DOB: mm/dd/yyyy	Account Number: 00000000	🔵 labcorp
Age: 00		-
Sex: Female	Ordering Physician:	
Date Received: mm/dd/yyyy	Date Reported: mm/dd/yyyy	Date Entered: mm/dd/yyyy
Ethnicity: Not Provided		
	Age: 00 Sex: Female Date Received: mm/dd/yyyy	Age: 00 Account Number: 00000000 Sex: Female Ordering Physician: Date Received: mm/dd/yyyy Date Reported: mm/dd/yyyy

Inheritest[®] 300 PLUS Panel

350 genes

SAMPLE REPORT

Summary: POSITIVE

Variants Detected

Disorder (Gene)	Result	Interpretation
Ataxia-telangiectasia <i>(ATM)</i> NM_000051.4	POSITIVE: CARRIER Heterozygous for c.362T>A (p.Leu121X), pathogenic, CHR11:108106427.	Predicted to be a carrier. Carriers may be at increased risk for malignancies, particularly breast, ovarian, and pancreatic cancer. Risk: AT INCREASED RISK FOR AFFECTED PREGNANCY. If this individual's reproductive partner is also a carrier of a pathogenic variant in the same gene, the risk for an affected fetus is 25%. Genetic counseling and reproductive partner carrier screening is recommended.
Tay-Sachs disease (<i>HEXA</i>) NM_000520.6	POSITIVE: CARRIER Heterozygous for c.1274_1277dupTATC (p.Tyr427IlefsX5), pathogenic, CHR15:72638921-72638924.	Predicted to be a carrier. Risk: AT INCREASED RISK FOR AFFECTED PREGNANCY. If this individual's reproductive partner is also a carrier of a pathogenic variant in the same gene, the risk for an affected fetus is 25%. Genetic counseling and reproductive partner carrier screening is recommended.

Negative Results

Disorder <i>(Gene)</i>	Result	Interpretation
Cystic fibrosis (CFTR) NM_000492.4	NEGATIVE	This result reduces, but does not eliminate, the risk to be a carrier. Risk: NOT at an increased risk for an affected pregnancy.
Fragile X syndrome <i>(FMR1)</i> NM_002024.6	NEGATIVE PCR repeats: 29 and 32	Not a carrier of a fragile X expansion. Risk: NOT at an increased risk for an affected pregnancy.
Spinal muscular atrophy (SMN1) NM_000344.4	NEGATIVE 2 copies of <i>SMN1</i> ; c.*3+80T>G risk variant not present.	This result reduces, but does not eliminate, the risk to be a carrier. Risk: NOT at an increased risk for an affected pregnancy.
Risk: This with one o		This result reduces, but does not eliminate the risk to be a carrier. Risk: This individual is NOT at an increased risk for having a pregnancy that is affected with one of the other disorders covered by this test. For partner's gene-specific risks, visit https://womenshealth.labcorp.com.

Recommendations

If the above result is positive, genetic counseling is recommended to discuss the potential clinical and/or reproductive implications, as well as recommendations for testing family members and, when applicable, this individual's partner. Genetic counseling services are available. To access Labcorp Genetic Counselors please visit https://womenshealth.labcorp.com/genetic-counseling or call (855) GC-CALLS (855-422-2557).

Additional Clinical Information

Ataxia-telangiectasia is an autosomal recessive disorder with variable severity and age at onset. Signs and symptoms may include early-onset progressive cerebellar ataxia, telangiectasia of the conjunctivae, recurrent infections, radiation hypersensitivity, and cancer susceptibility. Treatment is supportive. Carriers of ataxia-telangiectasia may be at increased risk for malignancies, particularly breast, ovarian, and pancreatic cancer (PMID:20301790; NCCN.org).

Electronically released by Director1 WB

labcorp

Date Created and Stored 10/25/2024 1035 ET $\,$ Final Report $\,$ Page 1 of 6 $\,$

©2024 Laboratory Corporation of America® Holdings All Rights Reserved - Enterprise Report Version 2.00 This document contains private and confidential health information protected by state and federal law. If you have received this document in error please call 800-255-7357.

LASTNAME, FIRSTNAME

DOB: **mm/dd/yyyy**

Account Number: 00000000



Patient ID: Specimen ID: **000-000-0000-0** Age: **00** Sex: **Female**

Ordering Physician:

Inheritest[®] 300 PLUS Panel

350 genes

Additional Clinical Information (Cont.)

Tay-Sachs disease, also known as hexosaminidase A deficiency, is an autosomal recessive neurodegenerative disorder with variable severity and age at onset. Signs and symptoms may include progressive neurological deterioration and muscle weakness, loss of acquired motor skills, severe intellectual disability, seizures, cherry-red spot by ophthalmological examination, vision loss, and hearing loss. Most affected individuals do not survive beyond childhood. Treatment is supportive. (Toro, PMID:20301397).

Comments

This interpretation is based on the clinical information provided and the current understanding of the molecular genetics of the disorder(s) tested. Information about the disorder(s) tested is available at https://womenshealth.labcorp.com.

Methods/Limitations

Next-generation Sequencing (NGS): Genomic regions of interest are selected using the Twist Bioscience® hybridization capture method and sequenced via the Illumina® NGS platform. Sequencing reads are aligned to the human genome reference GRCh37/hg19 build. Regions of interest include coding exons, intron/exon junctions (typically +/- 20 nucleotides) and additional genomic regions with known significant pathogenic variants. Estimated analytical sensitivity is >99% for single nucleotide variants and insertions/deletions <45 base pairs. Regions with low NGS coverage are selected for Sanger sequencing based on analytical sensitivity and probability of pathogenic variant(s). QIAGEN CLC Genomics and in-house algorithms identify copy number variants (CNVs) by comparing normalized read depth for each target in the region of interest with a set of clinical control samples or to the median read depth across the samples within the same NGS run. The overall analytical sensitivity for CNV detection in *CFTR* and *DMD* is >99% and, based on simulation studies, the estimated analytical sensitivity for single exon deletions is >97% and for single exon duplications is >82%. For all other genes, the assay is designed to detect CNVs with genomic size >10 kb and typically involving two or more consecutive coding exons with an overall analytical sensitivity of 96.7%. Large single-exon deletions or duplications may be detected. Precise breakpoints are not reported. Confirmatory testing by orthogonal technologies may include Sanger sequencing, MLPA, gap PCR, or low coverage whole genome sequencing analysis.

If the following genes are included in this test, these analysis restrictions are applied: *F2* includes c.*97G>A variant only (also known as 20210G>A); *F5* includes the F5 Leiden c.1601G>A (p.Arg543Gln) variant only (also known as R506Q); *GJB2* analysis includes deletions involving the 5' end of *GJB6* and regulatory elements of *GJB2* that result in reduced *GJB2* expression; *HFE* includes full gene deletion and five variants: c.187C>G (p.His63Asp), c.502G>T (p.Glu168X), c.506G>A (p.Trp169X), c.845G>A (p.Cys282Tyr), c.1006+1G>A; *NEB* excludes exons 82-105; *TNXB* excludes exons 32-44. Regions not included in CNV analysis: *BBS9* exons 15-17, *CEP290* gene, *COR01A* exon 11, *TMEM231* exons 2-3. Copy number gains cannot be detected in *PLN* and *RMRP*. Regions that may have lower analytical sensitivity due to intrinsic sequence properties: *ARX* exon 2, *RPGR* exon 13, *RPS6KA3* exon 20, *SELENON* exon1 and *SLC6A8* exon 1.

Reported variants: Pathogenic and likely pathogenic variants are reported for all tests. Benign and likely benign variants are typically not reported. Variants of uncertain significance are reported when included in the test specification. Variants are specified using the numbering and nomenclature recommended by the Human Genome Variation Society (HGVS, http://www.hgvs.org/). Variant classification and confirmation are consistent with ACMG standards and guidelines (Richards, PMID:25741868; Rehm, PMID:23887774). Detailed variant classification information and reevaluation are available upon request.

Alpha thalassemia: Analysis of the alpha-globin (HBA) gene cluster is performed by NGS. Positive results are confirmed by MLPA, gap PCR, or Sanger sequencing. There are two alpha-globin genes in the HBA gene cluster, *HBA1* and *HBA2*. Typically, an individual with a normal genotype has these two genes on each chromosome (alpha alpha/alpha alpha). A deletion that removes two of the genes on one of the chromosomes is described as - -/alpha alpha. Alpha-globin variants included in the analysis are the Constant Spring non-deletion variant and the following deletions: -alpha3.7, -alpha4.2, --alpha20.5, --SEA, --FIL, --THA1, --MED, and the HS-40 regulatory region. This analysis does not detect other variants in the alpha-globin genes or variants in the beta-globin gene and may not detect the co-occurrence of a deletion and a duplication. Analytical sensitivity is estimated to be >98% for the targeted variants.

Congenital Adrenal Hyperplasia: Analysis is performed by NGS. This analysis detects most large deletions within the *CYP21A2* gene, as well as the presence of seven of the most common pathogenic variants in the gene: c.518T>A (p.Ile173Asn), exon 6 mutation cluster [c.713T>A (p.Val238Glu), c.719T>A (p.Met240Lys)], c.923dup (p.Leu308Phefs), c.293-13C/A>G, c.332_339delGAGACTAC (p.Gly111Valfs), and c.-113G>A. MLPA is used to confirm all targeted variants identified by next-generation sequencing. Other variants are not detected by this analysis. Co-existence of a small variant with a large deletion may not be detected. The analytical sensitivity of this assay is estimated to be >99%.

Dystrophinopathies, including Duchenne and Becker muscular dystrophies and dilated cardiomyopathy: Analysis is performed by NGS. The overall analytical sensitivity for CNV detection in *DMD* is >99% and, based on simulation studies, the estimated analytical sensitivity for single exon deletions is >97% and for single exon duplications is >82%. In-frame and out-of-frame deletions cannot be distinguished by this analysis, which does not determine precise breakpoints in the *DMD* gene. Approximately 67% of the time a *DMD* pathogenic variant is inherited, and approximately 33% of the time the variant is *de novo* and not previously seen in the family. If a pathogenic variant is *de novo*, the risk that the mother of an affected male has germline mosaicism is 15-20%. This analysis does not detect germline mosaicism. An individual who has a negative carrier screen may have germline mosaicism and be at risk for having an affected child.

Fragile X Syndrome: PCR analysis with fluorescent primers is used to amplify the CGG repeat region of the FMR1 gene and Amelogenin loci on the X and Y chromosomes. PCR products are sized using capillary electrophoresis and GeneMapper fragment analysis software. The reportable CGG repeat ranges are: negative: <45; intermediate:

Electronically released by Director1 WB

labcorp

Date Created and Stored 10/25/2024 1035 ET **Final Report** Page 2 of 6

©2024 Laboratory Corporation of America® Holdings All Rights Reserved - Enterprise Report Version 2.00 This document contains private and confidential health information protected by state and federal law. If you have received this document in error please call 800-255-7357.

LASTNAME, FIRSTNAME

DOB: **mm/dd/yyyy**

Account Number: 0000000



Specimen ID: 000-000-0000-0

Age: **00** Sex: **Female**

Ordering Physician:

Inheritest[®] 300 PLUS Panel

350 genes

Patient ID:

Methods/Limitations (Cont.)

45-54; premutation: 55-200; full mutation: >200. Postnatal female samples with premutations of 55-90 repeats are reflexed to assess AGG interruptions within the CGG repeats. The predicted risk for the premutation to expand to a full mutation in the next generation is based on the size of the premutation and the number of AGG interruptions. If indicated, methylation PCR analysis using methylation-specific immunoprecipitation is performed. Relative amounts of methylated and unmethylated products are assessed to determine the methylation status: unmethylated, partially methylated, or completely methylated. The analytical sensitivity of this assay for the detection of expanded alleles in the *FMR1* gene is estimated to be >99%. Reproducibility of repeat numbers is typically ±1 for alleles containing up to 60 repeats, ±3 for alleles with 61-119 repeats, and ±10 for alleles with >119 repeats. Low levels of mosaicism and *FMR1* variants unrelated to trinucleotide expansion are not detected by this assay.

Spinal muscular atrophy: The copy number of *SMN1* exon 7 is assessed relative to internal standard reference genes by quantitative polymerase chain reaction (qPCR). A mathematical algorithm calculates 0, 1, 2 and 3 copies with statistical confidence. In fetal specimens and specimens with 0 or 1 copies, the primer and probe binding sites are sequenced to rule out variants that could interfere with copy number analysis. *SMN2* copy number is assessed by digital droplet PCR analysis relative to an internal standard reference gene in samples with no copies of *SMN1*. For carrier screening, when two copies of *SMN1* are detected, allelic discrimination qPCR targeting c.*3+80T>G in *SMN1* is performed.

Limitations: Technologies used do not detect germline mosaicism and do not rule out the presence of large chromosomal aberrations including rearrangements and gene fusions, or variants in regions or genes not included in this test, or possible inter/intragenic interactions between variants, or repeat expansions. Variant classification and/or interpretation may change over time if more information becomes available. False positive or false negative results may occur for reasons that include: rare genetic variants, sex chromosome abnormalities, pseudogene interference, blood transfusions, bone marrow transplantation, somatic or tissue-specific mosaicism, mislabeled samples, or erroneous representation of family relationships.

References

Gregg AR, Aarabi M, Klugman S et al. Screening for autosomal recessive and X-linked conditions during pregnancy and preconception: a practice resource of the American College of Medical Genetics and Genomics (ACMG). Genet Med 23, 1793 (2021). PMID: 34285390

Disorders Tested

3-Methylcrotonyl-CoA carboxylase deficiency (2 genes). Autosomal recessive: MCCC1, MCCC2 Abetalipoproteinemia (1 gene). Autosomal recessive: MTTP Achromatopsia (1 gene). Autosomal recessive: CNGB3 Adenosine deaminase deficiency (1 gene). Autosomal recessive: ADA Adrenoleukodystrophy, X-linked (1 gene). X-linked: ABCD1. Males are not tested for X-linked disorders. Aicardi-Goutières syndrome (1 gene). Autosomal recessive: RNASEH2B Alpha-mannosidosis (1 gene). Autosomal recessive: MAN2B1 Alpha-thalassemia (2 genes). Autosomal recessive: HBA1/HBA2 Alport syndrome (3 genes). Autosomal recessive: COL4A3, COL4A4; X-linked: COL4A5. Males are not tested for X-linked disorders. Alström syndrome (1 gene). Autosomal recessive: ALMS1 Andermann syndrome (1 gene). Autosomal recessive: SLC12A6 Argininosuccinic aciduria (1 gene). Autosomal recessive: ASL Arthrogryposis, mental retardation, and seizures (AMRS) (1 gene). Autosomal recessive: SLC35A3 Aspartylglucosaminuria (1 gene). Autosomal recessive: AGA Ataxia with vitamin E deficiency (1 gene). Autosomal recessive: TTPA Ataxia-telangiectasia (1 gene). Autosomal recessive: ATM Atransferrinemia (1 gene). Autosomal recessive: TF Autoimmune polyglandular syndrome type 1 (1 gene). Autosomal recessive: AIRE Autosomal recessive spastic ataxia of Charlevoix-Saguenay (ARSACS) (1 gene). Autosomal recessive: SACS Bardet-Biedl syndrome (12 genes). Autosomal recessive: ARL6, BBS1, BBS10, BBS12, BBS2, BBS4, BBS5, BBS7, BBS9, MKKS, SDCCAG8, TTC8 Basal ganglia disease, biotin-thiamine-responsive (1 gene). Autosomal recessive: SLC19A3 Beta-hemoglobinopathies, includes sickle cell disease and beta-thalassemias (1 gene). Autosomal recessive: HBB Beta-ketothiolase deficiency (1 gene). Autosomal recessive: ACAT1 Beta-mannosidosis (1 gene). Autosomal recessive: MANBA Biotinidase deficiency, profound and partial (1 gene). Autosomal recessive: BTD Bloom syndrome (1 gene). Autosomal recessive: BLM Canavan disease (1 gene). Autosomal recessive: ASPA Carbamoyl phosphate synthetase I deficiency (1 gene). Autosomal recessive: CPS1 Carnitine palmitoyltransferase II deficiency (1 gene). Autosomal recessive: CPT2 Carnitine-acylcarnitine translocase deficiency (1 gene). Autosomal recessive: SLC25A20 Cartilage-hair hypoplasia (1 gene). Autosomal recessive: RMRP

Electronically released by Director1 WB

labcorp

Date Created and Stored 10/25/2024 1035 ET **Final Report** Page 3 of 6

DOB: **mm/dd/yyyy**



Specimen ID: 000-000-0000-0

Age: **00** Sex: **Female**

Ordering Physician:

Inheritest[®] 300 PLUS Panel

350 genes

Patient ID:

Disorders Tested (Cont.)

Cerebral creatine deficiency syndromes (3 genes). Autosomal recessive: GAMT, GATM; X-linked: SLC6A8. Males are not tested for X-linked disorders. Cerebrotendinous xanthomatosis (1 gene). Autosomal recessive: CYP27A1 Ciliopathies (2 genes). Autosomal recessive: CEP290, MKS1 Citrullinemia (2 genes). Autosomal recessive: ASS1, SLC25A13 Cohen syndrome (1 gene). Autosomal recessive: VPS13B Congenital adrenal hyperplasia (7 genes). Autosomal recessive: CYP11A1, CYP11B1, CYP17A1, CYP21A2, HSD3B2, POR, STAR Congenital adrenal hypoplasia, X-linked (1 gene). X-linked: NROB1. Males are not tested for X-linked disorders. Congenital amegakaryocytic thrombocytopenia (1 gene). Autosomal recessive: MPL Congenital disorders of glycosylation (4 genes). Autosomal recessive: ALG1, ALG6, MPI, PMM2 Congenital hydrocephalus 1 (1 gene). Autosomal recessive: CCDC88C Congenital myasthenic syndrome (1 gene). Autosomal recessive: CHRNE Cystic fibrosis (1 gene). Autosomal recessive: CFTR Cystinosis (1 gene). Autosomal recessive: CTNS D-bifunctional protein deficiency (1 gene). Autosomal recessive: HSD17B4 Deafness and hearing loss, nonsyndromic (5 genes). Autosomal recessive: GJB2, LOXHD1, OTOF, SYNE4; X-linked: POU3F4. Males are not tested for X-linked disorders. Developmental and epileptic encephalopathy (1 gene). X-linked: ARX. Males are not tested for X-linked disorders. Dihydrolipoamide dehydrogenase deficiency (1 gene). Autosomal recessive: DLD Dihydropyrimidine dehydrogenase deficiency (1 gene). Autosomal recessive: DPYD Donnai-Barrow syndrome (1 gene). Autosomal recessive: LRP2 Dystrophic epidermolysis bullosa (1 gene). Autosomal recessive: COL7A1 Dystrophinopathies, including Duchenne and Becker muscular dystrophy and X-linked cardiomyopathy (1 gene). X-linked: DMD. Males are not tested for X-linked disorders. Ehlers Danlos syndrome, ADAMTS2-related (1 gene). Autosomal recessive: ADAMTS2 Ehlers-Danlos-like syndrome (1 gene). Autosomal recessive: TNXB Ellis-van Creveld syndrome (1 gene). Autosomal recessive: EVC2 Ethylmalonic encephalopathy (1 gene). Autosomal recessive: ETHE1 Fabry disease (1 gene). X-linked: GLA. Males are not tested for X-linked disorders. Factor IX deficiency (hemophilia B) (1 gene). X-linked: F9. Males are not tested for X-linked disorders. Familial dysautonomia (1 gene). Autosomal recessive: ELP1 Familial hemophagocytic lymphohistiocytosis (4 genes). Autosomal recessive: PRF1, STX11, STXBP2, UNC13D Familial hyperinsulinism (1 gene). Autosomal recessive: ABCC8 Familial Mediterranean fever (1 gene). Autosomal recessive: MEFV Fanconi anemia (10 genes). Autosomal recessive: BRIP1, FANCA, FANCC, FANCD2, FANCE, FANCF, FANCG, FANCI, FANCL; X-linked: FANCB. Males are not tested for X-linked disorders. Fragile X syndrome (1 gene). X-linked: FMR1. Males are not tested for X-linked disorders. Fraser syndrome (3 genes). Autosomal recessive: FRAS1, FREM2, GRIP1 Fucosidosis (1 gene). Autosomal recessive: FUCA1 Galactosemia (3 genes). Autosomal recessive: GALE, GALK1, GALT Galactosialidosis (1 gene). Autosomal recessive: CTSA Gaucher disease (1 gene). Autosomal recessive: GBA1 Glutaric acidemia type I (1 gene). Autosomal recessive: GCDH Glutathione synthetase deficiency (1 gene). Autosomal recessive: GSS Glycine encephalopathy (2 genes). Autosomal recessive: AMT, GLDC Glycogen storage disease type I (2 genes). Autosomal recessive: G6PC1, SLC37A4 Glycogen storage disease type III (1 gene). Autosomal recessive: AGL Glycogen storage disease type IV (1 gene). Autosomal recessive: GBE1 GM1 gangliosidosis and mucopolysaccharidosis type IVB (1 gene). Autosomal recessive: GLB1 GRACILE syndrome (1 gene). Autosomal recessive: BCS1L Hereditary fructose Intolerance (1 gene). Autosomal recessive: ALDOB Hermansky-Pudlak syndrome (2 genes). Autosomal recessive: HPS1, HPS3 HMG-CoA lyase deficiency (1 gene). Autosomal recessive: HMGCL Holocarboxylase synthetase deficiency (1 gene). Autosomal recessive: HLCS Homocystinuria (1 gene). Autosomal recessive: CBS Hydrolethalus syndrome (1 gene). Autosomal recessive: HYLS1 Hypophosphatasia (1 gene). Autosomal recessive: ALPL Isovaleric acidemia (1 gene). Autosomal recessive: IVD

Electronically released by Director1 WB

labcorp

Date Created and Stored 10/25/2024 1035 ET **Final Report** Page 4 of 6

DOB: **mm/dd/yyyy**



Specimen ID: 000-000-0000-0

Age: **00** Sex: **Female**

Ordering Physician:

Inheritest[®] 300 PLUS Panel

350 genes

Patient ID:

Disorders Tested (Cont.) Joubert syndrome and related disorders, including Meckel-Gruber syndrome (20 genes). Autosomal recessive: AHI1, ARL13B, B9D1, B9D2, CC2D2A, CEP104, CPLANE1, INPP5E,

KIF14. NPHP1. NPHP3. RPGRIP1L. TCTN1. TCTN2. TCTN3. TMEM138. TMEM216. TMEM231. TMEM237. TMEM67 Junctional epidermolysis bullosa (3 genes). Autosomal recessive: LAMA3, LAMB3, LAMC2 Juvenile retinoschisis, X-linked (1 gene). X-linked: RS1. Males are not tested for X-linked disorders. Krabbe disease (1 gene). Autosomal recessive: GALC L1 syndrome (1 gene). X-linked: L1CAM. Males are not tested for X-linked disorders. Leigh syndrome (10 genes). Autosomal recessive: FBXL4, FOXRED1, LRPPRC, NDUFAF2, NDUFAF5, NDUFS4, NDUFS6, NDUFS7, NDUFV1, SURF1 Limb-girdle muscular dystrophy (12 genes). Autosomal recessive: CAPN3, DYSF, FKRP, POMGNT1, POMT1, POMT2, SGCA, SGCB, SGCD, SGCG, TRAPPC11, TRIM32 Long-chain 3-hydroxyacyl-CoA dehydrogenase (LCHAD) deficiency (1 gene). Autosomal recessive: HADHA Lysosomal acid lipase deficiency (1 gene). Autosomal recessive: LIPA Maple syrup urine disease (3 genes). Autosomal recessive: BCKDHA, BCKDHB, DBT Medium-chain acyl-CoA dehydrogenase (MCAD) deficiency (1 gene). Autosomal recessive: ACADM Megalencephalic leukoencephalopathy with subcortical cysts type 1 (1 gene). Autosomal recessive: MLC1 Metachromatic leukodystrophy (2 genes). Autosomal recessive: ARSA, PSAP Methylmalonic acidemia (4 genes). Autosomal recessive: MCEE, MMAA, MMAB, MMUT Methylmalonic acidemia with homocystinuria (5 genes). Autosomal recessive: ABCD4, LMBRD1, MMACHC, MMADHC; X-linked: HCFC1. Males are not tested for X-linked disorders. Mevalonate kinase deficiency (1 gene). Autosomal recessive: MVK Mitochondrial complex deficiency (1 gene). Autosomal recessive: SCO2 Mucolipidosis type II and III (1 gene). Autosomal recessive: GNPTAB Mucolipidosis type IV (1 gene). Autosomal recessive: MCOLN1 Mucopolysaccharidosis type I (1 gene). Autosomal recessive: IDUA Mucopolysaccharidosis type II (1 gene). X-linked: IDS. Males are not tested for X-linked disorders. Mucopolysaccharidosis type III (4 genes). Autosomal recessive: GNS, HGSNAT, NAGLU, SGSH Mucopolysaccharidosis type IVA (1 gene). Autosomal recessive: GALNS Mucopolysaccharidosis type VI (1 gene). Autosomal recessive: ARSB Mucopolysaccharidosis type VII (1 gene). Autosomal recessive: GUSB Multiple sulfatase deficiency (1 gene). Autosomal recessive: SUMF1 Myotonia congenita (1 gene). Autosomal recessive: CLCN1 Nemaline myopathy (1 gene). Autosomal recessive: NEB Nephrotic syndrome (2 genes). Autosomal recessive: NPHS1, NPHS2 Neuronal ceroid-lipofuscinosis (10 genes). Autosomal recessive: CLN3, CLN5, CLN6, CLN8, CTSD, CTSF, KCTD7, MFSD8, PPT1, TPP1 Niemann-Pick disease type C (2 genes). Autosomal recessive: NPC1, NPC2 Niemann-Pick disease types A and B (1 gene). Autosomal recessive: SMPD1 Nijmegen breakage syndrome (1 gene). Autosomal recessive: NBN Oculocutaneous albinism (2 genes). Autosomal recessive: OCA2, TYR Opitz G/BBB syndrome (1 gene). X-linked: MID1. Males are not tested for X-linked disorders. Ornithine transcarbamylase deficiency (1 gene). X-linked: OTC. Males are not tested for X-linked disorders. Pelizaeus-Merzbacher disease (1 gene). X-linked: PLP1. Males are not tested for X-linked disorders. Pendred syndrome (1 gene). Autosomal recessive: SLC26A4 Phenylalanine hydroxylase deficiency, includes phenylketonuria (PKU) (1 gene). Autosomal recessive: PAH Phosphoglycerate dehydrogenase deficiency (1 gene). Autosomal recessive: PHGDH POLG-related disorders (1 gene). Autosomal recessive: POLG Polycystic kidney disease, autosomal recessive (1 gene). Autosomal recessive: PKHD1 Pompe disease (1 gene). Autosomal recessive: GAA Pontocerebellar hypoplasia (1 gene). Autosomal recessive: RARS2 Primary hyperoxaluria (3 genes). Autosomal recessive: AGXT, GRHPR, HOGA1 Primary microcephaly (1 gene). Autosomal recessive: MCPH1 Propionic acidemia (2 genes). Autosomal recessive: PCCA, PCCB Pulmonary surfactant metabolism dysfunction (1 gene). Autosomal recessive: ABCA3 Pyruvate dehydrogenase deficiency (4 genes). Autosomal recessive: PDHB, PDHX, PDP1; X-linked: PDHA1. Males are not tested for X-linked disorders. Retinitis pigmentosa (13 genes). Autosomal recessive: CERKL, CNGA1, CNGB1, CWC27, DHDDS, EYS, FAM161A, IFT140, MAK, PRCD, RLBP1; X-linked: RP2, RPGR. Males are not tested for X-linked disorders. Rhizomelic chondrodysplasia punctata (3 genes). Autosomal recessive: AGPS, GNPAT, PEX7

Rhizomelic chondrodysplasia punctata (3 genes). Autosomal recessive: AGPS, GNPAT, PEX Sandhoff disease (1 gene). Autosomal recessive: HEXB

Electronically released by Director1 WB

labcorp

Date Created and Stored 10/25/2024 1035 ET **Final Report** Page 5 of 6

DOB: **mm/dd/yyyy**

Account Number: 0000000



Specimen ID: 000-000-0000-0

Age: **00** Sex: **Female**

Ordering Physician:

Inheritest[®] 300 PLUS Panel

350 genes

Patient ID:

Disorders Tested (Cont.)

Schindler disease (1 gene). Autosomal recessive: NAGA Severe combined immunodeficiency (SCID) (28 genes). Autosomal recessive: AK2, CD247, CD3D, CD3E, CD3G, CD8A, COR01A, DCLRE1C, DOCK8, FOXN1, IKBKB, IL2RA, IL7R, JAK3, LCK, LIG4, MALT1, MTHFD1, NHEJ1, PGM3, PNP, PRKDC, PTPRC, RAG1, RAG2, STK4, TTC7A, ZAP70 Severe combined Immunodeficiency (SCID), X-linked (1 gene). X-linked: IL2RG. Males are not tested for X-linked disorders. Short-rib thoracic dysplasia (1 gene). Autosomal recessive: DYNC2H1 Sialic acid storage disorders (1 gene). Autosomal recessive: SLC17A5 Sialidosis (1 gene). Autosomal recessive: NEU1 Sjogren-Larsson syndrome (1 gene). Autosomal recessive: ALDH3A2 Smith-Lemli-Opitz syndrome (1 gene). Autosomal recessive: DHCR7 Spinal muscular atrophy (1 gene). Autosomal recessive: SMN1 Spinocerebellar ataxia 10 (1 gene). Autosomal recessive: ANO10 Sulfate transporter-related osteochondrodysplasias, includes achondrogenesis type 1B, atelosteogenesis type 2, diastrophic dysplasia, and recessive multiple epiphyseal dysplasia (1 gene). Autosomal recessive: SLC26A2 Systemic primary carnitine deficiency (1 gene). Autosomal recessive: SLC22A5 Tay-Sachs disease (1 gene). Autosomal recessive: HEXA Trimethylaminuria (1 gene). Autosomal recessive: FMO3 Tyrosinemia type I (1 gene). Autosomal recessive: FAH Usher syndrome (hearing loss and retinitis pigmentosa) (9 genes). Autosomal recessive: ADGRV1, CDH23, CIB2, CLRN1, PCDH15, USH1C, USH1G, USH2A, WHRN Very long-chain acyl-CoA dehydrogenase (VLCAD) deficiency (1 gene). Autosomal recessive: ACADVL Vitamin D-dependent rickets (1 gene). Autosomal recessive: CYP27B1 Walker-Warburg syndrome and other FKTN-related dystrophies (1 gene). Autosomal recessive: FKTN Wilson disease (1 gene). Autosomal recessive: ATP7B Xeroderma pigmentosum (8 genes). Autosomal recessive: DDB2, ERCC2, ERCC3, ERCC4, ERCC5, POLH, XPA, XPC Zellweger spectrum disorder/ peroxisome biogenesis disorder (13 genes). Autosomal recessive: PEX1, PEX10, PEX11B, PEX12, PEX13, PEX14, PEX16, PEX29, PEX26, PEX3,

PEX5, PEX6

Performing Labs

Component Type	Performed at	Laboratory Director	
Technical component, processing	Esoterix Genetic Laboratories, LLC, 3400 Computer Drive, Westborough, MA 01581-1771	Hui Zhu, PhD, FACMG	
Technical component, analysis	Esoterix Genetic Laboratories, LLC, 3400 Computer Drive, Westborough, MA 01581-1771	Hui Zhu, PhD, FACMG	
Professional component	Esoterix Genetic Laboratories, LLC, 3400 Computer Drive, Westborough, MA 01581-1771	Hui Zhu, PhD, FACMG	
For inquiries, the physician may contact the lab at 200 2FF 72F7			

For inquiries, the physician may contact the lab at 800-255-7357

This test was developed and its performance characteristics determined by Esoterix Genetic Laboratories, LLC. It has not been cleared or approved by the Food and Drug Administration.

Esoterix Genetic Laboratories, LLC is a subsidiary of Laboratory Corporation of America Holdings, using the brand Labcorp. Inheritest® and GeneSeq® are registered service marks of Laboratory Corporation of America Holdings.

Patient Details LASTNAME, FIRSTNAME

Phone: Date of Birth: **mm/dd/yyyy** Age: **00** Sex: **Female** Patient ID: Alternate Patient ID: Physician Details CLIENT NAME CLIENT ADDRESS

Phone: **00000000** Account Number: **00000000** Physician ID: NPI: Specimen Details Specimen ID: 0000000000 Control ID: Alternate Control Number: Date Collected: mm/dd/yyyy 0000 Local Date Received: mm/dd/yyyy 0000 ET Date Entered: mm/dd/yyyy 0000 ET

Electronically released by Director1 WB

labcorp

©2024 Laboratory Corporation of America® Holdings All Rights Reserved - Enterprise Report Version 2.00 Date Created and Stored 10/25/2024 1035 ET **Final Report** Page 6 of 6

This document contains private and confidential health information protected by state and federal law. If you have received this document in error please call 800-255-7357.