Make data freely available
3. pre-competitive space
4. expectations of reciprocity
   a. Users to also contribute with an obligation to submit. Create tools to monitor, allow access?
5. Neutral party to host
   a. New non-profit organization entity that can raise money?
6. Criteria of threshold for submission
   a. Verification of variant (only by CLIA certified labs or Research labs meeting criteria?)
   b. Tiers of submission
7. Publication:
   a. Microattribution – submission be accompanied by submitter ID.
8. Consent model:
   a. Opt out mechanism of data acquisition.
      i. Requirements of informing physicians, ISCA website model, pre-reviewed with Jim Ostell, NCBI – OHRPP get through IRB not formally
   b. IRB requirements
   c. Prior data – retrospective prior to initiation to opt-out allowed to send de-identified and phenotypic info but not raw data files.
   d. Models for opt-out for every patient in hospital.