



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: 02/07/2020

MALE  
**DONOR 14084**  
 DOB: [REDACTED]  
 Ethnicity: East Asian  
 Sample Type: EDTA Blood  
 Date of Collection: 01/27/2020  
 Date Received: 01/29/2020  
 Date Tested: 02/07/2020  
 Barcode: 11004512629323  
 Accession ID:  
 CSLXFA9A93WEGVN  
 Indication: Egg or sperm donor

FEMALE  
 N/A

# Foresight® Carrier Screen

**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 14084	Partner
Panel Information	Foresight Carrier Screen Universal Panel Fundamental Plus Panel Fundamental Panel <b>(175 conditions tested)</b>	N/A
<b>POSITIVE: CARRIER</b> GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness  Reproductive Risk: 1 in 140 Inheritance: Autosomal Recessive	<b>+</b> <b>CARRIER*</b> NM_004004.5(GJB2):c.109G>A (V37I) 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> Argininemia  Reproductive Risk: 1 in 2,000 Inheritance: Autosomal Recessive	<b>+</b> <b>CARRIER*</b> NM_000045.3(ARG1):c.703G>A (G235R) 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> Alpha Thalassemia  Reproductive Risk: Not Calculated Inheritance: Autosomal Recessive	<b>+</b> <b>CARRIER*</b> -alpha3.7 [chr16:g.(?_226678)_ (227520_?)del] heterozygote Alpha globin status: -a/aa.	Reproductive risk can be more accurately assessed after carrier screening of the partner. 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 12.

## 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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- 
- 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.

**POSITIVE: CARRIER**

# GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness

**Reproductive risk: 1 in 140**  
 Risk before testing: 1 in 4,600

**Gene:** GJB2 | **Inheritance Pattern:** Autosomal Recessive

Patient	DONOR 14084	No partner tested
<b>Result</b>	Carrier	N/A
<b>Variant(s)</b>	NM_004004.5(GJB2):c.109G>A(V37I) heterozygote	N/A
<b>Methodology</b>	Sequencing with copy number analysis	N/A
<b>Interpretation</b>	This individual is a carrier of GJB2-related DFNB1 nonsyndromic hearing loss and deafness. Carriers generally do not experience symptoms. V37I is typically associated with bilateral mild to moderate and slowly progressive hearing loss.	N/A
<b>Detection rate</b>	>99%	N/A
<b>Exons tested</b>	NM_004004:1-2.	N/A

## What Is GJB2-Related DFNB1 Nonsyndromic Hearing Loss and Deafness?

DFNB1 nonsyndromic hearing loss and deafness is an inherited condition in which an individual has mild to severe hearing loss, usually, from birth. It is caused by mutations in *GJB2* (which encodes the protein connexin 26) and *GJB6* (which encodes connexin 30). The condition does not typically worsen over time, but in some cases may be slowly progressive. The word "nonsyndromic" refers to the fact that there are no other symptoms or systems of the body involved with the disease. Unlike some other forms of hearing loss, DFNB1 nonsyndromic hearing loss and deafness does not affect balance or movement. The degree of hearing loss is difficult to predict based on which genetic mutation one has. Even if members of the same family are affected by DFNB1 nonsyndromic hearing loss and deafness, the degree of hearing loss may vary among them.

## How Common Is GJB2-Related DFNB1 Nonsyndromic Hearing Loss and Deafness?

In the United States, the United Kingdom, France, Australia, and New Zealand, approximately 14 in 100,000 individuals have DFNB1 nonsyndromic hearing loss and deafness. This may be an underestimate as individuals with a mild presentation may not be diagnosed. Roughly 1 in 33 Caucasian individuals are carriers of the mutation that causes the condition.

While this condition is most recognized in the Caucasian population, it has also been observed in other ethnicities.

## How Is GJB2-Related DFNB1 Nonsyndromic Hearing Loss and Deafness Treated?

Individuals with DFNB1 nonsyndromic hearing loss and deafness may show improvement by using hearing aids. For those with profound deafness, cochlear implants may also be helpful. They may also want to consider enrolling in an educational program for the hearing impaired.



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## What is the Prognosis for an Individual with GJB2-Related DFNB1 Nonsyndromic Hearing Loss and Deafness?

While an individual with GJB2-related DFNB1 nonsyndromic hearing loss and deafness will have mild to severe hearing loss, it does not affect lifespan and does not affect any other part of the body.

## POSITIVE: CARRIER

# Argininemia

**Reproductive risk: 1 in 2,000**  
 Risk before testing: < 1 in 1,000,000

**Gene:** ARG1 | **Inheritance Pattern:** Autosomal Recessive

<b>Patient</b>	DONOR 14084	<b>No partner tested</b>
<b>Result</b>	Carrier	N/A
<b>Variant(s)</b>	NM_000045.3(ARG1):c.703G>A(G235R) heterozygote †	N/A
<b>Methodology</b>	Sequencing with copy number analysis	N/A
<b>Interpretation</b>	This individual is a carrier of argininemia. Carriers generally do not experience symptoms.	N/A
<b>Detection rate</b>	97%	N/A
<b>Exons tested</b>	NM_000045:1-8.	N/A

†Likely to have a negative impact on gene function.

## What is Argininemia?

Argininemia belongs to a group of disorders called urea cycle disorders. Individuals with argininemia are missing an important enzyme called arginase. Lack of this enzyme leads to high levels of arginine in the blood.

Most affected individuals present with symptoms between the ages of 1 and 3 years, although cases of earlier onset have been reported. Symptoms typically include poor growth, stiff muscles (spasticity), seizures, and intellectual disability including loss of skills. Some individuals may also have microcephaly (small head size), liver cirrhosis, problems with balance and coordination, or episodes of hyperammonemia (high levels of ammonia in the blood). Hyperammonemia may cause additional complications like lethargy or vomiting.

## How common is Argininemia?

Argininemia is a rare condition that occurs in about 1 in 350,000 to 1 in 1,000,000 births.

## How is Argininemia treated?

People affected with argininemia will be monitored by a metabolic specialist. Appropriate treatment can lower the risk of hyperammonemic crises and may even reverse some of the neurological symptoms associated with argininemia. Treatment includes adherence to a protein-restricted diet, supplementation of necessary amino acids, and the use of medications to lower the levels of arginine in the blood. Seizures can be treated with medication, but valproic acid should be avoided. Liver transplantation may be considered if hyperammonemia cannot be otherwise controlled. During a severe hyperammonemic crisis, treatment is given to quickly reduce ammonia levels in the blood to prevent brain damage. Such treatment will likely take place in the hospital.



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## What is the prognosis for a person with Argininemia?

Without treatment, individuals will experience poor growth, stiff muscles, developmental delay, and intellectual disability. Lifespan is expected to be normal in most affected individuals, but some may die early from complications of a hyperammonemic crisis. With treatment, some neurological symptoms may be reversed and the risk of hyperammonemic crises may be reduced over the course of the individual's life, thereby improving outcomes.

## POSITIVE: CARRIER

# Alpha Thalassemia

Genes: HBA1, HBA2 | Inheritance Pattern: Autosomal Recessive

<b>Patient</b>	<b>DONOR 14084</b>	<b>No partner tested</b>
<b>Result</b>	⊕ Carrier	N/A
<b>Variants(s)</b>	-alpha3.7 [chr16:g.(?_226678)_(227520_?)del] heterozygote	N/A
<b>Methodology</b>	Analysis of homologous regions	N/A
<b>Interpretation</b>	This individual is a carrier of alpha thalassemia. Carriers do not experience symptoms, but may have hematologic abnormalities. -alpha3.7 is classified as an alpha+ mutation. Based on this result, the patient's alpha globin status is -a/aa (carrier), where "-" indicates a deleted or nonfunctional alpha globin gene.	N/A
<b>Detection rate</b>	90%	N/A
<b>Variants tested</b>	-(alpha)20.5, --BRIT, --MEDI, --MEDII, --SEA, --THAI or --FIL, -alpha3.7, -alpha4.2, HBA1+HBA2 deletion, Hb Constant Spring, anti3.7, anti4.2, del HS-40.	N/A

### REPRODUCTIVE RISK SUMMARY

Reproductive risk can be more accurately assessed after carrier screening of the partner. Genetic counseling is recommended to review results and risks in further detail.

## What is Alpha Thalassemia?

Alpha thalassemia is a blood disorder that affects hemoglobin, a major component of red blood cells that carries oxygen in the body. Hemoglobin is a protein complex made up of two different chains. There are many forms of hemoglobin, but the primary type is made up of alpha chains and beta chains. Alpha thalassemia is caused by mutations involving the genes, *HBA1* and *HBA2*, that code for the alpha chains.

Most individuals have two functional pairs or four functional copies of the alpha globin genes (one copy each of *HBA1* and *HBA2* on both chromosomes).

Carriers generally have either two or three functional alpha globin genes and do not have any symptoms.

- **Three functional alpha globin genes, silent carrier:** These individuals are typically known as silent carriers, because they do not have any symptoms or abnormalities on a complete blood count. This status results from the presence of an alpha+ mutation (mutation that eliminates the function/presence of one copy of an alpha globin gene).
- **Two functional alpha globin genes, carrier:** These carriers generally have mild anemia characterized by hypochromic (pale) and microcytic (small) red blood cells, which can be measured on a complete blood count. However, they usually do not have any symptoms of the disease (note exception below). Carrier status may result from the presence of two alpha+ mutations (eliminates function/presence of one copy of an alpha globin gene on each chromosome) or an alpha0 mutation (eliminates function/presence of both copies of the alpha globin genes on one chromosome).

Exception: There have been reports of individuals with two copies of certain types of point mutations who have a diagnosis of hemoglobin H disease with variable symptoms. One example of this is when individuals have two copies of the hemoglobin Constant Spring mutation, which is common in the Southeast Asian population.

Disease symptoms most typically occur if an individual has one or zero functional alpha globin genes.

- **One functional alpha globin gene, hemoglobin H disease:** This form of alpha thalassemia is very variable. Disease severity ranges from asymptomatic to moderate microcytic/hypochromic anemia with the possibility of jaundice (yellowing of the skin or eyes), enlarged spleen, bone deformities, fatigue, and other minor complications.
- **Zero functional alpha globin genes, hemoglobin Bart syndrome:** Individuals who have no functional copies or are missing all four copies of the associated genes almost always have this fatal form of alpha thalassemia. Hb Bart syndrome is generally associated with death *in utero* due to the buildup of excess fluid in the body and tissues (hydrops fetalis). Signs and symptoms in the newborn period can include severe anemia, hepatosplenomegaly (enlarged liver and spleen), and birth defects of the heart, urinary system, and genitalia. Most babies with this condition are stillborn or die soon after birth.

## How common is Alpha Thalassemia?

The carrier frequency and incidence of alpha thalassemia vary by the type and population. Carrier frequency of this condition is reported to be the highest in individuals of Southeast Asian, African, West Indian, and Mediterranean descent. In 2010, the estimated number of worldwide annual births of patients with Hb H disease was 9,568 and with Hb Bart syndrome was 5,183. Therefore, the worldwide birth prevalence of Hb H disease and Hb Bart's hydrops is estimated at ~1/14500 and ~1/27000, respectively; however, for Hb Bart's hydrops, this is likely to be an underestimate because most at-risk couples are not currently identified.

## How is Alpha Thalassemia treated?

Alpha thalassemia carrier status does not necessitate treatment. Treatment for hemoglobin H disease varies based on the severity of the symptoms. For many individuals, blood transfusions are given during crises, which are episodic and usually precipitated by environmental stressors, like oxidant medications or fever. Individuals with more severe symptoms may require regular blood transfusions, folic acid supplementation, prophylactic antibiotics, iron chelation therapy (removal of excess iron from the body), and possible hemoglobin F-enhancing agents and splenectomy.

Extremely rare cases of survivors with hemoglobin Bart syndrome have been reported when fetal blood transfusions were given, followed by regular treatments similar to those who have hemoglobin H disease. Treatments or surgical correction of potential birth defects may also be available. However, there is a high risk for intellectual and physical disability in these rare survivors. These individuals may be candidates for hematopoietic stem cell transplantation.



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FEMALE  
N/A

## What is the prognosis for a person with Alpha Thalassemia?

Because hemoglobin H disease can be variable, prognosis ultimately depends on the severity of the disease. Mild disease may be manageable with little effect on daily life. However, more severe disease will necessitate frequent and regular therapy, and may be associated with a shortened lifespan. Untreated, the prognosis is poor with a shortened lifespan of up to age 5 years. However, when treated, individuals with hemoglobin H disease have a lifespan that approaches normal.

Hemoglobin Bart syndrome is the most severe clinical condition related to alpha thalassemia, and death may occur *in utero* or in the newborn period. Of note, there may also be maternal complications during pregnancy if the fetus has hemoglobin Bart syndrome. These complications include preeclampsia (high blood pressure, fluid build-up/swelling, protein in the urine), polyhydramnios (excessive amniotic fluid) or oligohydramnios (reduced amniotic fluid), hemorrhage, and premature delivery.

## Methods and Limitations

**DONOR 14084 [Foresight Carrier Screen]:** Sequencing with copy number analysis, spinal muscular atrophy, and analysis of homologous regions.

### 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. 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-D13S1830)* 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-hydroxylase-deficient 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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## 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 hemoglobinopathies, 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.

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### SENIOR LABORATORY DIRECTOR

Jack Ji, PhD, FACMG

Report content approved by Jack Ji, PhD, FACMG on Feb 10, 2020

# 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:** East Asian 94%.
- 6-pyruvoyl-tetrahydropterin Synthase Deficiency** - Gene: PTS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000317:1-6. **Detection Rate:** East Asian >99%.
- ABCC8-related Familial Hyperinsulinism** - Gene: ABCC8. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000352:1-39. **Detection Rate:** East Asian >99%.
- Adenosine Deaminase Deficiency** - Gene: ADA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000022:1-12. **Detection Rate:** East Asian >99%.
- Alpha Thalassemia** - Genes: HBA1, HBA2. Autosomal Recessive. Analysis of homologous regions. Variants (13): -(alpha)20.5, --BRIT, --MEDI, --MEDII, --SEA, --THAI or --FIL, -alpha3.7, -alpha4.2, HBA1+HBA2 deletion, Hb Constant Spring, anti3.7, anti4.2, del HS-40. **Detection Rate:** East Asian 90%.
- Alpha-mannosidosis** - Gene: MAN2B1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000528:1-23. **Detection Rate:** East Asian >99%.
- Alpha-sarcoglycanopathy** - Gene: SGCA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000023:1-9. **Detection Rate:** East Asian >99%.
- Alstrom Syndrome** - Gene: ALMS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_015120:1-23. **Detection Rate:** East Asian >99%.
- AMT-related Glycine Encephalopathy** - Gene: AMT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000481:1-9. **Detection Rate:** East Asian >99%.
- Andermann Syndrome** - Gene: SLC12A6. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_133647:1-25. **Detection Rate:** East Asian >99%.
- Argininemia** - Gene: ARG1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000045:1-8. **Detection Rate:** East Asian 97%.
- Argininosuccinic Aciduria** - Gene: ASL. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001024943:1-16. **Detection Rate:** East Asian >99%.
- Aspartylglucosaminuria** - Gene: AGA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000027:1-9. **Detection Rate:** East Asian >99%.
- Ataxia with Vitamin E Deficiency** - Gene: TTPA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000370:1-5. **Detection Rate:** East Asian >99%.
- Ataxia-telangiectasia** - Gene: ATM. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000051:2-63. **Detection Rate:** East Asian >99%.
- ATP7A-related Disorders** - Gene: ATP7A. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000052:2-23. **Detection Rate:** East Asian 92%.
- Autoimmune Polyglandular Syndrome Type 1** - Gene: AIRE. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000383:1-14. **Detection Rate:** East Asian >99%.
- Autosomal Recessive Osteopetrosis Type 1** - Gene: TCIRG1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006019:2-20. **Detection Rate:** East Asian >99%.
- Autosomal Recessive Polycystic Kidney Disease, PKHD1-related** - Gene: PKHD1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_138694 2-67. **Detection Rate:** East Asian >99%.
- Autosomal Recessive Spastic Ataxia of Charlevoix-Saguenay** - Gene: SACS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_014363 2-10. **Detection Rate:** East Asian 99%.
- Bardet-Biedl Syndrome, BBS1-related** - Gene: BBS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_024649:1-17. **Detection Rate:** East Asian >99%.
- Bardet-Biedl Syndrome, BBS10-related** - Gene: BBS10. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_024685:1-2. **Detection Rate:** East Asian >99%.
- Bardet-Biedl Syndrome, BBS12-related** - Gene: BBS12. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_152618:2. **Detection Rate:** East Asian >99%.
- Bardet-Biedl Syndrome, BBS2-related** - Gene: BBS2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_031885:1-17. **Detection Rate:** East Asian >99%.
- BCS1L-related Disorders** - Gene: BCS1L. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_004328:3-9. **Detection Rate:** East Asian >99%.
- Beta-sarcoglycanopathy** - Gene: SGCB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000232:1-6. **Detection Rate:** East Asian >99%.
- Biotinidase Deficiency** - Gene: BTB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000060:1-4. **Detection Rate:** East Asian >99%.
- Bloom Syndrome** - Gene: BLM. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000057:2-22. **Detection Rate:** East Asian >99%.
- Calpainopathy** - Gene: CAPN3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000070:1-24. **Detection Rate:** East Asian >99%.
- Canavan Disease** - Gene: ASPA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000049:1-6. **Detection Rate:** East Asian 98%.
- Carbamoylphosphate Synthetase I Deficiency** - Gene: CPS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001875:1-38. **Detection Rate:** East Asian >99%.
- Carnitine Palmitoyltransferase IA Deficiency** - Gene: CPT1A. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001876:2-19. **Detection Rate:** East Asian >99%.
- Carnitine Palmitoyltransferase II Deficiency** - Gene: CPT2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000098:1-5. **Detection Rate:** East Asian >99%.
- Cartilage-hair Hypoplasia** - Gene: RMRP. Autosomal Recessive. Sequencing with copy number analysis. Exon: NR\_003051:1. **Detection Rate:** East Asian >99%.
- Cerebrotendinous Xanthomatosis** - Gene: CYP27A1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000784:1-9. **Detection Rate:** East Asian >99%.
- Citrullinemia Type 1** - Gene: ASS1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000050:3-16. **Detection Rate:** East Asian 86%.
- CLN3-related Neuronal Ceroid Lipofuscinosis** - Gene: CLN3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001042432 2-16. **Detection Rate:** East Asian >99%.
- CLN5-related Neuronal Ceroid Lipofuscinosis** - Gene: CLN5. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006493:1-4. **Detection Rate:** East Asian >99%.
- CLN6-related Neuronal Ceroid Lipofuscinosis** - Gene: CLN6. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_017882:1-7. **Detection Rate:** East Asian >99%.
- CLN8-related Neuronal Ceroid Lipofuscinosis** - Gene: CLN8. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_018941:2-3. **Detection Rate:** East Asian >99%.
- Cohen Syndrome** - Gene: VPS13B. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_017890:2-62. **Detection Rate:** East Asian 97%.
- COL4A3-related Alport Syndrome** - Gene: COL4A3. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000091:1-52. **Detection Rate:** East Asian 97%.
- COL4A4-related Alport Syndrome** - Gene: COL4A4. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000092:2-48. **Detection Rate:** East Asian 98%.
- Combined Pituitary Hormone Deficiency, PROP1-related** - Gene: PROP1. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_006261:1-3. **Detection Rate:** East Asian >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: East Asian 88%.

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

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

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

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

**Cystinosis** - Gene: CTNS. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_004937:3-12. Detection Rate: East Asian >99%.

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

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

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

**Dysferlinopathy** - Gene: DYSF. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_003494:1-55. Detection Rate: East Asian 98%.

**Dystrophinopathy (Including Duchenne/Becker Muscular Dystrophy)** - Gene: DMD. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_004006:1-79. Detection Rate: East Asian >99%.

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

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

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

**EVC2-related Ellis-van Creveld Syndrome** - Gene: EVC2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_147127:1-22. Detection Rate: East Asian >99%.

**Fabry Disease** - Gene: GLA. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000169:1-7. Detection Rate: East Asian 98%.

**Familial Dysautonomia** - Gene: IKBKAP. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_003640:2-37. Detection Rate: East Asian >99%.

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

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

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

**FKRP-related Disorders** - Gene: FKRP. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_024301:4. Detection Rate: East Asian >99%.

**FKTN-related Disorders** - Gene: FKTN. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001079802:3-11. Detection Rate: East Asian 10%.

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

**Galactosemia** - Gene: GALT. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000155:1-11. Detection Rate: East Asian >99%.

**Gamma-sarcoglycanopathy** - Gene: SGCG. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000231:2-8. Detection Rate: East Asian 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: East Asian 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: East Asian >99%.

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

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

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

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

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

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

**GNE Myopathy** - Gene: GNE. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001128227:1-12. Detection Rate: East Asian >99%.

**GNPTAB-related Disorders** - Gene: GNPTAB. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_024312:1-21. Detection Rate: East Asian 98%.

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

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

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

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

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

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

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

**Hydrolethalus Syndrome** - Gene: HYL51. Autosomal Recessive. Sequencing with copy number analysis. Exon: NM\_145014:4. Detection Rate: East Asian >99%.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Pompe Disease** - Gene: GAA. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_000152:2-20. **Detection Rate:** East Asian >99%.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Spinal Muscular Atrophy** - Gene: SMN1. Autosomal Recessive. Spinal muscular atrophy. Variant (1): SMN1 copy number. **Detection Rate:** East Asian 93%.

**Spondylothoracic Dysostosis** - Gene: MESP2. Autosomal Recessive. Sequencing with copy number analysis. Exons: NM\_001039958:1-2. **Detection Rate:** East Asian >99%.

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

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

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

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

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

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

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

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

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

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

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

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

**X-linked Congenital Adrenal Hypoplasia** - Gene: NROB1. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000475:1-2. **Detection Rate:** East Asian 99%.

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

**X-linked Myotubular Myopathy** - Gene: MTM1. X-linked Recessive. Sequencing with copy number analysis. Exons: NM\_000252:2-15. **Detection Rate:** East Asian 99%.

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

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

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

# 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 14084 Residual Risk	Reproductive Risk
11-beta-hydroxylase-deficient Congenital Adrenal Hyperplasia	1 in 3,300	< 1 in 1,000,000
6-pyruvoyl-tetrahydropterin Synthase Deficiency	1 in 35,000	< 1 in 1,000,000
ABCC8-related Familial Hyperinsulinism	1 in 14,000	< 1 in 1,000,000
Adenosine Deaminase Deficiency	1 in 39,000	< 1 in 1,000,000
Alpha Thalassemia	-alpha3.7 [chr16:g.(?_226678)_(227520_?)del] heterozygote † Alpha globin status: -a/aa.	Not calculated
Alpha-mannosidosis	1 in 35,000	< 1 in 1,000,000
Alpha-sarcoglycanopathy	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	NM_000045.3(ARG1):c.703G>A(G235R) heterozygote †	1 in 2,000
Argininosuccinic Aciduria	1 in 13,000	< 1 in 1,000,000
Aspartylglucosaminuria	< 1 in 50,000	< 1 in 1,000,000
Ataxia with Vitamin E Deficiency	< 1 in 50,000	< 1 in 1,000,000
Ataxia-telangiectasia	1 in 12,000	< 1 in 1,000,000
ATP7A-related Disorders	< 1 in 1,000,000	1 in 720,000
Autoimmune Polyglandular Syndrome Type 1	1 in 18,000	< 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	1 in 8,100	< 1 in 1,000,000
Autosomal Recessive Spastic Ataxia of Charlevoix-Saguenay	< 1 in 44,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS1-related	< 1 in 50,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS10-related	< 1 in 50,000	< 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	1 in 67,000	< 1 in 1,000,000
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 45,000	< 1 in 1,000,000
Carnitine Palmitoyltransferase IA Deficiency	< 1 in 50,000	< 1 in 1,000,000
Carnitine Palmitoyltransferase II Deficiency	1 in 31,000	< 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 700	1 in 270,000
CLN3-related Neuronal Ceroid Lipofuscinosis	1 in 13,000	< 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 50,000	< 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 11,000	< 1 in 1,000,000
COL4A4-related Alport Syndrome	1 in 21,000	< 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 550	1 in 140,000
Congenital Disorder of Glycosylation Type Ia	1 in 16,000	< 1 in 1,000,000
Congenital Disorder of Glycosylation Type Ic	< 1 in 50,000	< 1 in 1,000,000

Disease	DONOR 14084 Residual Risk	Reproductive Risk
Congenital Disorder of Glycosylation, MPI-related	< 1 in 50,000	< 1 in 1,000,000
Costeff Optic Atrophy Syndrome	< 1 in 50,000	< 1 in 1,000,000
Cystic Fibrosis	1 in 9,000	< 1 in 1,000,000
Cystinosis	1 in 22,000	< 1 in 1,000,000
D-bifunctional Protein Deficiency	1 in 9,000	< 1 in 1,000,000
Delta-sarcoglycanopathy	< 1 in 40,000	< 1 in 1,000,000
Dihydroipoamide 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 9,800	< 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	< 1 in 50,000	< 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 3,100	< 1 in 1,000,000
Fanconi Anemia, FANCC-related	< 1 in 50,000	< 1 in 1,000,000
FKRP-related Disorders	< 1 in 50,000	< 1 in 1,000,000
FKTN-related Disorders	1 in 210	1 in 160,000
Galactokinase Deficiency	< 1 in 50,000	< 1 in 1,000,000
Galactosemia	1 in 32,000	< 1 in 1,000,000
Gamma-sarcoglycanopathy	1 in 3,200	< 1 in 1,000,000
Gaucher Disease	1 in 450	1 in 320,000
GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness	NM_004004.5(GJB2):c.109G>A(V37I) heterozygote †	1 in 140
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 13,000	< 1 in 1,000,000
Glycogen Storage Disease Type Ia	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 50,000	< 1 in 1,000,000
GNPTAB-related Disorders	1 in 17,000	< 1 in 1,000,000
HADHA-related Disorders	1 in 25,000	< 1 in 1,000,000
Hb Beta Chain-related Hemoglobinopathy (Including Beta Thalassemia and Sickle Cell Disease)	1 in 5,000	1 in 990,000
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 16,000	< 1 in 1,000,000
Homocystinuria, CBS-related	< 1 in 50,000	< 1 in 1,000,000
Hydrolethalus Syndrome	< 1 in 50,000	< 1 in 1,000,000
Hypophosphatasia	1 in 19,000	< 1 in 1,000,000
Isovaleric Acidemia	1 in 39,000	< 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 42,000	< 1 in 1,000,000
Krabbe Disease	1 in 17,000	< 1 in 1,000,000
LAMA2-related Muscular Dystrophy	< 1 in 61,000	< 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 40,000	< 1 in 1,000,000
Lysosomal Acid Lipase Deficiency	1 in 30,000	< 1 in 1,000,000
Maple Syrup Urine Disease Type Ia	1 in 49,000	< 1 in 1,000,000
Maple Syrup Urine Disease Type Ib	1 in 23,000	< 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 11,000	< 1 in 1,000,000
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 50,000	< 1 in 1,000,000



RESULTS RECIPIENT  
**SEATTLE SPERM BANK**  
 Attn: Jeffrey Olliffe  
 NPI: 1306838271  
 Report Date: 02/07/2020

MALE  
**DONOR 14084**  
 DOB: [REDACTED]  
 Ethnicity: East Asian  
 Barcode: 11004512629323

FEMALE  
 N/A

Disease	DONOR 14084 Residual Risk	Reproductive Risk
Methylmalonic Aciduria and Homocystinuria, cblC Type	1 in 33,000	< 1 in 1,000,000
MKS1-related Disorders	< 1 in 50,000	< 1 in 1,000,000
Mucopolipidosis III Gamma	< 1 in 50,000	< 1 in 1,000,000
Mucopolipidosis IV	< 1 in 50,000	< 1 in 1,000,000
Mucopolysaccharidosis Type I	1 in 16,000	< 1 in 1,000,000
Mucopolysaccharidosis Type II	1 in 390,000	1 in 98,000
Mucopolysaccharidosis Type IIIA	1 in 16,000	< 1 in 1,000,000
Mucopolysaccharidosis Type IIIB	1 in 30,000	< 1 in 1,000,000
Mucopolysaccharidosis Type IIIC	< 1 in 50,000	< 1 in 1,000,000
MUT-related Methylmalonic Acidemia	1 in 11,000	< 1 in 1,000,000
MYO7A-related Disorders	1 in 15,000	< 1 in 1,000,000
NEB-related Nematine 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 17,000	< 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 6,500	< 1 in 1,000,000
PCDH15-related Disorders	1 in 3,300	< 1 in 1,000,000
Pendred Syndrome	1 in 6,400	< 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 50,000	< 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 7,700	< 1 in 1,000,000
POMGNT-related Disorders	< 1 in 12,000	< 1 in 1,000,000
Pompe Disease	1 in 10,000	< 1 in 1,000,000
PPT1-related Neuronal Ceroid Lipofuscinosis	1 in 7,700	< 1 in 1,000,000
Primary Carnitine Deficiency	1 in 10,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 1	1 in 13,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 2	< 1 in 50,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 3	1 in 20,000	< 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 30,000	< 1 in 1,000,000
Short-chain Acyl-CoA Dehydrogenase Deficiency	1 in 9,700	< 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 50,000	< 1 in 1,000,000
Spastic Paraplegia Type 15	< 1 in 50,000	< 1 in 1,000,000
Spinal Muscular Atrophy	Negative for g.27134T>G SNP SMN1: 2 copies 1 in 700	1 in 150,000
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
USH2A-related Disorders	1 in 2,200	< 1 in 1,000,000
Usher Syndrome Type 3	1 in 41,000	< 1 in 1,000,000
Very-long-chain Acyl-CoA Dehydrogenase Deficiency	1 in 12,000	< 1 in 1,000,000
Wilson Disease	1 in 5,000	1 in 990,000
X-linked Adrenoleukodystrophy	1 in 170,000	1 in 80,000



RESULTS RECIPIENT  
**SEATTLE SPERM BANK**  
Attn: Jeffrey Olliffe  
NPI: 1306838271  
Report Date: 02/07/2020

MALE  
**DONOR 14084**  
DOB: [REDACTED]  
Ethnicity: East Asian  
Barcode: 11004512629323

FEMALE  
N/A

Disease	DONOR 14084 Residual Risk	Reproductive Risk
X-linked Alport Syndrome	Not calculated	Not calculated
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 50,000
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 10,000	< 1 in 1,000,000
Xeroderma Pigmentosum Group C	1 in 7,300	< 1 in 1,000,000