

Foresight® Carrier Screen

RESULTS RECIPIENT **SEATTLE SPERM BANK** Attn: Jeffrey Olliffe 4915 25th Ave NE Ste 204w Seattle, WA 98105-5668 Phone: (206) 588-1484 Fax: (206) 466-4696 NPI: 1306838271 Report Date: 03/03/2020 MALE DONOR 12578 DOB: Ethnicity: Northern European Sample Type: EDTA Blood Date of Collection: 02/25/2020 Date Received: 02/27/2020 Date Tested: 03/03/2020 Barcode: 11004512620229 Accession ID: CSLNACK949V6MFM Indication: Egg or sperm donor FEMALE N/A

### POSITIVE: CARRIER

#### ABOUT THIS TEST

The **Myriad Foresight Carrier Screen** utilizes sequencing, maximizing coverage across all DNA regions tested, to help you learn about your chance to have a child with a genetic disease.

#### **RESULTS SUMMARY**

Risk Details	DONOR 12578	Partner
Panel Information	Foresight Carrier Screen Universal Panel Fundamental Plus Panel Fundamental Panel <b>(175 conditions tested)</b>	N/A
POSITIVE: CARRIER Cystic Fibrosis Reproductive Risk: 1 in 120 Inheritance: Autosomal Recessive	CARRIER* NM_000492.3(CFTR):c. 1521_1523delCTT(aka F508del) heterozygote	The reproductive risk presented is based on a hypothetical pairing with a partner of the same ethnic group. Carrier testing should be considered. See "Next Steps".
<b>POSITIVE: CARRIER</b> Autosomal Recessive Polycystic Kidney Disease, PKHD1-related Reproductive Risk: 1 in 330 Inheritance: Autosomal Recessive	CARRIER* NM_138694.3(PKHD1):c. 10637delT(aka V3546Afs*22) heterozygote <sup>†</sup>	The reproductive risk presented is based on a hypothetical pairing with a partner of the same ethnic group. Carrier testing should be considered. See "Next Steps".
POSITIVE: CARRIER Biotinidase Deficiency Reproductive Risk: 1 in 510 Inheritance: Autosomal Recessive	CARRIER <sup>★</sup> NM_000060.2(BTD):c.1330G>C (D444H) heterozygote	The reproductive risk presented is based on a hypothetical pairing with a partner of the same ethnic group. Carrier testing should be considered. See "Next Steps".

†Likely to have a negative impact on gene function. \*Carriers generally do not experience symptoms.

No disease-causing mutations were detected in any other gene tested. A complete list of all conditions tested can be found on page 11.

#### CLINICAL NOTES

None

#### NEXT STEPS

• Carrier testing should be considered for the diseases specified above for the patient's partner, as both parents must be carriers before a child is at high risk of developing the disease.



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FEMALE N/A

• Genetic counseling is recommended and patients may wish to discuss any positive results with blood relatives, as there is an increased chance that they are also carriers.



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FEMALE N/A

### positive: carrier Cystic Fibrosis

**Reproductive risk: 1 in 120** Risk before testing: 1 in 3,700

Gene: CFTR | Inheritance Pattern: Autosomal Recessive

Patient	DONOR 12578	No partner tested
Result	Carrier	N/A
Variant(s)	NM_000492.3(CFTR):c.1521_1523delCTT(aka F508del) heterozygote	N/A
Methodology	Sequencing with copy number analysis	N/A
Interpretation	This individual is a carrier of cystic fibrosis. Carriers generally do not experience symptoms. F508del is a classic cystic fibrosis mutation. Disease phenotype is dependent on, but not necessarily predicted by, the combination of mutations inherited.	N/A
Detection rate	>99%	N/A
Exons tested	NM_000492:1-27.	N/A

### What Is Cystic Fibrosis?

Cystic Fibrosis (CF) is an inherited condition characterized by the production of abnormally thick, sticky mucus, particularly in the lungs and digestive system. While it is normal to have mucus lining the organs of the respiratory, digestive, and reproductive systems in order to lubricate and protect them, in individuals with CF this mucus is thick and sticky. This abnormal mucus results in the clogging and obstructing of various systems in the body. CF is a chronic condition that worsens over time. CF is caused by mutations in the *CFTR* gene.

Most individuals with CF experience breathing problems and frequent lung infections that lead to permanent lung damage such as scarring (fibrosis) and sac-like growths (cysts). The pancreas, an organ that produces insulin and digestive enzymes, is often affected by CF. The sticky mucus caused by CF can block ducts which ferry enzymes from the pancreas to the rest of the body, resulting in problems such as diarrhea, malnutrition, and poor growth. Infertility, particularly in men, and delayed puberty are also common among people with CF.

The severity of symptoms varies from person to person, even among individuals with the same mutations. Most cases of CF are diagnosed in early childhood. However, in general, individuals with two classic mutations are more likely to have a severe form of the disease including problems with the pancreas, while individuals with one classic and one non-classic or individuals with two non-classic mutations are more likely to have a milder form of the condition and may avoid problems with the pancreas.

Mutations in the same gene that causes CF can result in a condition in males called congenital absence of the vas deferens (CAVD). In CAVD, the vas deferens (a reproductive organ involved in sperm transport) is improperly formed, leading to infertility.



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FEMALE N/A

### How Common Is Cystic Fibrosis?

According to the National Institutes of Health, CF is the most common deadly inherited condition among Caucasians in the United States, with a prevalence of 1 in 3000 in individuals of Caucasian or Ashkenazi Jewish descent. CF is rarer in other groups. The prevalence is 1 in 8,300 in Hispanics, 1 in 17,000 in African Americans, and 1 in 30,000 in Asians.

### How Is Cystic Fibrosis Treated?

FDA approved medications are available for individuals with certain *CFTR* mutations. There are also many other options for treating the symptoms in everyone with CF, regardless of the mutation present. Because thick mucus can build up in the respiratory system, it is important to keep the patient's airways open in order to ease breathing and prevent infection. This can be accomplished with various prescription drugs as well as by physically loosening mucus by pounding on the patient's back in a prescribed way. This treatment, known as "postural drainage and chest percussion" must be performed by someone other than the affected person, and is typically done at least once daily. As respiratory infections occur, physicians typically prescribe antibiotics.

Physicians will also monitor the digestive system to ensure that the patient is getting proper nutrition. Enzymes or vitamin supplements may be prescribed. Both the respiratory and digestive systems of an individual with CF must be monitored regularly by a medical team.

Surgery may be needed to correct certain problems caused by CF and lung transplants are an option for some individuals.

### What Is the Prognosis for an Individual with Cystic Fibrosis?

Thanks to improved treatments and a better understanding of the condition, the average life expectancy for individuals with CF who live to adulthood is near 40 years. Children born with CF today who receive early treatment may live even longer.



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## POSITIVE: CARRIER Autosomal Recessive Polycystic Kidney Disease, PKHD1-related

**Reproductive risk: 1 in 330** Risk before testing: 1 in 27,000

Gene: PKHD1 | Inheritance Pattern: Autosomal Recessive

Patient	DONOR 12578	No partner tested
Result	Carrier	N/A
Variant(s)	NM_138694.3(PKHD1):c.10637delT(aka V3546Afs*22) heterozygote <sup>†</sup>	N/A
Methodology	Sequencing with copy number analysis	N/A
Interpretation	This individual is a carrier of autosomal recessive polycystic kidney disease, PKHD1-related. Carriers generally do not experience symptoms.	N/A
Detection rate	>99%	N/A
Exons tested	NM_138694:2-67.	N/A

†Likely to have a negative impact on gene function.

### What Is Autosomal Recessive Polycystic Kidney Disease, PKHD1-Related?

Autosomal recessive polycystic kidney disease (ARPKD), is an inherited condition caused by mutations in the *PKHD1* gene in which clusters of fluid-filled sacs (cysts) form in the kidneys, often leading to kidney failure by the age of 10 and a reduced lifespan. Children with ARPKD may have underdeveloped lungs, leading to breathing problems or lung infections. Without treatment, 30% of children with ARPKD die within the first year of life. However, with treatments to aid breathing and/or kidney transplantation, about 80% of infants will survive.

The majority of infants with ARPKD show enlarged, cyst-filled kidneys within the first month of life. These cysts will impair the kidneys' ability to filter waste from the body. About 50% of infants with ARPKD will also have an enlarged liver. These anomalies are often detectable through an ultrasound before the child is born. More than half of the children will develop kidney failure by the age of 10. Without dialysis or transplantation, the disease is often fatal.

Extremely high blood pressure is common in people with ARPKD. They are also prone to urinary tract infections, frequent urination, low blood-cell counts, pain in the back or the sides, varicose veins, and hemorrhoids. Many affected individuals are also smaller in stature than normal.

A minority of people with ARPKD do not show symptoms of the disease until later in childhood or early in adulthood, with liver disease being the dominant symptom. In these people, the kidney disease is often mild.



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### How Common Is Autosomal Recessive Polycystic Kidney Disease, PKHD1-Related?

The prevalence of ARPKD is 1 in 10,000 to 1 in 40,000 infants. However, the disease may actually be more common than these estimates suggest because people with milder forms of the disease may not be diagnosed without genetic testing. Mutations in the *PKHD1* gene account for about 75% of ARPKD cases.

### How Is Autosomal Recessive Polycystic Kidney Disease, PKHD1-Related Treated?

The initial concern with infants who have ARPKD is to protect their ability to breathe. Stabilizing respiratory function through mechanical ventilation may be required. Eating a nutritious diet can aid growth, and in some cases, growth hormones are recommended. Infants and children may require feeding tubes in order to ensure proper growth.

If faced with kidney failure, people with ARPKD frequently undergo dialysis (a "cleansing" of the blood through a machine that removes waste) or kidney transplantation. If the liver is extremely damaged, transplantation of this organ may also be recommended. Some individuals with ARPKD must undergo dialysis or kidney transplantation in infancy. Treatments to minimize dehydration and medications to lower blood pressure and to treat urinary tract infections may also be necessary.

# What Is the Prognosis for a Person with Autosomal Recessive Polycystic Kidney Disease, PKHD1-Related?

Without treatment, approximately 30% of infants with ARPKD die within the first year of life due to breathing difficulties or lung infections. However, with treatments to aid breathing and/or kidney transplantation, about 80% of affected individuals will survive past infancy. Of those who survive infancy, about 82% survive to age 10, and 73% live past the age of 15. In one study, 58% of individuals required dialysis or kidney transplantation by age 20. As transplantation methods improve, it is expected that people with ARPKD will live longer lives.



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### POSITIVE: CARRIER Biotinidase Deficiency

**Reproductive risk: 1 in 510** Risk before testing: 1 in 3,200

Gene: BTD | Inheritance Pattern: Autosomal Recessive

Patient	DONOR 12578	No partner tested
Result	Carrier	N/A
Variant(s)	NM_000060.2(BTD):c.1330G>C(D444H) heterozygote	N/A
Methodology	Sequencing with copy number analysis	N/A
Interpretation	This individual is a carrier of biotinidase deficiency. Carriers generally do not experience symptoms. D444H is a partial biotinidase deficiency mutation.	N/A
Detection rate	>99%	N/A
Exons tested	NM_000060:1-4.	N/A

### What Is Biotinidase Deficiency?

Biotinidase deficiency is a highly treatable inherited disease in which the body cannot process biotin (vitamin B7), due to a deficiency in an enzyme called biotinidase. Biotinidase deficiency is caused by mutations in the *BTD* gene.

#### PROFOUND BIOTINIDASE DEFICIENCY

Individuals who have less than 10% of the normal amount of the enzyme biotinidase are said to have profound biotinidase deficiency. Without treatment, their symptoms tend to be significant. Individuals with biotinidase deficiency can experience seizures, poor muscle tone, difficulty with movement and balance, vision loss, hearing loss, skin rashes, breathing problems, hair loss, fungal infections, and intellectual and/or developmental delays. These symptoms often begin after the first few weeks or months of life and can be life-threatening if untreated.

#### PARTIAL BIOTINIDASE DEFICIENCY

Individuals who have between 10% and 30% of the normal amounts of biotinidase have a milder form of the disease known as partial biotinidase deficiency. They may experience less-severe symptoms, or they may not show any symptoms until they become ill or stressed.

### How Common Is Biotinidase Deficiency?

The incidence of profound biotinidase deficiency is approximately 1 in 137,000 births. The prevalence of partial biotinidase deficiency is approximately 1 in 110,000 people. Since partial biotinidase deficiency can be mild, it is possible that the true prevalence is more common.



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FEMALE N/A

### How Is Biotinidase Deficiency Treated?

Biotinidase deficiency is treated with a biotin pill taken daily by mouth. A physician can determine the proper dosage and adjust that dosage over time if necessary. This treatment is lifelong and highly effective. Both people with profound biotinidase deficiency and partial biotinidase deficiency should take biotin supplements.

It is important to start biotin supplementation as soon as possible. Treatment with biotin supplements can help improve some symptoms of biotinidase deficiency. If there is delayed treatment, symptoms such as vision loss, hearing loss, and developmental delay are not reversible.

For people who have vision or hearing loss, vision aids or hearing aids may be helpful. Learning specialists can help patients with intellectual delay learn as effectively as possible.

### What Is the Prognosis for a Person with Biotinidase Deficiency?

With early detection and treatment, a person with biotinidase deficiency can live a completely normal life. If left untreated, the disease can cause life-threatening complications. When the disease is not detected early, patients may experience permanent damage to their hearing, vision, and intellectual ability. In cases where the disease is entirely unrecognized, it can be life-threatening.



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FEMALE N/A

# **Methods and Limitations**

DONOR 12578 [Foresight Carrier Screen]: Sequencing with copy number analysis, spinal muscular atrophy, and analysis of homologous regions (DTS v3).

### Sequencing with copy number analysis

High-throughput sequencing and read depth-based copy number analysis are used to analyze the listed exons, as well as selected intergenic and intronic regions, of the genes in the Conditions Tested section of the report. The region of interest (ROI) of the test comprises these regions, in addition to the 20 intronic bases flanking each exon. In a minority of cases where genomic features (e.g., long homopolymers) compromise calling fidelity, the affected intronic bases are not included in the ROI. The ROI is sequenced to high coverage and the sequences are compared to standards and references of normal variation (Genome Reference Consortium Human Build 37 (GRCh37)/hg19). More than 99% of all bases in the ROI are sequenced at greater than the minimum read depth. Mutations may not be detected in areas of lower sequence coverage. Small insertions and deletions may not be as accurately determined as single nucleotide variants. Genes that have closely related pseudogenes may be addressed by a different method. *CFTR* and *DMD* testing includes analysis for both large (exon-level) deletions and duplications with an average sensitivity of 99%, while other genes are only analyzed for large deletions with a sensitivity of >75%. However, the sensitivity may be higher for selected founder deletions. The breakpoints of copy number variants and exons affected are estimated from probe positions. Only exons known to be included in the copy number variant are provided in the name. In some cases, the copy number variant may be larger or smaller than indicated. If *GJB2* is tested, two large upstream deletions which overlap *GJB6* and affect the expression of *GJB2*, del(*GJB6*-D13S1850) and del(*GJB6*-D13S1854), are also analyzed. Mosaicism or somatic variants present at low levels may not be detected. If detected, these may not be reported.

Detection rates are determined by using literature to estimate the fraction of disease alleles, weighted by frequency, that the methodology is unable to detect. Detection rates only account for analytical sensitivity and certain variants that have been previously described in the literature may not be reported if there is insufficient evidence for pathogenicity. Detection rates do not account for the disease-specific rates of de novo mutations.

All variants that are a recognized cause of the disease will be reported. In addition, variants that have not previously been established as a recognized cause of disease may be identified. In these cases, only variants classified as "likely" pathogenic are reported. Likely pathogenic variants are described elsewhere in the report as "likely to have a negative impact on gene function". Likely pathogenic variants are evaluated and classified by assessing the nature of the variant and reviewing reports of allele frequencies in cases and controls, functional studies, variant annotation and effect prediction, and segregation studies. Exon level duplications are assumed to be in tandem and are classified according to their predicted effect on the reading frame. Benign variants, variants of uncertain significance, and variants not directly associated with the intended disease phenotype are not reported. Curation summaries of reported variants are available upon request.

### Spinal muscular atrophy

Targeted copy number analysis is used to determine the copy number of exon 7 of the *SMN1* gene relative to other genes. Other mutations may interfere with this analysis. Some individuals with two copies of *SMN1* are carriers with two *SMN1* genes on one chromosome and a *SMN1* deletion on the other chromosome. This is more likely in individuals who have 2 copies of the *SMN1* gene and are positive for the g.27134T>G SNP, which affects the reported residual risk; Ashkenazi Jewish or Asian patients with this genotype have a high post-test likelihood of being carriers for SMA and are reported as carriers. The g.27134T>G SNP is only reported in individuals who have 2 copies of *SMN1*.

### Analysis of homologous regions

A combination of high-throughput sequencing, read depth-based copy number analysis, and targeted genotyping is used to determine the number of functional gene copies and/or the presence of selected loss of function mutations in certain genes that have homology to other regions. The precise breakpoints of large deletions in these genes cannot be determined, but are estimated from copy number analysis. High numbers of pseudogene copies may interfere with this analysis.

If *CYP21A2* is tested, patients who have one or more additional copies of the *CYP21A2* gene and a loss of function mutation may not actually be a carrier of 21-hydroxylasedeficient congenital adrenal hyperplasia (CAH). Because the true incidence of non-classic CAH is unknown, the residual carrier and reproductive risk numbers on the report are only based on published incidences for classic CAH. However, the published prevalence of non-classic CAH is highest in individuals of Ashkenazi Jewish, Hispanic, Italian, and Yugoslav descent. Therefore, the residual and reproductive risks are likely an underestimate of overall chances for 21-hydroxylase-deficient CAH, especially in the aforementioned populations, as they do not account for non-classic CAH. If *HBA1/HBA2* are tested, some individuals with four alpha globin genes may be carriers, with three genes on one chromosome and a deletion on the other chromosome. This and similar, but rare, carrier states, where complementary changes exist in both the gene and a pseudogene, may not be detected by the assay.



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FEMALE N/A

### Limitations

In an unknown number of cases, nearby genetic variants may interfere with mutation detection. Other possible sources of diagnostic error include sample mix-up, trace contamination, bone marrow transplantation, blood transfusions and technical errors. This test is designed to detect and report germline alterations. While somatic variants present at low levels may be detected, these may not be reported. If more than one variant is detected in a gene, additional studies may be necessary to determine if those variants lie on the same chromosome or different chromosomes. The test does not fully address all inherited forms of intellectual disability, birth defects and genetic disease. A family history of any of these conditions may warrant additional evaluation. Furthermore, not all mutations will be identified in the genes analyzed and additional testing may be beneficial for some patients. For example, individuals of African, Southeast Asian, and Mediterranean ancestry are at increased risk for being carriers for hemoglobin opathies, which can be identified by CBC and hemoglobin electrophoresis or HPLC (*ACOG Practice Bulletin No. 78. Obstet.Gynecol. 2007;109:229-37*).

This test was developed and its performance characteristics determined by Myriad Women's Health, Inc. It has not been cleared or approved by the US Food and Drug Administration (FDA). The FDA does not require this test to go through premarket review. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high-complexity clinical testing. These results are adjunctive to the ordering physician's evaluation. CLIA Number: **#05D1102604**.

### Resources

#### GENOME CONNECT | http://www.genomeconnect.org

Patients can share their reports via research registries such as Genome Connect, an online research registry working to build the knowledge base about genetics and health. Genome Connect provides patients, physicians, and researchers an opportunity to share genetic information to support the study of the impact of genetic variation on health conditions.

SENIOR LABORATORY DIRECTOR

Salk si

Jack Ji, PhD, FACMG

Report content approved by Jack Ji, PhD, FACMG on Mar 4, 2020



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# **Conditions Tested**

**11-beta-hydroxylase-deficient Congenital Adrenal Hyperplasia** - Gene: CYP11B1. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000497:1-9. **Detection Rate:** Northern European 94%.

6-pyruvoyl-tetrahydropterin Synthase Deficiency - Gene: PTS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000317:1-6. Detection Rate: Northern European >99%.

ABCC8-related Familial Hyperinsulinism - Gene: ABCC8. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000352:1-39. Detection Rate: Northern European >99%.

Adenosine Deaminase Deficiency - Gene: ADA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000022:1-12. Detection Rate: Northern European >99%.

Alpha Thalassemia - Genes: HBA1, HBA2. Autosomal Recessive. Analysis of homologous regions. Variants (13): -(alpha)20.5, --BRIT, --MEDI, --MEDI, --SEA, --THAI or --FIL, -alpha3.7, -alpha4.2, HBA1+HBA2 deletion, Hb Constant Spring, anti3.7, anti4.2, del HS-40. Detection Rate: Unknown due to rarity of disease. Alpha-mannosidosis - Gene: MAN2B1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000528:1-23. Detection Rate: Northern European >99%.

Alpha-sarcoglycanopathy - Gene: SGCA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000023:1-9. Detection Rate: Northern European >99%.

Alstrom Syndrome - Gene: ALMS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_015120:1-23. Detection Rate: Northern European >99%.

**AMT-related Glycine Encephalopathy** - Gene: AMT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000481:1-9. Detection Rate: Northern European >99%.

Andermann Syndrome - Gene: SLC12A6. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_133647:1-25. Detection Rate: Northern European >99%.

Argininemia - Gene: ARG1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000045:1-8. Detection Rate: Northern European 97%. Argininosuccinic Aciduria - Gene: ASL. Autosomal Recessive. Sequencing with copy

number analysis. Exons: NM\_001024943:1-16. Detection Rate: Northern European >99%.

Aspartylglucosaminuria - Gene: AGA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000027:1-9. Detection Rate: Northern European >99%.

Ataxia with Vitamin E Deficiency - Gene: TTPA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000370:1-5. Detection Rate: Northern European >99%.

Ataxia-telangiectasia - Gene: ATM. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000051:2-63. Detection Rate: Northern European 98%.

ATP7A-related Disorders - Gene: ATP7A. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000052:2-23. Detection Rate: Northern European 96%.

Autoimmune Polyglandular Syndrome Type 1 - Gene: AIRE. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000383:1-14. Detection Rate: Northern European >99%.

Autosomal Recessive Osteopetrosis Type 1 - Gene: TCIRG1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006019:2-20. Detection Rate: Northern European >99%.

Autosomal Recessive Polycystic Kidney Disease, PKHD1-related - Gene: PKHD1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_138694:2-67. Detection Rate: Northern European >99%. Autosomal Recessive Spastic Ataxia of Charlevoix-Saguenay - Gene: SACS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_014363:2-10. Detection Rate: Northern European 99%.

Bardet-Biedl Syndrome, BBS1-related - Gene: BBS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_024649:1-17. Detection Rate: Northern European >99%.

**Bardet-Biedl Syndrome, BBS10-related** - Gene: BBS10. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_024685:1-2. Detection Rate: Northern European >99%.

Bardet-Biedl Syndrome, BBS12-related - Gene: BBS12. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_152618:2. Detection Rate: Northern European >99%.

Bardet-Biedl Syndrome, BBS2-related - Gene: BBS2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_031885:1-17. Detection Rate: Northern European >99%.

**BCS1L-related Disorders** - Gene: BCS1L. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_004328:3-9. Detection Rate: Northern European >99%.

**Beta-sarcoglycanopathy** - Gene: SGCB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000232:1-6. Detection Rate: Northern European >99%.

Biotinidase Deficiency - Gene: BTD. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000060:1-4. Detection Rate: Northern European >99%.

Bloom Syndrome - Gene: BLM. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000057:2-22. Detection Rate: Northern European >99%.

Calpainopathy - Gene: CAPN3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000070:1-24. Detection Rate: Northern European >99%.

Canavan Disease - Gene: ASPA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000049:1-6. Detection Rate: Northern European 98%. Carbamoylphosphate Synthetase I Deficiency - Gene: CPS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001875:1-38. Detection Rate: Northern European >99%.

Carnitine Palmitoyltransferase IA Deficiency - Gene: CPT1A. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001876:2-19. Detection Rate: Northern European >99%.

Carnitine Palmitoyltransferase II Deficiency - Gene: CPT2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000098:1-5. Detection Rate: Northern European >99%.

Cartilage-hair Hypoplasia - Gene: RMRP. Autosomal Recessive. Sequencing with copy number analysis. Exon: NR\_003051:1. Detection Rate: Northern European >99%.

**Cerebrotendinous Xanthomatosis** - Gene: CYP27A1. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000784:1-9. **Detection Rate:** Northern European >99%.

Citrullinemia Type 1 - Gene: ASS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000050:3-16. Detection Rate: Northern European >99%.

CLN3-related Neuronal Ceroid Lipofuscinosis - Gene: CLN3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001042432:2-16. Detection Rate: Northern European >99%.

CLN5-related Neuronal Ceroid Lipofuscinosis - Gene: CLN5. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006493:1-4. Detection Rate: Northern European >99%.

CLN6-related Neuronal Ceroid Lipofuscinosis - Gene: CLN6. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_017882:1-7. Detection Rate: Northern European >99%.



**CLN8-related Neuronal Ceroid Lipofuscinosis** - Gene: CLN8. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_018941:2-3. **Detection Rate:** Northern European >99%.

Cohen Syndrome - Gene: VPS13B. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_017890:2-62. Detection Rate: Northern European 97%.

**COL4A3**-related Alport Syndrome - Gene: COL4A3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000091:1-52. Detection Rate: Northern European 97%.

**COL4A4-related Alport Syndrome** - Gene: COL4A4. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000092:2-48. **Detection Rate:** Northern European 98%.

Combined Pituitary Hormone Deficiency, PROP1-related - Gene: PROP1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006261:1-3. Detection Rate: Northern European >99%.

Congenital Adrenal Hyperplasia, CYP21A2-related - Gene: CYP21A2. Autosomal Recessive. Analysis of homologous regions. Variants (13): CYP21A2 deletion, CYP21A2 duplication, CYP21A2 triplication, G111Vfs\*21, I173N, L308Ffs\*6, P31L, Q319\*, Q319\*+CYP21A2dup, R357W, V281L, [(I237N;V238E;M240K)], c.293-13C>G. Detection Rate: Northern European 96%.

**Congenital Disorder of Glycosylation Type Ia** - Gene: PMM2. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000303:1-8. **Detection Rate:** Northern European >99%.

**Congenital Disorder of Glycosylation Type Ic** - Gene: ALG6. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_013339:2-15. **Detection Rate:** Northern European >99%.

Congenital Disorder of Glycosylation, MPI-related - Gene: MPI. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_002435:1-8. Detection Rate: Northern European >99%.

**Costeff Optic Atrophy Syndrome** - Gene: OPA3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_025136:1-2. Detection Rate: Northern European >99%.

Cystic Fibrosis - Gene: CFTR. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000492:1-27. IVS8-5T allele analysis is only reported in the presence of the R117H mutation. Detection Rate: Northern European >99%. Cystinosis - Gene: CTNS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_004937:3-12. Detection Rate: Northern European >99%.

D-bifunctional Protein Deficiency - Gene: HSD17B4. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000414:1-24. Detection Rate: Northern European 98%.

**Delta-sarcoglycanopathy** - Gene: SGCD. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000337:2-9. **Detection Rate:** Northern European 99%.

Dihydrolipoamide Dehydrogenase Deficiency - Gene: DLD. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000108:1-14. Detection Rate: Northern European >99%.

Dysferlinopathy - Gene: DYSF. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_003494:1-55. Detection Rate: Northern European 98%. Dystrophinopathy (Including Duchenne/Becker Muscular Dystrophy) - Gene: DMD. X-linked Recessive. Sequencing with copy number analysis. Exons:

NM 004006:1-79. Detection Rate: Northern European >99%.

**ERCC6-related Disorders** - Gene: ERCC6. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000124:2-21. **Detection Rate:** Northern European 99%.

**ERCC8-related Disorders** - Gene: ERCC8. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000082:1-12. **Detection Rate:** Northern European 95%.

**EVC-related Ellis-van Creveld Syndrome** - Gene: EVC. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_153717:1-21. **Detection Rate:** Northern European 96%.

**EVC2-related Ellis-van Creveld Syndrome** - Gene: EVC2. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_147127:1-22. **Detection Rate:** Northern European >99%. MALE DONOR 12578 DOB: Ethnicity: Northern European Barcode: 11004512620229

 Fabry Disease - Gene: GLA. X-linked Recessive. Sequencing with copy number

 analysis. Exons: NM\_000169:1-7. Detection Rate: Northern European 98%.

 Familial Dysautonomia - Gene: IKBKAP. Autosomal Recessive. Sequencing with

 copy number analysis. Exons: NM\_003640:2-37. Detection Rate: Northern

 European >99%.

FEMALE

N/A

Familial Mediterranean Fever - Gene: MEFV. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000243:1-10. Detection Rate: Northern European >99%.

Fanconi Anemia Complementation Group A - Gene: FANCA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000135:1-43. Detection Rate: Northern European 92%.

Fanconi Anemia, FANCC-related - Gene: FANCC. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000136:2-15. Detection Rate: Northern European >99%.

FKRP-related Disorders - Gene: FKRP. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_024301:4. Detection Rate: Northern European >99%. FKTN-related Disorders - Gene: FKTN. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001079802:3-11. Detection Rate: Northern European >99%.

Galactokinase Deficiency - Gene: GALK1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000154:1-8. Detection Rate: Northern European >99%.

Galactosemia - Gene: GALT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000155:1-11. Detection Rate: Northern European >99%. Gamma-sarcoglycanopathy - Gene: SGCG. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000231:2-8. Detection Rate: Northern European 88%.

Gaucher Disease - Gene: GBA. Autosomal Recessive. Analysis of homologous regions. Variants (10): D409V, D448H, IVS2+1G>A, L444P, N370S, R463C, R463H, R496H, V394L, p.L29Afs\*18. Detection Rate: Northern European 60%.

GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness - Gene: GJB2. Autosomal Recessive. Sequencing with copy number analysis. Exons:

NM\_004004:1-2. Detection Rate: Northern European >99%.

GLB1-related Disorders - Gene: GLB1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000404:1-16. Detection Rate: Northern European >99%.

GLDC-related Glycine Encephalopathy - Gene: GLDC. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000170:1-25. Detection Rate: Northern European 94%.

Glutaric Acidemia, GCDH-related - Gene: GCDH. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000159:2-12. Detection Rate: Northern European >99%.

**Glycogen Storage Disease Type la** - Gene: G6PC. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000151:1-5. **Detection Rate:** Northern European >99%.

**Glycogen Storage Disease Type Ib** - Gene: SLC37A4. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_001164277:3-11. **Detection Rate:** Northern European >99%.

**Glycogen Storage Disease Type III** - **Gene:** AGL. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000642:2-34. **Detection Rate:** Northern European >99%.

**GNE Myopathy** - Gene: GNE. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001128227:1-12. Detection Rate: Northern European >99%. **GNPTAB-related Disorders** - Gene: GNPTAB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_024312:1-21. Detection Rate: Northern European >99%.

HADHA-related Disorders - Gene: HADHA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000182:1-20. Detection Rate: Northern European >99%.

Hb Beta Chain-related Hemoglobinopathy (Including Beta Thalassemia and Sickle Cell Disease) - Gene: HBB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000518:1-3. Detection Rate: Northern European >99%.



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Hereditary Fructose Intolerance - Gene: ALDOB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000035:2-9. Detection Rate: Northern European >99%.

Herlitz Junctional Epidermolysis Bullosa, LAMB3-related - Gene: LAMB3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000228:2-23. Detection Rate: Northern European >99%.

Hexosaminidase A Deficiency (Including Tay-Sachs Disease) - Gene: HEXA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000520:1-14. Detection Rate: Northern European >99%.

HMG-CoA Lyase Deficiency - Gene: HMGCL. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000191:1-9. Detection Rate: Northern European 98%.

Holocarboxylase Synthetase Deficiency - Gene: HLCS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000411:4-12. Detection Rate: Northern European >99%.

Homocystinuria, CBS-related - Gene: CBS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000071:3-17. Detection Rate: Northern European >99%.

Hydrolethalus Syndrome - Gene: HYLS1. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_145014:4. Detection Rate: Northern European >99%.

Hypophosphatasia - Gene: ALPL. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000478:2-12. Detection Rate: Northern European >99%.

**Isovaleric Acidemia** - Gene: IVD. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_002225:1-12. Detection Rate: Northern European >99%.

Joubert Syndrome 2 - Gene: TMEM216. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001173990:1-5. Detection Rate: Northern European >99%.

Junctional Epidermolysis Bullosa, LAMA3-related - Gene: LAMA3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000227:1-38. Detection Rate: Northern European >99%.

Junctional Epidermolysis Bullosa, LAMC2-related - Gene: LAMC2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_005562:1-23. Detection Rate: Northern European >99%.

KCNJ11-related Familial Hyperinsulinism - Gene: KCNJ11. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_000525:1. Detection Rate: Northern European >99%.

Krabbe Disease - Gene: GALC. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000153:1-17. Detection Rate: Northern European >99%.

LAMA2-related Muscular Dystrophy - Gene: LAMA2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000426:1-65. Detection Rate: Northern European >99%.

Leigh Syndrome, French-Canadian Type - Gene: LRPPRC. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_133259:1-38. Detection Rate: Northern European >99%.

Lipoid Congenital Adrenal Hyperplasia - Gene: STAR. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000349:1-7. Detection Rate: Northern European >99%.

Lysosomal Acid Lipase Deficiency - Gene: LIPA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000235:2-10. Detection Rate: Northern European >99%.

Maple Syrup Urine Disease Type Ia - Gene: BCKDHA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000709:1-9. Detection Rate: Northern European >99%.

Maple Syrup Urine Disease Type Ib - Gene: BCKDHB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_183050:1-10. Detection Rate: Northern European >99%.

Maple Syrup Urine Disease Type II - Gene: DBT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001918:1-11. Detection Rate: Northern European 96%.

Medium Chain Acyl-CoA Dehydrogenase Deficiency - Gene: ACADM. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000016:1-12. Detection Rate: Northern European >99%.

Megalencephalic Leukoencephalopathy with Subcortical Cysts - Gene: MLC1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_015166:2-12. Detection Rate: Northern European >99%.

**Metachromatic Leukodystrophy** - Gene: ARSA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000487:1-8. Detection Rate: Northern European >99%.

Methylmalonic Acidemia, cblA Type - Gene: MMAA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_172250:2-7. Detection Rate: Northern European >99%.

Methylmalonic Acidemia, cblB Type - Gene: MMAB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_052845:1-9. Detection Rate: Northern European >99%.

Methylmalonic Aciduria and Homocystinuria, cblC Type - Gene: MMACHC. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_015506:1-4. Detection Rate: Northern European >99%.

MKS1-related Disorders - Gene: MKS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_017777:1-18. Detection Rate: Northern European >99%.

**Mucolipidosis III Gamma** - Gene: GNPTG. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_032520:1-11. Detection Rate: Northern European >99%.

**Mucolipidosis IV** - Gene: MCOLN1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_020533:1-14. Detection Rate: Northern European >99%.

**Mucopolysaccharidosis Type I** - Gene: IDUA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000203:1-14. Detection Rate: Northern European >99%.

**Mucopolysaccharidosis Type II** - Gene: IDS. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000202:1-9. Detection Rate: Northern European 88%.

**Mucopolysaccharidosis Type IIIA** - Gene: SGSH. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000199:1-8. Detection Rate: Northern European >99%.

Mucopolysaccharidosis Type IIIB - Gene: NAGLU. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000263:1-6. Detection Rate: Northern European >99%.

**Mucopolysaccharidosis Type IIIC** - Gene: HGSNAT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_152419:1-18. Detection Rate: Northern European >99%.

MUT-related Methylmalonic Acidemia - Gene: MUT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000255:2-13. Detection Rate: Northern European >99%.

MYO7A-related Disorders - Gene: MYO7A. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000260:2-49. Detection Rate: Northern European >99%.

**NEB-related Nemaline Myopathy** - Gene: NEB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001271208:3-80,117-183. Detection Rate: Northern European 92%.

**Nephrotic Syndrome, NPHS1-related** - Gene: NPHS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_004646:1-29. Detection Rate: Northern European >99%.

Nephrotic Syndrome, NPHS2-related - Gene: NPHS2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_014625:1-8. Detection Rate: Northern European >99%.

Niemann-Pick Disease Type C1 - Gene: NPC1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000271:1-25. Detection Rate: Northern European >99%.

Niemann-Pick Disease Type C2 - Gene: NPC2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006432:1-5. Detection Rate: Northern European >99%.



Niemann-Pick Disease, SMPD1-related - Gene: SMPD1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000543:1-6. Detection Rate: Northern European >99%.

Nijmegen Breakage Syndrome - Gene: NBN. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_002485:1-16. Detection Rate: Northern European >99%.

**Ornithine Transcarbamylase Deficiency** - Gene: OTC. X-linked Recessive. Sequencing with copy number analysis. **Exons:** NM\_000531:1-10. **Detection Rate:** Northern European 97%.

PCCA-related Propionic Acidemia - Gene: PCCA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000282:1-24. Detection Rate: Northern European 95%.

PCCB-related Propionic Acidemia - Gene: PCCB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000532:1-15. Detection Rate: Northern European >99%.

PCDH15-related Disorders - Gene: PCDH15. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_033056:2-33. Detection Rate: Northern European 93%.

Pendred Syndrome - Gene: SLC26A4. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000441:2-21. Detection Rate: Northern European >99%.

**Peroxisome Biogenesis Disorder Type 1** - Gene: PEX1. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000466:1-24. **Detection Rate:** Northern European >99%.

**Peroxisome Biogenesis Disorder Type 3** - Gene: PEX12. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000286:1-3. **Detection Rate:** Northern European >99%.

**Peroxisome Biogenesis Disorder Type 4** - Gene: PEX6. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000287:1-17. **Detection Rate:** Northern European 97%.

**Peroxisome Biogenesis Disorder Type 5** - Gene: PEX2. Autosomal Recessive. Sequencing with copy number analysis. **Exon:** NM\_000318:4. **Detection Rate:** Northern European >99%.

**Peroxisome Biogenesis Disorder Type 6** - Gene: PEX10. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_153818:1-6. **Detection Rate:** Northern European >99%.

Phenylalanine Hydroxylase Deficiency - Gene: PAH. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000277:1-13. Detection Rate: Northern European >99%.

**POMGNT-related Disorders** - Gene: POMGNT1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_017739:2-22. Detection Rate: Northern European 96%.

Pompe Disease - Gene: GAA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000152:2-20. Detection Rate: Northern European 98%.

**PPT1-related Neuronal Ceroid Lipofuscinosis** - Gene: PPT1. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000310:1-9. **Detection Rate:** Northern European >99%.

**Primary Carnitine Deficiency** - Gene: SLC22A5. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_003060:1-10. **Detection Rate:** Northern European >99%.

**Primary Hyperoxaluria Type 1** - Gene: AGXT. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000030:1-11. **Detection Rate:** Northern European >99%.

**Primary Hyperoxaluria Type 2** - Gene: GRHPR. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_012203:1-9. Detection Rate: Northern European >99%.

**Primary Hyperoxaluria Type 3** - Gene: HOGA1. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_138413:1-7. **Detection Rate:** Northern European >99%.

**Pycnodysostosis** - Gene: CTSK. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000396:2-8. Detection Rate: Northern European >99%.

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**Pyruvate Carboxylase Deficiency** - Gene: PC. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_000920:3-22. **Detection Rate:** Northern European >99%.

Rhizomelic Chondrodysplasia Punctata Type 1 - Gene: PEX7. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000288:1-10. Detection Rate: Northern European >99%.

**RTEL1-related Disorders** - Gene: RTEL1. Autosomal Recessive. Sequencing with copy number analysis. **Exons:** NM\_032957:2-35. **Detection Rate:** Northern European >99%.

Salla Disease - Gene: SLC17A5. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_012434:1-11. Detection Rate: Northern European 98%.

Sandhoff Disease - Gene: HEXB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000521:1-14. Detection Rate: Northern European >99%.

Short-chain Acyl-CoA Dehydrogenase Deficiency - Gene: ACADS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000017:1-10. Detection Rate: Northern European >99%.

Sjogren-Larsson Syndrome - Gene: ALDH3A2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000382:1-10. Detection Rate: Northern European 96%.

SLC26A2-related Disorders - Gene: SLC26A2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000112:2-3. Detection Rate: Northern European >99%.

Smith-Lemli-Opitz Syndrome - Gene: DHCR7. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001360:3-9. Detection Rate: Northern European >99%.

Spastic Paraplegia Type 15 - Gene: ZFYVE26. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_015346:2-42. Detection Rate: Northern European >99%.

Spinal Muscular Atrophy - Gene: SMN1. Autosomal Recessive. Spinal muscular atrophy. Variant (1): SMN1 copy number. Detection Rate: Northern European 95%. Spondylothoracic Dysostosis - Gene: MESP2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001039958:1-2. Detection Rate: Northern European >99%.

TGM1-related Autosomal Recessive Congenital Ichthyosis - Gene: TGM1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000359:2-15. Detection Rate: Northern European >99%.

**TPP1-related Neuronal Ceroid Lipofuscinosis** - Gene: TPP1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000391:1-13. Detection Rate: Northern European >99%.

Tyrosine Hydroxylase Deficiency - Gene: TH. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_199292:1-14. Detection Rate: Northern European >99%.

Tyrosinemia Type I - Gene: FAH. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000137:1-14. Detection Rate: Northern European >99%.

Tyrosinemia Type II - Gene: TAT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000353:2-12. Detection Rate: Northern European >99%.

**USH1C-related Disorders** - Gene: USH1C. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_005709:1-21. Detection Rate: Northern European >99%.

USH2A-related Disorders - Gene: USH2A. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_206933:2-72. Detection Rate: Northern European 94%.

Usher Syndrome Type 3 - Gene: CLRN1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_174878:1-3. Detection Rate: Northern European >99%.

Very-long-chain Acyl-CoA Dehydrogenase Deficiency - Gene: ACADVL. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000018:1-20. Detection Rate: Northern European >99%.



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Wilson Disease - Gene: ATP7B. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000053:1-21. Detection Rate: Northern European >99%.

X-linked Adrenoleukodystrophy - Gene: ABCD1. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000033:1-6. Detection Rate: Northern European 77%.

X-linked Alport Syndrome - Gene: COL4A5. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000495:1-51. Detection Rate: Northern European 95%.

X-linked Congenital Adrenal Hypoplasia - Gene: NR0B1. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000475:1-2. Detection Rate: Northern European 99%.

X-linked Juvenile Retinoschisis - Gene: RS1. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000330:1-6. Detection Rate: Northern European 98%.

X-linked Myotubular Myopathy - Gene: MTM1. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000252:2-15. Detection Rate: Northern European 98%.

X-linked Severe Combined Immunodeficiency - Gene: IL2RG. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000206:1-8. Detection Rate: Northern European >99%.

Xeroderma Pigmentosum Group A - Gene: XPA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000380:1-6. Detection Rate: Northern European >99%.

Xeroderma Pigmentosum Group C - Gene: XPC. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_004628:1-16. Detection Rate: Northern European 97%.



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# **Risk Calculations**

Below are the risk calculations for all conditions tested. Since negative results do not completely rule out the possibility of being a carrier, the **residual risk** represents the patient's post-test likelihood of being a carrier and the **reproductive risk** represents the likelihood the patient's future children could inherit each disease. These risks are inherent to all carrier screening tests, may vary by ethnicity, are predicated on a negative family history and are present even after a negative test result. Inaccurate reporting of ethnicity may cause errors in risk calculation. The reproductive risk presented is based on a hypothetical pairing with a partner of the same ethnic group.

†Indicates a positive result. See the full clinical report for interpretation and details.

Disease	DONOR 12578 Residual Risk	Reproductive Risk
11-beta-hydroxylase-deficient Congenital Adrenal Hyperplasia	1 in 3,800	< 1 in 1,000,000
6-pyruvoyl-tetrahydropterin Synthase Deficiency	< 1 in 50,000	< 1 in 1,000,000
ABCC8-related Familial Hyperinsulinism	1 in 17,000	< 1 in 1,000,000
Adenosine Deaminase Deficiency	1 in 22,000	< 1 in 1,000,000
Alpha Thalassemia	Alpha globin status: aa/aa.	Not calculated
Alpha-mannosidosis	1 in 35,000	< 1 in 1,000,000
Alpha-mannosidosis	1 in 45,000	< 1 in 1,000,000
Alstrom Syndrome	< 1 in 50,000	< 1 in 1,000,000
AMT-related Glycine Encephalopathy	1 in 22,000	< 1 in 1,000,000
Andermann Syndrome	< 1 in 50,000	< 1 in 1,000,000
Argininemia	< 1 in 17,000	< 1 in 1,000,000
5	1 in 13,000	< 1 in 1,000,000
Argininosuccinic Aciduria	< 1 in 50,000	
Aspartylglucosaminuria Ataxia with Vitamin E Deficiency	< 1 in 50,000	< 1 in 1,000,000
,		< 1 in 1,000,000
Ataxia-telangiectasia	1 in 11,000	< 1 in 1,000,000 1 in 600,000
ATP7A-related Disorders	< 1 in 1,000,000	
Autoimmune Polyglandular Syndrome Type 1	1 in 15,000	< 1 in 1,000,000
Autosomal Recessive Osteopetrosis Type 1	1 in 35,000	< 1 in 1,000,000
Autosomal Recessive Polycystic Kidney Disease, PKHD1-related	NM_138694.3(PKHD1):c.10637delT(aka V3546Afs*22) heterozygote <sup>†</sup>	1 in 330
Autosomal Recessive Spastic Ataxia of Charlevoix-Saguenay	< 1 in 44,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS1-related	1 in 32,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS10-related	1 in 42,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS12-related	< 1 in 50,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS2-related	< 1 in 50,000	< 1 in 1,000,000
BCS1L-related Disorders	< 1 in 50,000	< 1 in 1,000,000
Beta-sarcoglycanopathy	1 in 39,000	< 1 in 1,000,000
Biotinidase Deficiency	NM_000060.2(BTD):c.1330G>C(D444H) heterozygote <sup>†</sup>	1 in 510
Bloom Syndrome	< 1 in 50,000	< 1 in 1,000,000
Calpainopathy	1 in 13,000	< 1 in 1,000,000
Canavan Disease	1 in 9,700	< 1 in 1,000,000
Carbamoylphosphate Synthetase I Deficiency	< 1 in 57,000	< 1 in 1,000,000
Carnitine Palmitoyltransferase IA Deficiency	< 1 in 50,000	< 1 in 1,000,000
Carnitine Palmitoyltransferase II Deficiency	1 in 25,000	< 1 in 1,000,000
Cartilage-hair Hypoplasia	< 1 in 50,000	< 1 in 1,000,000
Cerebrotendinous Xanthomatosis	1 in 11,000	< 1 in 1,000,000
Citrullinemia Type 1	1 in 14,000	< 1 in 1,000,000
CLN3-related Neuronal Ceroid Lipofuscinosis	1 in 8,600	< 1 in 1,000,000
CLN5-related Neuronal Ceroid Lipofuscinosis	< 1 in 50,000	< 1 in 1,000,000
CLN6-related Neuronal Ceroid Lipofuscinosis	1 in 43,000	< 1 in 1,000,000
CLN8-related Neuronal Ceroid Lipofuscinosis	< 1 in 50,000	< 1 in 1,000,000
Cohen Syndrome	< 1 in 15,000	< 1 in 1,000,000
COL4A3-related Alport Syndrome	1 in 6,200	< 1 in 1,000,000
COL4A4-related Alport Syndrome	1 in 12,000	< 1 in 1,000,000
Combined Pituitary Hormone Deficiency, PROP1-related	1 in 6,100	< 1 in 1,000,000
Congenital Adrenal Hyperplasia, CYP21A2-related	1 in 1,300	1 in 280,000
Congenital Disorder of Glycosylation Type la	1 in 16,000	< 1 in 1,000,000
Congenital Disorder of Glycosylation Type Ic	< 1 in 50,000	< 1 in 1,000,000
Congenital Disorder of Glycosylation, MPI-related	< 1 in 50,000	< 1 in 1,000,000



MALE DONOR 12578 DOB: Ethnicity: Northern European Barcode: 11004512620229 FEMALE

N/A

Disease	DONOR 12578	Donroductivo Pielo
	Residual Risk	Reproductive Risk
Costeff Optic Atrophy Syndrome	< 1 in 50,000 F508del heterozygote <sup>†</sup>	< 1 in 1,000,000 1 in 120
Cystic Fibrosis	1 in 22,000	
Cystinosis D bifunctional Protain Deficiency	1 in 9,000	< 1 in 1,000,000
D-bifunctional Protein Deficiency Delta-sarcoglycanopathy	< 1 in 40,000	< 1 in 1,000,000 < 1 in 1,000,000
Dihydrolipoamide Dehydrogenase Deficiency	< 1 in 50,000	< 1 in 1,000,000
Dysferlinopathy	1 in 11,000	< 1 in 1,000,000
Dystrophinopathy (Including Duchenne/Becker Muscular Dystrophy)	Not calculated	Not calculated
ERCC6-related Disorders	1 in 26,000	< 1 in 1,000,000
ERCC8-related Disorders	< 1 in 9,900	< 1 in 1,000,000
EVC-related Ellis-van Creveld Syndrome	1 in 7,500	< 1 in 1,000,000
EVC2-related Ellis-van Creveld Syndrome	<pre>&lt; 1 in 50,000</pre>	< 1 in 1,000,000
Fabry Disease	< 1 in 1,000,000 <	1 in 80,000
Familial Dysautonomia	< 1 in 50,000	< 1 in 1,000,000
Familial Mediterranean Fever	< 1 in 50,000	< 1 in 1,000,000
Fanconi Anemia Complementation Group A	1 in 2,800	< 1 in 1,000,000
Fanconi Anemia, FANCC-related	<pre>&lt; 1 in 50,000</pre>	< 1 in 1,000,000
FKRP-related Disorders	1 in 16,000	< 1 in 1,000,000
FKTN-related Disorders	<pre>&lt; 1 in 50,000</pre>	< 1 in 1,000,000
Galactokinase Deficiency	1 in 10,000	< 1 in 1,000,000
Galactosemia	1 in 8,600	< 1 in 1,000,000
Gamma-sarcoglycanopathy	1 in 3,000	< 1 in 1,000,000
Gaucher Disease	1 in 260	1 in 110,000
GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness	1 in 2,500	1 in 260,000
GLB1-related Disorders	1 in 19,000	< 1 in 1,000,000
GLDC-related Glycine Encephalopathy	1 in 2,800	< 1 in 1,000,000
Glutaric Acidemia, GCDH-related	1 in 16,000	< 1 in 1,000,000
Glycogen Storage Disease Type la	1 in 18,000	< 1 in 1,000,000
Glycogen Storage Disease Type Ib	1 in 35,000	< 1 in 1,000,000
Glycogen Storage Disease Type III	1 in 16,000	< 1 in 1,000,000
GNE Myopathy	1 in 23,000	< 1 in 1,000,000
GNPTAB-related Disorders	1 in 32,000	< 1 in 1,000,000
HADHA-related Disorders	1 in 20,000	< 1 in 1,000,000
Hb Beta Chain-related Hemoglobinopathy (Including Beta Thalassemia and Si	ckle Cell	1 : 200 000
Disease)	1 in 3,100	1 in 390,000
Hereditary Fructose Intolerance	1 in 7,900	< 1 in 1,000,000
Herlitz Junctional Epidermolysis Bullosa, LAMB3-related	< 1 in 50,000	< 1 in 1,000,000
Hexosaminidase A Deficiency (Including Tay-Sachs Disease)	1 in 30,000	< 1 in 1,000,000
HMG-CoA Lyase Deficiency	< 1 in 33,000	< 1 in 1,000,000
Holocarboxylase Synthetase Deficiency	1 in 15,000	< 1 in 1,000,000
Homocystinuria, CBS-related	1 in 9,400	< 1 in 1,000,000
Hydrolethalus Syndrome	< 1 in 50,000	< 1 in 1,000,000
Hypophosphatasia	1 in 27,000	< 1 in 1,000,000
Isovaleric Acidemia	1 in 32,000	< 1 in 1,000,000
Joubert Syndrome 2	< 1 in 50,000	< 1 in 1,000,000
Junctional Epidermolysis Bullosa, LAMA3-related	< 1 in 50,000	< 1 in 1,000,000
Junctional Epidermolysis Bullosa, LAMC2-related	< 1 in 50,000	< 1 in 1,000,000
KCNJ11-related Familial Hyperinsulinism	< 1 in 50,000	< 1 in 1,000,000
Krabbe Disease	1 in 14,000	< 1 in 1,000,000
LAMA2-related Muscular Dystrophy	1 in 34,000	< 1 in 1,000,000
Leigh Syndrome, French-Canadian Type	< 1 in 50,000	< 1 in 1,000,000
Lipoid Congenital Adrenal Hyperplasia	< 1 in 50,000	< 1 in 1,000,000
Lysosomal Acid Lipase Deficiency	1 in 18,000	< 1 in 1,000,000
Maple Syrup Urine Disease Type Ia	1 in 42,000	< 1 in 1,000,000
Maple Syrup Urine Disease Type Ib	1 in 39,000	< 1 in 1,000,000
Maple Syrup Urine Disease Type II	1 in 13,000	< 1 in 1,000,000
Medium Chain Acyl-CoA Dehydrogenase Deficiency	1 in 4,400	1 in 790,000
Megalencephalic Leukoencephalopathy with Subcortical Cysts	< 1 in 50,000	< 1 in 1,000,000
Metachromatic Leukodystrophy	1 in 16,000	< 1 in 1,000,000
Methylmalonic Acidemia, cblA Type	< 1 in 50,000	< 1 in 1,000,000
Methylmalonic Acidemia, cblB Type	1 in 48,000	< 1 in 1,000,000
Methylmalonic Aciduria and Homocystinuria, cblC Type	1 in 16,000	< 1 in 1,000,000



MALE DONOR 12578 DOB: Ethnicity: Northern European Barcode: 11004512620229 FEMALE

N/A

Disease	DONOR 12578 Residual Risk	Reproductive Risk
MKS1-related Disorders	< 1 in 50,000	< 1 in 1,000,000
Mucolipidosis III Gamma	< 1 in 50,000	< 1 in 1,000,000
Aucolipidosis IV	< 1 in 50,000	< 1 in 1,000,000
Nucopolysaccharidosis Type I	1 in 16,000	< 1 in 1,000,000
Nucopolysaccharidosis Type II	1 in 600,000	1 in 150,000
Nucopolysaccharidosis Type IIIA	1 in 12,000	< 1 in 1,000,000
Nucopolysaccharidosis Type IIIB	1 in 25,000	< 1 in 1,000,000
Nucopolysaccharidosis Type IIIC	1 in 37,000	< 1 in 1,000,000
MUT-related Methylmalonic Acidemia	1 in 26,000	< 1 in 1,000,000
MYO7A-related Disorders	1 in 15,000	< 1 in 1,000,000
NEB-related Nemaline Myopathy	1 in 1,200	1 in 400,000
Nephrotic Syndrome, NPHS1-related	< 1 in 50,000	< 1 in 1,000,000
Nephrotic Syndrome, NPHS2-related	1 in 35,000	< 1 in 1,000,000
Niemann-Pick Disease Type C1	1 in 19,000	< 1 in 1,000,000
Niemann-Pick Disease Type C2	< 1 in 50,000	< 1 in 1,000,000
Niemann-Pick Disease, SMPD1-related	1 in 25,000	< 1 in 1,000,000
Nijmegen Breakage Syndrome	1 in 16,000	< 1 in 1,000,000
Ornithine Transcarbamylase Deficiency	< 1 in 1,000,000	1 in 140,000
PCCA-related Propionic Acidemia	1 in 4,200	< 1 in 1,000,000
PCCB-related Propionic Acidemia	1 in 22,000	< 1 in 1,000,000
PCDH15-related Disorders	1 in 3,300	< 1 in 1,000,000
Pendred Syndrome	1 in 8,200	< 1 in 1,000,000
Peroxisome Biogenesis Disorder Type 1	1 in 16,000	< 1 in 1,000,000
Peroxisome Biogenesis Disorder Type 3	1 in 44,000	< 1 in 1,000,000
Peroxisome Biogenesis Disorder Type 4	1 in 9,300	< 1 in 1,000,000
Peroxisome Biogenesis Disorder Type 5	< 1 in 71,000	< 1 in 1,000,000
Peroxisome Biogenesis Disorder Type 6	< 1 in 50,000	< 1 in 1,000,000
Phenylalanine Hydroxylase Deficiency	1 in 4,800	1 in 940,000
POMGNT-related Disorders	< 1 in 12,000	< 1 in 1,000,000
Pompe Disease	1 in 4,000	< 1 in 1,000,000
PPT1-related Neuronal Ceroid Lipofuscinosis	1 in 7,700	< 1 in 1,000,000
Primary Carnitine Deficiency	1 in 11,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 1	1 in 17,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 2	< 1 in 50,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 3	1 in 13,000	< 1 in 1,000,000
Pycnodysostosis	1 in 43,000	< 1 in 1,000,000
Pyruvate Carboxylase Deficiency	1 in 25,000	< 1 in 1,000,000
Rhizomelic Chondrodysplasia Punctata Type 1	1 in 16,000	< 1 in 1,000,000
RTEL1-related Disorders	< 1 in 50,000	< 1 in 1,000,000
Salla Disease	< 1 in 30,000	< 1 in 1,000,000
Sandhoff Disease	1 in 32,000	< 1 in 1,000,000
Short-chain Acyl-CoA Dehydrogenase Deficiency	1 in 11,000	< 1 in 1,000,000
Sjogren-Larsson Syndrome	< 1 in 12,000	< 1 in 1,000,000
SLC26A2-related Disorders	1 in 16,000	< 1 in 1,000,000
Smith-Lemli-Opitz Syndrome	1 in 9,400	< 1 in 1,000,000
Spastic Paraplegia Type 15	< 1 in 50,000	< 1 in 1,000,000
	Negative for g.27134T>G SNP	
Spinal Muscular Atrophy	SMN1: 2 copies	1 in 110,000
	1 in 770	
Spondylothoracic Dysostosis	< 1 in 50,000	< 1 in 1,000,000
TGM1-related Autosomal Recessive Congenital Ichthyosis	1 in 22,000	< 1 in 1,000,000
TPP1-related Neuronal Ceroid Lipofuscinosis	1 in 30,000	< 1 in 1,000,000
Tyrosine Hydroxylase Deficiency	< 1 in 50,000	< 1 in 1,000,000
Tyrosinemia Type I	1 in 16,000	< 1 in 1,000,000
Tyrosinemia Type II	1 in 25,000	< 1 in 1,000,000
USH1C-related Disorders	1 in 35,000	< 1 in 1,000,000
JSH2A-related Disorders	1 in 2,200	< 1 in 1,000,000
Jsher Syndrome Type 3	1 in 41,000	< 1 in 1,000,000
Very-long-chain Acyl-CoA Dehydrogenase Deficiency	1 in 18,000	< 1 in 1,000,000
Wilson Disease	1 in 8,600	< 1 in 1,000,000
X-linked Adrenoleukodystrophy	1 in 90,000	1 in 42,000
X-linked Alport Syndrome	Not calculated	Not calculated



MALE DONOR 12578 DOB: Ethnicity: Northern European Barcode: 11004512620229 FEMALE N/A

Disease	DONOR 12578 Residual Risk	Reproductive Risk
X-linked Congenital Adrenal Hypoplasia	< 1 in 1,000,000	< 1 in 1,000,000
X-linked Juvenile Retinoschisis	< 1 in 1,000,000	1 in 40,000
X-linked Myotubular Myopathy	Not calculated	Not calculated
X-linked Severe Combined Immunodeficiency	< 1 in 1,000,000	1 in 200,000
Xeroderma Pigmentosum Group A	< 1 in 50,000	< 1 in 1,000,000
Xeroderma Pigmentosum Group C	1 in 7,300	< 1 in 1,000,000



**Client/Sending Facility:** Seattle Sperm Bank

4915 25th Ave Ne Ste 204 SEATTLE, WA 98105 Ph: (206)588-1484 Fax: (206) 466-4696 WAB-55

<b>LCLS Specimen Number:</b> Patient Name:	056-129-1095-0 12578, DONOR	Account Number: Ordering Physician:	
Date of Birth:		Specimen Type:	BLOOD
Gender:	Μ	Client Reference:	
Patient ID:		Date Collected:	02/25/2020
Lab Number:	DCGWA20-714 L	Date Received:	02/26/2020
Indications:	DONOR	Date Reported:	03/10/2020

#### Test: Chromosome, Blood, Routine

Cells Counted: 13 Cells Analyzed: 7 Cells Karyotyped: 2 Band Resolution: 500

#### **CYTOGENETIC RESULT: 46,XY**

#### INTERPRETATION: NORMAL MALE KARYOTYPE

Cytogenetic analysis of PHA stimulated cultures has revealed a MALE karyotype with an apparently normal GTW banding pattern in all cells observed.

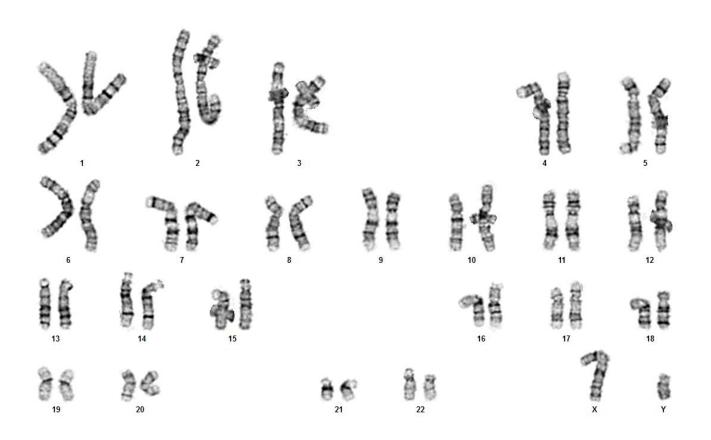
This result does not exclude the possibility of subtle rearrangements below the resolution of cytogenetics or congenital anomalies due to other etiologies.



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LCLS Specimen Number:	056-129-1095-0	Account Number:	46857540
Patient Name:	12578, DONOR	Ordering Physician:	J OLLIFFE
Date of Birth:		Specimen Type:	BLOOD
Gender:	М	Client Reference:	
Patient ID:		Date Collected:	02/25/2020
Lab Number:	DCGWA20-714 L	Date Received:	02/26/2020



Page 2 of 3



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LCLS Specimen Number: 056-129-1095-0 Patient Name: 12578, DONOR Date of Birth: Gender: M Patient ID: Lab Number: DCGWA20-714 L Account Number:46857540Ordering Physician:JOLLIFFESpecimen Type:BLOODClient Reference:02/25/2020Date Collected:02/26/2020

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Hiba Risheg, PhD., FACMG

Daniel Toweill, MD Medical Director Stuart Schwartz, PhD National Director of Cytogenetics

Technical component performed by Laboratory Corporation of America Holdings, National Director of Cytoge 550 17th Ave Ste 300, Seattle, WA, 98122-5789 (206) 861-7000 Professional Component performed by LabCorp CLIA 50D0630157, 550 17th Ave. Suite 200, Seattle WA 98122-5789. Medical Director, Daniel Toweill, MD This document contains private and confidential health information **protected by state and federal law**.