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Genetic Testing Summary

Enclosed are the genetic testing results for

CB 493

No amount of genetic testing can guarantee that a child will not be affected with a genetic condition. Genetic testing can inform you of the likelihood of passing on the genetic conditions that are tested for, but it cannot eliminate the risk of passing on any genetic condition.

The genetic conditions Cryobio tests for are inherited in an autosomal recessive manner. This means that the child would have to inherit a genetic mutation from both the sperm source and the egg source to be affected with the condition. When both the sperm source and the egg source have undergone genetic carrier screening and the test results are negative, the risk of a child being affected with the conditions tested for is significantly reduced, but it cannot be completely eliminated.

All recipients should discuss both their own risk for passing on genetic conditions and whether they would benefit from genetic counseling and testing with their health care provider. Before using a donor that is a carrier for a specific recessive genetic condition or conditions, we strongly recommend that the recipient (or egg source, if different) consider genetic counseling and testing to determine if they are a carrier for the same genetic condition or conditions as the donor.

Screening and testing have changed dramatically over the years, and so the screening and testing done on each donor may vary depending on the testing that was in place when he was actively in Cryobio's donor program. Earlier donors may not have had as extensive testing as later donors. Screening and testing may change again in the future, so please review the results each time before ordering as both the testing done and the results may change.

Patient Information

Name: Cb 493
 Date of Birth: [REDACTED]
 Sema4 ID: [REDACTED]
 Client ID: [REDACTED]
 Indication: Carrier Screening

Specimen Information

Specimen Type: Blood
 Date Collected: [REDACTED]
 Date Received: [REDACTED]
 Final Report: [REDACTED]

Referring Provider

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Expanded Carrier Screen (502 genes)
 with Personalized Residual Risk

SUMMARY OF RESULTS AND RECOMMENDATIONS

⊕ Positive	⊖ Negative
<p>Carrier of Gitelman Syndrome (AR) Associated gene(s): <i>SLC12A3</i> Variant(s) Detected: c.2221G>A, p.G741R, Pathogenic, Heterozygous (one copy)</p> <p>Carrier of Nephrotic Syndrome (NPHS2-Related) / Steroid-Resistant Nephrotic Syndrome (AR) Associated gene(s): <i>NPHS2</i> Variant(s) Detected: c.686G>A, p.R229Q, Pathogenic, Heterozygous (one copy)</p> <p>Carrier of Neuronal Ceroid-Lipofuscinosis (CLN3-Related) (AR) Associated gene(s): <i>CLN3</i> Variant(s) Detected: c.461-280_677+382del966, Pathogenic, Heterozygous (one copy)</p> <p>Carrier of Ornithine Aminotransferase Deficiency (AR) Associated gene(s): <i>OAT</i> Variant(s) Detected: c.824G>A, p.W275X, Likely Pathogenic, Heterozygous (one copy)</p>	<p>Negative for all other genes tested To view a full list of genes and diseases tested please see Table 1 in this report</p>

AR=Autosomal recessive; XL=X-linked

Recommendations

- Testing the partner for the above positive disorder(s) and genetic counseling are recommended.
- Please note that for female carriers of X-linked diseases, follow-up testing of a male partner is not indicated.
- CGG repeat analysis of *FMR1* for fragile X syndrome is not performed on males as repeat expansion of premutation alleles is not expected in the male germline.
- Individuals of Asian, African, Hispanic and Mediterranean ancestry should also be screened for hemoglobinopathies by CBC and hemoglobin electrophoresis.
- Consideration of residual risk by ethnicity after a negative carrier screen is recommended for the other diseases on the panel, especially in the case of a positive family history for a specific disorder.

Interpretation of positive results

Gitelman Syndrome (AR)

Results and Interpretation

A heterozygous (one copy) pathogenic missense variant, c.2221G>A, p.G741R, was detected in the *SLC12A3* gene (NM_000339.2). When this variant is present in trans with a pathogenic variant, it is considered to be causative for Gitelman syndrome. Therefore, this individual is expected to be at least a carrier for Gitelman syndrome. Heterozygous carriers may have decreased blood pressure compared to the general population, but are not expected to develop any symptoms of disease.

What is Gitelman Syndrome?

Gitelman syndrome is an autosomal recessive, pan-ethnic disease caused by pathogenic variants in the gene *SLC12A3*. In this disease, the kidney does not retain necessary ions, causing an imbalance in the body. Symptoms usually begin in late childhood or adolescence, and include muscle spasms or cramps, tingling sensations, joint pain and fatigue. Most patients have mild symptoms, but severe ion imbalances could lead to seizures or heart arrhythmias. With treatment, including dietary management, patients have a normal life expectancy. It is not currently possible to predict the severity of symptoms based on the variants inherited.

Nephrotic Syndrome (NPHS2-Related) / Steroid-Resistant Nephrotic Syndrome (AR)

Results and Interpretation

A heterozygous (one copy) pathogenic missense variant, c.686G>A, p.R229Q, was detected in the *NPHS2* gene (NM_014625.3). Please note that this is a mild variant that is only expected to cause disease when found in trans with one of a specific set of variants that occurs in exons 7 or 8. Please see the disease interpretation below for additional information. Homozygotes are not expected to be affected, unless this variant is part of a more complex allele. When this variant is present in trans with a pathogenic variant, it is considered to be causative for an *NPHS2*-related disorder. Therefore, this individual is expected to be at least a carrier for an *NPHS2*-related disorder. Heterozygous carriers are not expected to exhibit symptoms of this disease.

What is Nephrotic Syndrome (NPHS2-Related) / Steroid-Resistant Nephrotic Syndrome?

Pathogenic variants in the *NPHS2* gene cause two autosomal recessive, pan-ethnic disorders: steroid-resistant nephrotic syndrome and focal segmental glomerulosclerosis.

- Steroid-resistant nephrotic syndrome (SRNS) is a severe disorder with onset usually occurring during childhood. Patients lose protein in their urine, which results in progressive kidney failure. Death will occur without a kidney transplant, usually by adolescence; however, many patients are cured after kidney transplant.
- Focal segmental glomerulosclerosis (FSGS) is a type of scarring of the kidney, and is usually diagnosed in the patient's second or third decade of life. FSGS is more slowly progressing than SRNS and usually leads to end-stage renal disease by the ages of 10-50.

Mutations in *NPHS2* have been demonstrated to have a complex genotype-phenotype correlation. A common pathogenic variant, p.R229Q, causes FSGS when found in trans with a number of specific variants, including p.A284V, p.A288T, p.R291W, p.A297V, p.E310K, p.E310V, p.L327F, p.Q328R, and p.F344LfsX4. While all of the variants that are disease-causing when in trans with R229Q are located in exons 7 and 8, not all pathogenic variants in exons 7 and 8 cause disease when in trans with R229Q. Examples of variants in exons 7 and 8 that do not cause disease when in trans with R229Q are p.R286TfsX17, p.V290M, and p.A317LfsX31. Additionally, p.R229Q is not disease-causing in the homozygous state (PMID: 24509478 and 29660491).

Neuronal Ceroid-Lipofuscinosis (CLN3-Related) (AR)

Results and Interpretation

A heterozygous (one copy) pathogenic deletion, c.461-280_677+382delg66, was detected in the *CLN3* gene (NM_000086.2). When this variant is present in trans with a pathogenic variant, it is considered to be causative for neuronal ceroid-lipofuscinosis (*CLN3*-related). Therefore, this individual is expected to be at least a carrier for neuronal ceroid-lipofuscinosis (*CLN3*-related). Heterozygous carriers are not expected to exhibit symptoms of this disease.

What is Neuronal Ceroid-Lipofuscinosis (CLN3-Related)?

Neuronal ceroid-lipofuscinosis (*CLN3*-related) is an autosomal recessive neurodegenerative disorder that is caused by pathogenic variants in the gene *CLN3*. It has been reported in patients from different ethnicities around the world. Most *CLN3*-caused neuronal ceroid-lipofuscinosis results in the juvenile form, in which symptoms begin between 4 and 10 years of age. Clinical features include progressive visual loss which proceeds to blindness in childhood. Neurologic and psychiatric symptoms include seizures, difficulty speaking, intellectual disability, psychosis or dementia, and ataxia leading to an inability to walk. Affected individuals often die between the ages of 20 and 40. Some patients have a milder form with less neurologic involvement. It is not currently possible to predict the severity of disease based on the patient's genotype.

Ornithine Aminotransferase Deficiency (AR)

Results and Interpretation

A heterozygous (one copy) likely pathogenic premature stop codon, c.824G>A, p.W275X, was detected in the *OAT* gene (NM_000274.3). When this variant is present in trans with a pathogenic variant, it is considered to be causative for ornithine aminotransferase deficiency. Therefore, this individual is expected to be at least a carrier for ornithine aminotransferase deficiency. Heterozygous carriers are not expected to exhibit symptoms of this disease.

What is Ornithine Aminotransferase Deficiency?

Ornithine aminotransferase deficiency is an autosomal recessive disorder caused by pathogenic variants in the gene *OAT*. While affected individuals have been reported worldwide, the disease has an increased prevalence in Sephardic Jewish individuals from Iraq and Syria and individuals of Finnish descent due to the presence of founder mutations. Clinical features include the onset of night blindness and myopia in the first decade of life, with progression to blindness in adulthood. Cataract development usually occurs in adolescence or early adulthood. Muscle abnormalities are also present, and some patients will have muscle weakness. Life expectancy and intelligence are normal. No genotype-phenotype correlation is known.

Test description

This patient was tested for a panel of diseases using a combination of sequencing, targeted genotyping and copy number analysis. Please note that negative results reduce but do not eliminate the possibility that this individual is a carrier for one or more of the disorders tested. Please see Table 1 for a list of genes and diseases tested with the patient's personalized residual risk. If personalized residual risk is not provided, please see the complete residual risk table at go.sema4.com/residualrisk. Only variants determined to be pathogenic or likely pathogenic are reported in this carrier screening test.



Xingwu Lu, Ph.D., FACMG, Associate Laboratory Director

Laboratory Medical Consultant: George A. Diaz, M.D., Ph.D

Genes and diseases tested

The personalized residual risks listed below are specific to this individual. The complete residual risk table is available at go.sema4.com/residualrisk

Table 1: List of genes and diseases tested with detailed results

Disease	Gene	Inheritance Pattern	Status	Detailed Summary
Positive				
Gitelman Syndrome	<i>SLC12A3</i>	AR	Carrier	c.2221G>A, p.G741R, Pathogenic, Heterozygous (one copy)
Nephrotic Syndrome (NPHS2-Related) / Steroid-Resistant Nephrotic Syndrome	<i>NPHS2</i>	AR	Carrier	c.686G>A, p.R229Q, Pathogenic, Heterozygous (one copy)
Neuronal Ceroid-Lipofuscinosis (CLN3-Related)	<i>CLN3</i>	AR	Carrier	c.461-280_677+382delg66, Pathogenic, Heterozygous (one copy)
Ornithine Aminotransferase Deficiency	<i>OAT</i>	AR	Carrier	c.824G>A, p.W275X, Likely Pathogenic, Heterozygous (one copy)
Negative				
2-Methylbutyrylglycinuria	<i>ACADSB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,800
3-Beta-Hydroxysteroid Dehydrogenase Type II Deficiency	<i>HSD3B2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,300
3-Methylcrotonyl-CoA Carboxylase Deficiency (MCCC1-Related)	<i>MCCC1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,400
3-Methylcrotonyl-CoA Carboxylase Deficiency (MCCC2-Related)	<i>MCCC2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
3-Methylglutaconic Aciduria, Type III	<i>OPA3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 50,000
3-Phosphoglycerate Dehydrogenase Deficiency	<i>PHGDH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 63,000
6-Pyruvoyl-Tetrahydropterin Synthase Deficiency	<i>PTS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
CD59-Mediated Hemolytic Anemia	<i>CD59</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 415,000
Abetalipoproteinemia	<i>MTPP</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Achalasia-Addisonianism-Alacrimia Syndrome	<i>AAAS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,500
Achromatopsia (CNGA3-Related)	<i>CNGA3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 830
Achromatopsia (CNGB3-related)	<i>CNGB3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,600
Acrodermatitis Enteropathica	<i>SLC39A4</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Acute Infantile Liver Failure	<i>TRMU</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,400
Acyl-CoA Oxidase I Deficiency	<i>ACOX1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 39,000
Adams-Oliver Syndrome 4	<i>EOGT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 44,000
Adenosine Deaminase Deficiency	<i>ADA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,100
Adrenocorticotrophic Hormone Deficiency	<i>TBX19</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 35,000
Adrenoleukodystrophy, X-Linked	<i>ABCD1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 19,000
Agammaglobulinemia	<i>BTK</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 250,000
Agenesis of the Corpus Callosum	<i>FRMD4A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,393,000
Aicardi-Goutieres Syndrome (RNASEH2C-Related)	<i>RNASEH2C</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Aicardi-Goutieres Syndrome (SAMHD1-Related)	<i>SAMHD1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Aicardi-Goutieres Syndrome (TREX1-Related)	<i>TREX1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Albinism, Oculocutaneous, Type III	<i>TYRP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,500
Alkaptonuria	<i>HGD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100
Alpha-Mannosidosis	<i>MAN2B1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,200

Alpha-Thalassemia	HBA1/HBA2	AR	Reduced Risk	HBA1 Copy Number: 2 HBA2 Copy Number: 2 No pathogenic copy number variants detected HBA1/HBA2 Sequencing: Negative Personalized Residual Risk: 1 in 10,000
Alpha-Thalassemia Intellectual Disability Syndrome	ATRX	XL	Reduced Risk	Personalized Residual Risk: 1 in 48,000
Alport Syndrome (COL4A3-Related)	COL4A3	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Alport Syndrome (COL4A4-Related)	COL4A4	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Alport Syndrome (COL4A5-Related)	COL4A5	XL	Reduced Risk	Personalized Residual Risk: 1 in 150,000
Alstrom Syndrome	ALMS1	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,800
Andermann Syndrome	SLC12A6	AR	Reduced Risk	Personalized Residual Risk: 1 in 151,000
Antley-Bixler Syndrome (POR-Related)	POR	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,000
Argininemia	ARG1	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,500
Argininosuccinic Aciduria	ASL	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Aromatase Deficiency	CYP19A1	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,400
Arthrogryposis, Intellectual Disability, and Seizures	SLC35A3	AR	Reduced Risk	Personalized Residual Risk: 1 in 454,000
Asparagine Synthetase Deficiency	ASNS	AR	Reduced Risk	Personalized Residual Risk: 1 in 202,000
Aspartylglycosaminuria	AGA	AR	Reduced Risk	Personalized Residual Risk: 1 in 13,000
Ataxia With Isolated Vitamin E Deficiency	TTPA	AR	Reduced Risk	Personalized Residual Risk: 1 in 61,000
Ataxia-Telangiectasia	ATM	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,300
Ataxia-Telangiectasia-Like Disorder 1	MRE11	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,500
Autosomal Recessive Spastic Ataxia of Charlevoix-Saguenay	SACS	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,600
BH4-Deficient Hyperphenylalaninemia C	QDPR	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,100
BH4-Deficient Hyperphenylalaninemia D	PCBD1	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,000
Bardet-Biedl Syndrome (ARL6-Related)	ARL6	AR	Reduced Risk	Personalized Residual Risk: 1 in 29,000
Bardet-Biedl Syndrome (BBS10-Related)	BBS10	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Bardet-Biedl Syndrome (BBS12-Related)	BBS12	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,900
Bardet-Biedl Syndrome (BBS1-Related)	BBS1	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,400
Bardet-Biedl Syndrome (BBS2-Related)	BBS2	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Bardet-Biedl Syndrome (BBS4-Related)	BBS4	AR	Reduced Risk	Personalized Residual Risk: 1 in 22,000
Bare Lymphocyte Syndrome, Type II	CIITA	AR	Reduced Risk	Personalized Residual Risk: 1 in 35,000
Barth Syndrome	TAZ	XL	Reduced Risk	Personalized Residual Risk: 1 in 183,000
Bartter Syndrome, Type 3	CLCNKB	AR	Reduced Risk	Personalized Residual Risk: 1 in 740
Bartter Syndrome, Type 4A	BSND	AR	Reduced Risk	Personalized Residual Risk: 1 in 91,000
Bernard-Soulier Syndrome, Type A1	GP1BA	AR	Reduced Risk	Personalized Residual Risk: 1 in 42,000
Bernard-Soulier Syndrome, Type C	GP9	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,300
Beta-Globin-Related Hemoglobinopathies	HBB	AR	Reduced Risk	Personalized Residual Risk (Beta-Globin-Related Hemoglobinopathies): 1 in 2,000 Personalized Residual Risk (Beta-Globin-Related Hemoglobinopathies: HbS Variant): 1 in 790,000 Personalized Residual Risk (Beta-Globin-Related Hemoglobinopathies: HbC Variant): 1 in 2,107,000
Beta-Ketothiolase Deficiency	ACAT1	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,400
Beta-Mannosidosis	MANBA	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,100
Bilateral Frontoparietal Polymicrogyria	GPR56	AR	Reduced Risk	Personalized Residual Risk: 1 in 203,000
Biotinidase Deficiency	BTBD	AR	Reduced Risk	Personalized Residual Risk: 1 in 500
Bloom Syndrome	BLM	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,400
Canavan Disease	ASPA	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,000
Carbamoylphosphate Synthetase I Deficiency	CPS1	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100

Carnitine Acylcarnitine Translocase Deficiency	<i>SLC25A20</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,100
Carnitine Palmitoyltransferase IA Deficiency	<i>CPT1A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 24,000
Carnitine Palmitoyltransferase II Deficiency	<i>CPT2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 670
Carpenter Syndrome	<i>RAB23</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 21,000
Cartilage-Hair Hypoplasia	<i>RMRP</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 960
Catecholaminergic Polymorphic Ventricular Tachycardia	<i>CASQ2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,900
Central Hypothyroidism and Testicular Enlargement	<i>IGSF1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 781,000
Cerebral Creatine Deficiency Syndrome 1	<i>SLC6A8</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 208,000
Cerebral Creatine Deficiency Syndrome 2	<i>GAMT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,100
Cerebral Creatine Deficiency Syndrome 3	<i>GATM</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7900
Cerebral Dysgenesis, Neuropathy, Ichthyosis, and Palmoplantar Keratoderma Syndrome	<i>SNAP29</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,730,000
Cerebrotendinous Xanthomatosis	<i>CYP27A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,900
Charcot-Marie-Tooth Disease, Type 4D	<i>NDRG1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 730,000
Charcot-Marie-Tooth Disease, Type 5 / Arts Syndrome	<i>PRPS1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 114,000
Charcot-Marie-Tooth Disease, X-Linked	<i>GJB1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Chediak-Higashi Syndrome	<i>LYST</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,100
Chondrodysplasia Punctata	<i>ARSE</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 862,000
Choreoacanthocytosis	<i>VPS13A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 13,000
Choroideremia	<i>CHM</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 125,000
Chronic Granulomatous Disease (CYBA-Related)	<i>CYBA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,000
Chronic Granulomatous Disease (CYBB-Related)	<i>CYBB</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 294,000
Citrin Deficiency	<i>SLC25A13</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Citrullinemia, Type 1	<i>ASS1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,500
Cockayne Syndrome, Type A	<i>ERCC8</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,900
Cockayne Syndrome, Type B and other ERCC6-Related Disorders	<i>ERCC6</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,100
Cohen Syndrome	<i>VPS13B</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,400
Combined Factor V and VIII Deficiency	<i>LMAN1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 102,000
Combined Malonic and Methylmalonic Aciduria	<i>ACSF3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400
Combined Oxidative Phosphorylation Deficiency 1	<i>GFM1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 13,000
Combined Oxidative Phosphorylation Deficiency 3	<i>TSMF</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 27,000
Combined Pituitary Hormone Deficiency 1	<i>POU1F1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,900
Combined Pituitary Hormone Deficiency 2	<i>PROP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,800
Combined Pituitary Hormone Deficiency 3	<i>LHX3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 140,000
Combined SAP Deficiency	<i>PSAP</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 44,000
Cone-Rod Dystrophy 6 / Leber Congenital Amaurosis 1	<i>GUCY2D</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Congenital Adrenal Hyperplasia due to 11-Beta-Hydroxylase Deficiency	<i>CYP11B1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 520
Congenital Adrenal Hyperplasia due to 17-Alpha-Hydroxylase Deficiency	<i>CYP17A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Congenital Adrenal Hyperplasia due to 21-Hydroxylase Deficiency	<i>CYP21A2</i>	AR	Reduced Risk	CYP21A2 copy number: 2 CYP21A2 sequencing: Negative Personalized Residual Risk (Congenital Adrenal Hyperplasia due to 21-Hydroxylase Deficiency (Non-Classic)): 1 in 200 Personalized Residual Risk (Congenital Adrenal Hyperplasia due to 21-Hydroxylase Deficiency (Classic)): 1 in 1,300
Congenital Adrenal Hypoplasia (NR0B1-Related)	<i>NR0B1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 353,000
Congenital Adrenal Insufficiency (CYP11A1-Related)	<i>CYP11A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,100

Congenital Amegakaryocytic Thrombocytopenia	<i>MPL</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,100
Congenital Bile Acid Synthesis Defect (AKR1D1-Related)	<i>AKR1D1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,900
Congenital Bile Acid Synthesis Defect (HSD3B7-Related)	<i>HSD3B7</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,900
Congenital Disorder of Deglycosylation	<i>NGLY1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 14,000
Congenital Disorder of Glycosylation, Type Ia	<i>PMM2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 540
Congenital Disorder of Glycosylation, Type Ib	<i>MPI</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,600
Congenital Disorder of Glycosylation, Type Ic	<i>ALG6</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,100
Congenital Disorder of Glycosylation, Type Im	<i>DOLK</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 134,000
Congenital Dyserythropoietic Anemia Type 2	<i>SEC23B</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,000
Congenital Dyserythropoietic Anemia, Type Ia	<i>CDAN1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 470
Congenital Ichthyosis 4A and 4B	<i>ABCA12</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,100
Congenital Insensitivity to Pain with Anhidrosis	<i>NTRK1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,700
Congenital Muscular Dystrophy (LAMA2-Related)	<i>LAMA2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 640
Congenital Myasthenic Syndrome (CHAT-Related)	<i>CHAT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,100
Congenital Myasthenic Syndrome (CHRNE-Related)	<i>CHRNE</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,100
Congenital Myasthenic Syndrome (DOK7-Related)	<i>DOK7</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Congenital Myasthenic Syndrome (RAPSN-Related)	<i>RAPSN</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,900
Congenital Neutropenia (HAX1-Related)	<i>HAX1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 82,000
Congenital Neutropenia (VPS45-Related)	<i>VPS45</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 163,000
Congenital Nongoitrous Hypothyroidism 1	<i>TSHR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,000
Congenital Nongoitrous Hypothyroidism 4	<i>TSHB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 118,000
Congenital Secretory Chloride Diarrhea 1	<i>SLC26A3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400
Corneal Dystrophy and Perceptive Deafness	<i>SLC4A11</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,600
Corticosterone Methyloxidase Deficiency	<i>CYP11B2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,500
Cystic Fibrosis	<i>CFTR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 440
Cystinosis	<i>CTNS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,700
Cystinuria (SLC3A1-Related)	<i>SLC3A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 590
Cytochrome C Oxidase Deficiency / Leigh Syndrome (COX15-Related)	<i>COX15</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,300
D-Bifunctional Protein Deficiency	<i>HSD17B4</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,000
Deafness, Autosomal Recessive 3	<i>MYO15A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 240
Deafness, Autosomal Recessive 59	<i>PJVK</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 57,000
Deafness, Autosomal Recessive 7	<i>TMC1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Deafness, Autosomal Recessive 76	<i>SYNE4</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 43,000
Deafness, Autosomal Recessive 77	<i>LOXHD1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,700
Deafness, Autosomal Recessive 8/10	<i>TMPPRS3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 510
Deafness, Autosomal Recessive 9	<i>OTOF</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,400
Desbuquois Dysplasia 1	<i>CANT1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 24,000
Desmosterolosis	<i>DHCR24</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 27,000
Diaphanospondylodysostosis	<i>BMPER</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 18,000
Distal Renal Tubular Acidosis and other SLC4A1-related Disorders	<i>SLC4A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,000
Duchenne Muscular Dystrophy / Becker Muscular Dystrophy	<i>DMD</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Dyskeratosis Congenita (DKC1-related)	<i>DKC1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 9,259,000
Dyskeratosis Congenita (RTEL1-Related)	<i>RTEL1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,800
Dystrophic Epidermolysis Bullosa	<i>COL7A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 900

Ehlers-Danlos Syndrome, Type VI	<i>PLOD1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 20,000
Ehlers-Danlos Syndrome, Type VIIC	<i>ADAMTS2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 243,000
Ellis-Van Creveld Syndrome (<i>EVC2</i> -Related)	<i>EVC2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,300
Ellis-van Creveld Syndrome (<i>EVC</i> -Related)	<i>EVC</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,200
Emery-Dreifuss Myopathy 1	<i>EMD</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 833,000
Enhanced S-Cone Syndrome	<i>NR2E3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,600
Ethylmalonic Encephalopathy	<i>ETHE1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,400
Fabry Disease	<i>GLA</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 7,700
Factor IX Deficiency	<i>F9</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 5,100
Factor VII Deficiency	<i>F7</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 450
Factor XI Deficiency	<i>F11</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,500
Familial Autosomal Recessive Hypercholesterolemia	<i>LDLRAP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 136,000
Familial Dysautonomia	<i>IKBKAP</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 51,000
Familial Hypercholesterolemia	<i>LDLR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 280
Familial Hyperinsulinemic Hypoglycemia 4 / 3-Hydroxyacyl-CoA Dehydrogenase Deficiency	<i>HADH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,200
Familial Hyperinsulinism (<i>ABCC8</i> -Related)	<i>ABCC8</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 450
Familial Hyperinsulinism (<i>KCNJ11</i> -Related)	<i>KCNJ11</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,300
Familial Hyperphosphatemic Tumorlike Calcinosi	<i>GALNT3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,800
Familial Mediterranean Fever	<i>MEFV</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Fanconi Anemia, Group A	<i>FANCA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100
Fanconi Anemia, Group C	<i>FANCC</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Fanconi Anemia, Group G	<i>FANCG</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 28,000
Fanconi-Bickel Syndrome	<i>SLC2A2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,000
Fragile X Syndrome	<i>FMR1</i>	XL	Reduced Risk	<i>FMR1</i> CGG repeat sizes: Not Performed <i>FMR1</i> Sequencing: Negative Fragile X CGG triplet repeat expansion testing was not performed at this time, as the patient has either been previously tested or is a male. Personalized Residual Risk: 1 in 19,000
Fructose-1,6-Bisphosphatase Deficiency	<i>FBP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,600
Fucosidosis	<i>FUCA1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,200
Fumarase Deficiency	<i>FH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,500
Fundus Albipunctatus	<i>RDH5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,000
GRACILE Syndrome and Other <i>BCS1L</i> -Related Disorders	<i>BCS1L</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,900
Galactokinase Deficiency	<i>GALK1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Galactose Epimerase Deficiency	<i>GALE</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,600
Galactosemia	<i>GALT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Galactosialidosis	<i>CTSA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,900
Gaucher Disease	<i>GBA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,300
Generalized Thyrotropin-Releasing Hormone Resistance	<i>TRHR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 104,000
Geroderma Osteodysplasticum	<i>GORAB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 70,000
Glanzmann Thrombasthenia (<i>ITGA2B</i> -Related)	<i>ITGA2B</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Glanzmann Thrombasthenia (<i>ITGB3</i> -Related)	<i>ITGB3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,600
Glutaric Acidemia, Type I	<i>GCDH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Glutaric Acidemia, Type IIa	<i>ETFA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,700
Glutaric Acidemia, Type IIb	<i>ETFB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,900
Glutaric Acidemia, Type IIc	<i>ETFDH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,700
Glutathione Synthetase Deficiency	<i>GSS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,500
Glycine Encephalopathy (<i>AMT</i> -Related)	<i>AMT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,700

Glycine Encephalopathy (GLDC-Related)	GLDC	AR	Reduced Risk	Personalized Residual Risk: 1 in 760
Glycogen Storage Disease, Type 0	GYS2	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Glycogen Storage Disease, Type II	GAA	AR	Reduced Risk	Personalized Residual Risk: 1 in 520
Glycogen Storage Disease, Type III	AGL	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,600
Glycogen Storage Disease, Type IV / Adult Polyglucosan Body Disease	GBE1	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400
Glycogen Storage Disease, Type IXb	PHKB	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,600
Glycogen Storage Disease, Type Ia	G6PC	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,300
Glycogen Storage Disease, Type Ib	SLC37A4	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,300
Glycogen Storage Disease, Type V	PYGM	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Glycogen Storage Disease, Type VI	PYGL	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,600
Glycogen Storage Disease, Type VII	PFKM	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,300
Gray Platelet Syndrome	NBEAL2	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,800
Growth Hormone Deficiency, Type IB	GHRHR	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,900
HMG-CoA Lyase Deficiency	HMGCL	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Hemochromatosis, Type 2A	HFE2	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Hemochromatosis, Type 3	TFR2	AR	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Hereditary Fructose Intolerance	ALDOB	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,900
Hereditary Spastic Paraparesis 49	TECPR2	AR	Reduced Risk	Personalized Residual Risk: 1 in 116,000
Hermansky-Pudlak Syndrome, Type 1	HPS1	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,500
Hermansky-Pudlak Syndrome, Type 3	HPS3	AR	Reduced Risk	Personalized Residual Risk: 1 in 49,000
Hermansky-Pudlak Syndrome, Type 4	HPS4	AR	Reduced Risk	Personalized Residual Risk: 1 in 35,000
Hermansky-Pudlak Syndrome, Type 6	HPS6	AR	Reduced Risk	Personalized Residual Risk: 1 in 87,000
Hmg-CoA Synthase 2 Deficiency	HMGCS2	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,000
Holocarboxylase Synthetase Deficiency	HLCS	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,500
Homocystinuria (CBS-Related)	CBS	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,400
Homocystinuria due to MTHFR Deficiency	MTHFR	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,300
Homocystinuria, cblE Type	MTRR	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,600
Homocystinuria-Megaloblastic Anemia, Cobalamin G Type	MTR	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,100
Hydrocephalus	L1CAM	XL	Reduced Risk	Personalized Residual Risk: 1 in 40,000
Hydrolethals Syndrome	HYLS1	AR	Reduced Risk	Personalized Residual Risk: 1 in 52,000
Hyper-Igm Syndrome	CD40LG	XL	Reduced Risk	Personalized Residual Risk: 1 in 1,167,000
Hyperornithinemia-Hyperammonemia-Homocitrullinuria Syndrome	SLC25A15	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,700
Hyperuricemia, Pulmonary Hypertension, Renal Failure, and Alkalosis	SARS2	AR	Reduced Risk	Personalized Residual Risk: 1 in 23,000
Hypohidrotic Ectodermal Dysplasia 1	EDA	XL	Reduced Risk	Personalized Residual Risk: 1 in 22,000
Hypomagnesemia 1	TRPM6	AR	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Hypomyelinating Leukodystrophy 3	AIMP1	AR	Reduced Risk	Personalized Residual Risk: 1 in 341,000
Hypomyelinating Leukodystrophy 12	VPS11	AR	Reduced Risk	Personalized Residual Risk: 1 in 72,000
Hypoparathyroidism-Retardation-Dysmorphic Syndrome	TBCE	AR	Reduced Risk	Personalized Residual Risk: 1 in 21,000
Hypophosphatasia	ALPL	AR	Reduced Risk	Personalized Residual Risk: 1 in 790
Hypophosphatemic Rickets with Hypercalciuria	SLC34A3	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Hypotrichosis 8 / Autosomal Recessive Woolly Hair 1	LPAR6	AR	Reduced Risk	Personalized Residual Risk: 1 in 27,000
Immunodeficiency 18	CD3E	AR	Reduced Risk	Personalized Residual Risk: 1 in 73,000
Immunodeficiency 19	CD3D	AR	Reduced Risk	Personalized Residual Risk: 1 in 46,000
Inclusion Body Myopathy 2	GNE	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,000
Infantile Cerebral and Cerebellar Atrophy	MED17	AR	Reduced Risk	Personalized Residual Risk: 1 in 129,000
Infantile Neuroaxonal Dystrophy 1 and other PLA2G6-Related Disorders	PLA2G6	AR	Reduced Risk	Personalized Residual Risk: 1 in 690

Intellectual Disability, Autosomal Recessive 3	<i>CC2D1A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 220,000
Intrahepatic Cholestasis	<i>ATP8B1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,400
Isovaleric Acidemia	<i>IVD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,000
Joubert Syndrome 2	<i>TMEM216</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 152,000
Joubert Syndrome 4 / Senior-Loken Syndrome 1 / Juvenile Nephronophthisis 1	<i>NPHP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 21,000
Joubert Syndrome 7 / Meckel Syndrome 5 / COACH Syndrome	<i>RPGRIP1L</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 32,000
Junctional Epidermolysis Bullosa (<i>COL17A1</i> -Related)	<i>COL17A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 25,000
Junctional Epidermolysis Bullosa (<i>ITGA6</i> -Related)	<i>ITGA6</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 125,000
Junctional Epidermolysis Bullosa (<i>ITGB4</i> -Related)	<i>ITGB4</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400
Junctional Epidermolysis Bullosa (<i>LAMA3</i> -Related)	<i>LAMA3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 21,000
Junctional Epidermolysis Bullosa (<i>LAMB3</i> -Related)	<i>LAMB3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,900
Junctional Epidermolysis Bullosa (<i>LAMC2</i> -Related)	<i>LAMC2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 77,000
Kohlschutter-Tonz Syndrome	<i>ROGDI</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,300
Krabbe Disease	<i>GALC</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 860
Lamellar Ichthyosis, Type 1	<i>TGM1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,500
Laron Dwarfism	<i>GHR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,700
Leber Congenital Amaurosis 10 and Other CEP290-Related Ciliopathies	<i>CEP290</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100
Leber Congenital Amaurosis 13	<i>RDH12</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,500
Leber Congenital Amaurosis 15 / Retinitis Pigmentosa 14	<i>TULP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,800
Leber Congenital Amaurosis 2 / Retinitis Pigmentosa 20	<i>RPE65</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,500
Leber Congenital Amaurosis 4	<i>AIP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,100
Leber Congenital Amaurosis 5	<i>LCA5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 14,000
Leber Congenital Amaurosis 8 / Retinitis Pigmentosa 12 / Pigmented Paravenous Chorioretinal Atrophy	<i>CRB1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 990
Leigh Syndrome (<i>NDUFS7</i> -Related)	<i>NDUFS7</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 26,000
Leigh Syndrome (<i>SURF1</i> -Related)	<i>SURF1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,400
Leigh Syndrome, French-Canadian Type	<i>LRPPRC</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 32,000
Lethal Congenital Contracture Syndrome 1 / Lethal Arthrogyposis with Anterior Horn Cell Disease	<i>GLE1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Lethal Congenital Contracture Syndrome 2	<i>ERBB3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 96,000
Lethal Congenital Contracture Syndrome 3	<i>PIP5K1C</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 318,000
Leukoencephalopathy with Vanishing White Matter	<i>EIF2B5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,300
Limb-Girdle Muscular Dystrophy, Type 2A	<i>CAPN3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 960
Limb-Girdle Muscular Dystrophy, Type 2B	<i>DYSF</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100
Limb-Girdle Muscular Dystrophy, Type 2C	<i>SGCG</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,900
Limb-Girdle Muscular Dystrophy, Type 2D	<i>SGCA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,500
Limb-Girdle Muscular Dystrophy, Type 2E	<i>SGCB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 31,000
Limb-Girdle Muscular Dystrophy, Type 2F	<i>SGCD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 52,000
Limb-Girdle Muscular Dystrophy, Type 2H	<i>TRIM32</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Limb-Girdle Muscular Dystrophy, Type 2I	<i>FKRP</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,400
Limb-Girdle Muscular Dystrophy, Type 2L	<i>ANO5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 660
Lipoamide Dehydrogenase Deficiency	<i>DLD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 14,000
Lipoid Adrenal Hyperplasia	<i>STAR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,600
Lipoprotein Lipase Deficiency	<i>LPL</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400

Long-Chain 3-Hydroxyacyl-CoA Dehydrogenase Deficiency	HADHA	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,900
Lowe Syndrome	OCRL	XL	Reduced Risk	Personalized Residual Risk: 1 in 1,375,000
Lysinuric Protein Intolerance	SLC7A7	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,000
MEDNIK Syndrome	AP1S1	AR	Reduced Risk	Personalized Residual Risk: 1 in 211,000
Malonyl-CoA Decarboxylase Deficiency	MLYCD	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,800
Maple Syrup Urine Disease, Type 1a	BCKDHA	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,100
Maple Syrup Urine Disease, Type 1b	BCKDHB	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100
Maple Syrup Urine Disease, Type 2	DBT	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,600
Meckel Syndrome 1 / Bardet-Biedl Syndrome 13	MKS1	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,700
Medium Chain Acyl-CoA Dehydrogenase Deficiency	ACADM	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Megalencephalic Leukoencephalopathy with Subcortical Cysts	MLC1	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,300
Megaloblastic Anemia 1	AMN	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,300
Menkes Disease	ATP7A	XL	Reduced Risk	Personalized Residual Risk: 1 in 172,000
Metachromatic Leukodystrophy	ARSA	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,000
Methionine Adenosyltransferase I/III Deficiency	MAT1A	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,900
Methylmalonic Acidemia (MMAA-Related)	MMAA	AR	Reduced Risk	Personalized Residual Risk: 1 in 15,000
Methylmalonic Acidemia (MMAB-Related)	MMAB	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Methylmalonic Acidemia (MUT-Related)	MUT	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,300
Methylmalonic Aciduria and Homocystinuria, Cobalamin C Type	MMACHC	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,800
Methylmalonic Aciduria and Homocystinuria, Cobalamin D Type	MMADHC	AR	Reduced Risk	Personalized Residual Risk: 1 in 219,000
Methylmalonic Aciduria and Homocystinuria, Cobalamin F Type	LMBRD1	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,600
Methylmalonyl-CoA Epimerase Deficiency	MCEE	AR	Reduced Risk	Personalized Residual Risk: 1 in 98,000
Microphthalmia / Anophthalmia	VSX2	AR	Reduced Risk	Personalized Residual Risk: 1 in 40,000
Mitochondrial Complex I Deficiency (ACAD9-Related)	ACAD9	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Mitochondrial Complex I Deficiency (NDUFA11-Related)	NDUFA11	AR	Reduced Risk	Personalized Residual Risk: 1 in 414,000
Mitochondrial Complex I Deficiency (NDUFAF5-Related)	NDUFAF5	AR	Reduced Risk	Personalized Residual Risk: 1 in 98,000
Mitochondrial Complex I Deficiency (NDUFS6-Related)	NDUFS6	AR	Reduced Risk	Personalized Residual Risk: 1 in 353,000
Mitochondrial Complex I Deficiency (NDUFV1-Related)	NDUFV1	AR	Reduced Risk	Personalized Residual Risk: 1 in 870
Mitochondrial Complex I Deficiency / Leigh Syndrome (FOXRED1-Related)	FOXRED1	AR	Reduced Risk	Personalized Residual Risk: 1 in 13,000
Mitochondrial Complex I Deficiency / Leigh Syndrome (NDUFAF2-Related)	NDUFAF2	AR	Reduced Risk	Personalized Residual Risk: 1 in 168,000
Mitochondrial Complex I Deficiency / Leigh Syndrome (NDUFS4-Related)	NDUFS4	AR	Reduced Risk	Personalized Residual Risk: 1 in 41,000
Mitochondrial Complex IV Deficiency (COX20-related)	COX20	AR	Reduced Risk	Personalized Residual Risk: 1 in 42,000
Mitochondrial Complex IV Deficiency (COX6B1-related)	COX6B1	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,116,000
Mitochondrial Complex IV Deficiency (APOPT1-Related)	APOPT1	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,200
Mitochondrial Complex IV Deficiency (PET100-Related)	PET100	AR	Reduced Risk	Personalized Residual Risk: 1 in 469,000
Mitochondrial Complex IV Deficiency (SCO1-related)	SCO1	AR	Reduced Risk	Personalized Residual Risk: 1 in 13,000
Mitochondrial Complex IV Deficiency / Leigh Syndrome (COX10-Related)	COX10	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,200
Mitochondrial DNA Depletion Syndrome 2	TK2	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,900
Mitochondrial DNA Depletion Syndrome 3	DGUOK	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,200

Mitochondrial DNA Depletion Syndrome 4A and 4B and other <i>POLG</i> -Related Disorders	<i>POLG</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 320
Mitochondrial DNA Depletion Syndrome 5	<i>SUCLA2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 78,000
Mitochondrial DNA Depletion Syndrome 6 / Navajo Neurohepatopathy	<i>MPV17</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,400
Mitochondrial Myopathy and Sideroblastic Anemia 1	<i>PUS1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 449,000
Mitochondrial Trifunctional Protein Deficiency (<i>HADHB</i> -Related)	<i>HADHB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,000
Molybdenum Cofactor Deficiency A	<i>MOCS1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,700
Mucopolipidosis II / IIIA	<i>GNPTAB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,100
Mucopolipidosis III Gamma	<i>GNPTG</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 68,000
Mucopolipidosis IV	<i>MCOLN1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,400
Mucopolysaccharidosis Type I	<i>IDUA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,300
Mucopolysaccharidosis Type II	<i>IDS</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 76,000
Mucopolysaccharidosis Type IIIA	<i>SGSH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Mucopolysaccharidosis Type IIIB	<i>NAGLU</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 950
Mucopolysaccharidosis Type IIIC	<i>HGSNAT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Mucopolysaccharidosis Type IIID	<i>GNS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 137,000
Mucopolysaccharidosis Type IVa	<i>GALNS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 690
Mucopolysaccharidosis Type IVb / GM1 Gangliosidosis	<i>GLB1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,700
Mucopolysaccharidosis VII	<i>GUSB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,600
Mucopolysaccharidosis type IX	<i>HYAL1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 149,000
Mucopolysaccharidosis type VI	<i>ARSB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,300
Mulibrey Nanism	<i>TRIM37</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 31,000
Multiple Congenital Anomalies-Hypotonia-Seizures Syndrome 1	<i>PIGN</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,800
Multiple Pterygium Syndrome	<i>CHRNA3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,900
Multiple Sulfatase Deficiency	<i>SUMF1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 69,000
Muscle-Eye-Brain Disease and Other <i>POMGNT1</i> -Related Congenital Muscular Dystrophy-Dystroglycanopathies	<i>POMGNT1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,200
Myoneurogastrointestinal Encephalopathy	<i>TYMP</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,100
Myotubular Myopathy 1	<i>MTM1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 192,000
N-Acetylglutamate Synthase Deficiency	<i>NAGS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Nemaline Myopathy 2	<i>NEB</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400
Nephrogenic Diabetes Insipidus, Type II	<i>AQP2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,400
Nephrogenic Diabetes insipidus (<i>AVPR2</i> -related)/ Nephrogenic Syndrome of Inappropriate Antidiuresis	<i>AVPR2</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 471,000
Nephronophthisis 2	<i>INVS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 56,000
Nephrotic Syndrome (<i>NPHS1</i> -Related) / Congenital Finnish Nephrosis	<i>NPHS1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 920
Neurodegeneration due to Cerebral Folate Transport Deficiency	<i>FOLR1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,300
Neurodevelopmental Disorder with Progressive Microcephaly, Spasticity, and Brain Anomalies	<i>PLAA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 229,000
Neuronal Ceroid-Lipofuscinosis (<i>CLN5</i> -Related)	<i>CLN5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,300
Neuronal Ceroid-Lipofuscinosis (<i>CLN6</i> -Related)	<i>CLN6</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,600
Neuronal Ceroid-Lipofuscinosis (<i>CLN8</i> -Related)	<i>CLN8</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,100
Neuronal Ceroid-Lipofuscinosis (<i>MFSD8</i> -Related)	<i>MFSD8</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,200
Neuronal Ceroid-Lipofuscinosis (<i>PPT1</i> -Related)	<i>PPT1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,500
Neuronal Ceroid-Lipofuscinosis (<i>TPP1</i> -Related)	<i>TPP1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,300
Niemann-Pick Disease (<i>SMPD1</i> -Related)	<i>SMPD1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800

Niemann-Pick Disease, Type C (NPC1-Related)	<i>NPC1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 690
Niemann-Pick Disease, Type C (NPC2-Related)	<i>NPC2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,600
Nijmegen Breakage Syndrome	<i>NBN</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 14,000
Non-Syndromic Hearing Loss (GJB2-Related)	<i>GJB2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 600
Oculocutaneous Albinism, Type IA / IB	<i>TYR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 240
Oculocutaneous Albinism, Type IV	<i>SLC45A2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 830
Odonto-Onycho-Dermal Dysplasia / Schopf-Schulz-Passarge Syndrome	<i>WNT10A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,900
Omenn Syndrome (RAG2-Related)	<i>RAG2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 17,000
Omenn Syndrome / Severe Combined Immunodeficiency, Athabaskan-Type	<i>DCLRE1C</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,500
Omenn Syndrome and other RAG1-Related Disorders	<i>RAG1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 850
Ornithine Transcarbamylase Deficiency	<i>OTC</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 103,000
Osteogenesis Imperfecta, Type XI	<i>FKBP10</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,500
Osteopetrosis 1	<i>TCIRG1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,700
Osteopetrosis 8	<i>SNX10</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 16,000
Otospondylomegaepiphyseal Dysplasia / Deafness / Fibrochondrogenesis 2	<i>COL11A2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Papillon-Lefevre Syndrome	<i>CTSC</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,000
Pendred Syndrome	<i>SLC26A4</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 390
Peroxisome Biogenesis Disorder 3A and 3B	<i>PEX12</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 30,000
Peroxisome Biogenesis Disorder 7A and 7B	<i>PEX26</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 70,000
Phenylalanine Hydroxylase Deficiency	<i>PAH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 340
Polycystic Kidney Disease, Autosomal Recessive	<i>PKHD1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 450
Polyglandular Autoimmune Syndrome, Type 1	<i>AIRE</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,300
Pontocerebellar Hypoplasia, Type 1A	<i>VRK1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 25,000
Pontocerebellar Hypoplasia, Type 1B	<i>EXOSC3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Pontocerebellar Hypoplasia, Type 2A and Type 4	<i>TSEN54</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,700
Pontocerebellar Hypoplasia, Type 2E	<i>VPS53</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 139,000
Pontocerebellar Hypoplasia, Type 6	<i>RARS2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,600
Primary Carnitine Deficiency	<i>SLC22A5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,500
Primary Ciliary Dyskinesia (CCDC103-Related)	<i>CCDC103</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 27,000
Primary Ciliary Dyskinesia (CCDC151-Related)	<i>CCDC151</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 59,000
Primary Ciliary Dyskinesia (CCDC39-Related)	<i>CCDC39</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Primary Ciliary Dyskinesia (DNAH5-Related)	<i>DNAH5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,500
Primary Ciliary Dyskinesia (DNAI1-Related)	<i>DNAI1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,000
Primary Ciliary Dyskinesia (DNAI2-Related)	<i>DNAI2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 76,000
Primary Ciliary Dyskinesia (RSPH9-Related)	<i>RSPH9</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 253,000
Primary Coenzyme Q10 Deficiency 7	<i>COQ4</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Primary Congenital Glaucoma 3A	<i>CYP1B1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 880
Primary Hyperoxaluria, Type 1	<i>AGXT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,900
Primary Hyperoxaluria, Type 2	<i>GRHPR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Primary Hyperoxaluria, Type 3	<i>HOGA1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,400
Progressive Cerebello-Cerebral Atrophy	<i>SEPSECS</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,400
Progressive Familial Intrahepatic Cholestasis, Type 2	<i>ABCB11</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 950
Progressive Myoclonic Epilepsy, Type 1B	<i>PRICKLE1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 98,000
Progressive Pseudorheumatoid Dysplasia	<i>WISP3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,600
Prolidase Deficiency	<i>PEPD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 30,000
Propionic Acidemia (PCCA-Related)	<i>PCCA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,600

Propionic Acidemia (PCCB-Related)	PCCB	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Pulmonary Surfactant Dysfunction	ABCA3	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Pycnodysostosis	CTSK	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,100
Pyridoxamine 5'-Phosphate Oxidase Deficiency	PNPO	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Pyridoxine-Dependent Epilepsy	ALDH7A1	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,100
Pyruvate Carboxylase Deficiency	PC	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,000
Pyruvate Dehydrogenase E1-Alpha Deficiency	PDHA1	XL	Reduced Risk	Personalized Residual Risk: 1 in 139,000
Pyruvate Dehydrogenase E1-Beta Deficiency	PDHB	AR	Reduced Risk	Personalized Residual Risk: 1 in 15,000
Renal Tubular Acidosis and Deafness	ATP6V1B1	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,600
Retinitis Pigmentosa 25	EYS	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Retinitis Pigmentosa 26	CERKL	AR	Reduced Risk	Personalized Residual Risk: 1 in 13,000
Retinitis Pigmentosa 28	FAM161A	AR	Reduced Risk	Personalized Residual Risk: 1 in 34,000
Retinitis Pigmentosa 36	PRCD	AR	Reduced Risk	Personalized Residual Risk: 1 in 304,000
Retinitis Pigmentosa 59	DHDDS	AR	Reduced Risk	Personalized Residual Risk: 1 in 601,000
Retinitis Pigmentosa 64 / Bardet-Biedl Syndrome 21 / Cone-Rod Dystrophy 16	C8ORF37	AR	Reduced Risk	Personalized Residual Risk: 1 in 168,000
Rh Deficiency Syndrome	RHAG	AR	Reduced Risk	Personalized Residual Risk: 1 in 46,000
Rhizomelic Chondrodysplasia Punctata, Type 1	PEX7	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Rhizomelic Chondrodysplasia Punctata, Type 3	AGPS	AR	Reduced Risk	Personalized Residual Risk: 1 in 620,000
Roberts Syndrome	ESCO2	AR	Reduced Risk	Personalized Residual Risk: 1 in 139,000
Salla Disease	SLC17A5	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,400
Salt and Pepper Developmental Regression Syndrome	ST3GAL5	AR	Reduced Risk	Personalized Residual Risk: 1 in 25,000
Sandhoff Disease	HEXB	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Schimke Immunoosseous Dysplasia	SMARCAL1	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,800
Seckel Syndrome 5 / Microcephaly 9	CEP152	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,700
Segawa Syndrome	TH	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,100
Sepiapterin Reductase Deficiency	SPR	AR	Reduced Risk	Personalized Residual Risk: 1 in 35,000
Severe Combined Immunodeficiency (IL7R-Related)	IL7R	AR	Reduced Risk	Personalized Residual Risk: 1 in 20,000
Severe Combined Immunodeficiency (JAK3-Related)	JAK3	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,100
Severe Combined Immunodeficiency (PTPRC-Related)	PTPRC	AR	Reduced Risk	Personalized Residual Risk: 1 in 8,500
Severe Congenital Neutropenia 4	G6PC3	AR	Reduced Risk	Personalized Residual Risk: 1 in 10,000
Severe Neonatal Hyperparathyroidism	CASR	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,700
Short Stature, Onychodysplasia, Facial Dysmorphism, and Hypotrichosis	POC1A	AR	Reduced Risk	Personalized Residual Risk: 1 in 108,000
Short-Chain Acyl-CoA Dehydrogenase Deficiency	ACADS	AR	Reduced Risk	Personalized Residual Risk: 1 in 660
Shwachman-Diamond Syndrome	SBDS	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,700
Sialidosis, Type I and Type II	NEU1	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,000
Sjogren-Larsson Syndrome	ALDH3A2	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,500
Smith-Lemli-Opitz Syndrome	DHCR7	AR	Reduced Risk	Personalized Residual Risk: 1 in 750
Spastic Paraplegia 15	ZFYVE26	AR	Reduced Risk	Personalized Residual Risk: 1 in 46,000
Spastic Tetraplegia, Thin Corpus Callosum, and Progressive Microcephaly	SLC1A4	AR	Reduced Risk	Personalized Residual Risk: 1 in 855,000
Spherocytosis, Type 5	EPB42	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Spinal Muscular Atrophy	SMN1	AR	Reduced Risk	SMN1 copy number: >=3 SMN2 copy number: 2 c.3+80T>G: Negative SMN1 Sequencing: Negative Personalized Residual Risk: 1 in 1,107 As additional gene copies are present, the patient's residual risk is expected to be lower than displayed

Spinal Muscular Atrophy with Respiratory Distress 1 / Charcot-Marie-Tooth Disease, Type 2S	<i>IGHMBP2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,200
Spinocerebellar Ataxia with Axonal Neuropathy 3	<i>COA7</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Spondylocostal Dysostosis 1	<i>DLL3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,200
Spondylometaepiphyseal Dysplasia (DDR2-Related)	<i>DDR2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 236,000
Spondylothoracic Dysostosis	<i>MESP2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 382,000
Steel Syndrome	<i>COL27A1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 93,000
Stuve-Wiedemann Syndrome	<i>LIFR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,000
Sulfate Transporter-Related Osteochondrodysplasia	<i>SLC26A2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Tay-Sachs Disease	<i>HEXA</i>	AR	Reduced Risk	Tay-Sachs disease enzyme: Non-carrier White blood cells: Non-carrier <ul style="list-style-type: none"> Hex A%: 62.7% (Non-carrier : 55.0 - 72.0%; Carrier: <50%) Total hexosaminidase activity: 1667 nmol/hr/mg Plasma: Non-carrier <ul style="list-style-type: none"> Hex A%: 58.1 (Non-carrier : 58.0 - 72.0%; Carrier: <54%) Total hexosaminidase activity: 673 nmol/hr/ml HEXA Sequencing: Negative Personalized Residual Risk: 1 in 1,400
Thiamine-Responsive Megaloblastic Anemia Syndrome	<i>SLC19A2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Thyroid Dysmorphogenesis 1	<i>SLC5A5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 45,000
Thyroid Dysmorphogenesis 2A	<i>TPO</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 910
Thyroid Dysmorphogenesis 3	<i>TG</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 850
Thyroid Dysmorphogenesis 4	<i>IYD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,800
Thyroid Dysmorphogenesis 5	<i>DUOXA2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 29,000
Thyroid Dysmorphogenesis 6	<i>DUOX2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 190
Trichohepatoenteric Syndrome 1	<i>TTC37</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 14,000
Tyrosinemia, Type I	<i>FAH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,900
Tyrosinemia, Type II	<i>TAT</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,800
Tyrosinemia, Type III	<i>HPD</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 266,000
Usher Syndrome, Type IB	<i>MYO7A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,000
Usher Syndrome, Type IC	<i>USH1C</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,600
Usher Syndrome, Type ID	<i>CDH23</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,400
Usher Syndrome, Type IF	<i>PCDH15</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,800
Usher Syndrome, Type IIA	<i>USH2A</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 290
Usher Syndrome, Type III	<i>CLRN1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,300
Very Long Chain Acyl-CoA Dehydrogenase Deficiency	<i>ACADVL</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 920
Vitamin D-Dependent Rickets, Type I	<i>CYP27B1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 7,900
Vitamin D-Resistant Rickets, Type IIA	<i>VDR</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 17,000
Walker-Warburg Syndrome and Other FKTN-Related Dystrophies	<i>FKTN</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 4,200
Werner Syndrome	<i>WRN</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 9,200
Wilson Disease	<i>ATP7B</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 350
Wiskott-Aldrich Syndrome (WAS-Related)	<i>WAS</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 1,203,000
Wolcott-Rallison Syndrome	<i>EIF2AK3</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 22,000

Wolman Disease / Cholesteryl Ester Storage Disease	<i>LIPA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,200
Woodhouse-Sakati Syndrome	<i>DCAF17</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 81,000
X-Linked Juvenile Retinoschisis	<i>RS1</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 40,000
X-Linked Severe Combined Immunodeficiency	<i>IL2RG</i>	XL	Reduced Risk	Personalized Residual Risk: 1 in 250,000
Xeroderma Pigmentosum (POLH-Related)	<i>POLH</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 5,900
Xeroderma Pigmentosum, Group A	<i>XPA</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 11,000
Xeroderma Pigmentosum, Group C	<i>XPC</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 12,000
Xeroderma Pigmentosum, Group G	<i>ERCC5</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 3,000
Zellweger Syndrome Spectrum (PEX10-Related)	<i>PEX10</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 6,300
Zellweger Syndrome Spectrum (PEX1-Related)	<i>PEX1</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 2,000
Zellweger Syndrome Spectrum (PEX2-Related)	<i>PEX2</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 77,000
Zellweger Syndrome Spectrum (PEX6-Related)	<i>PEX6</i>	AR	Reduced Risk	Personalized Residual Risk: 1 in 1,600

AR=Autosomal recessive; XL=X-linked

Test methods and comments

Genomic DNA isolated from this patient was analyzed by one or more of the following methodologies, as applicable:

Fragile X CGG Repeat Analysis (Analytical Detection Rate >99%)

PCR amplification using Asuragen, Inc. AmpliX[®] *FMR1* PCR reagents followed by capillary electrophoresis for allele sizing was performed. Samples positive for *FMR1* CGG repeats in the premutation and full mutation size range were further analyzed by Southern blot analysis to assess the size and methylation status of the *FMR1* CGG repeat.

Genotyping (Analytical Detection Rate >99%)

Multiplex PCR amplification and allele specific primer extension analyses using the MassARRAY[®] System were used to identify certain recurrent variants that are complex in nature or are present in low copy repeats. Rare sequence variants may interfere with assay performance.

Multiplex Ligation-Dependent Probe Amplification (MLPA) (Analytical Detection Rate >99%)

MLPA[®] probe sets and reagents from MRC-Holland were used for copy number analysis of specific targets versus known control samples. False positive or negative results may occur due to rare sequence variants in target regions detected by MLPA probes. Analytical sensitivity and specificity of the MLPA method are both 99%.

For alpha thalassemia, the copy numbers of the *HBA1* and *HBA2* genes were analyzed. Alpha-globin gene deletions, triplications, and the Constant Spring (CS) mutation are assessed. This test is expected to detect approximately 90% of all alpha-thalassemia mutations, varying by ethnicity, carriers of alpha-thalassemia with three or more *HBA* copies on one chromosome, and one or no copies on the other chromosome, may not be detected. With the exception of triplications, other benign alpha-globin gene polymorphisms will not be reported. Analyses of *HBA1* and *HBA2* are performed in association with long-range PCR of the coding regions followed by short-read sequencing.

For Duchenne muscular dystrophy, the copy numbers of all *DMD* exons were analyzed. Potentially pathogenic single exon deletions and duplications are confirmed by a second method. Analysis of *DMD* is performed in association with sequencing of the coding regions.

For congenital adrenal hyperplasia, the copy number of the *CYP21A2* gene was analyzed. This analysis can detect large deletions typically due to unequal meiotic crossing-over between *CYP21A2* and the pseudogene *CYP21A1P*. Classic 30-kb deletions make up approximately 20% of *CYP21A2* pathogenic alleles. This test may also identify certain point mutations in *CYP21A2* caused by gene conversion events between *CYP21A2* and *CYP21A1P*. Some carriers may not be identified by dosage sensitive methods as this testing cannot detect individuals with two copies (duplication) of the *CYP21A2* gene on one chromosome and loss of *CYP21A2* (deletion) on the other chromosome. Analysis of *CYP21A2* is performed in association with long-range PCR of the coding regions followed by short-read sequencing.

For spinal muscular atrophy (SMA), the copy numbers of the *SMN1* and *SMN2* genes were analyzed. The individual dosage of exons 7 and 8 as well as the combined dosage of exons 1, 4, 6 and 8 of *SMN1* and *SMN2* were assessed. Copy number gains and losses can be detected with this assay. Depending on ethnicity, 6 - 29 % of carriers will not be identified by dosage sensitive methods as this testing cannot detect individuals with two copies (duplication) of the *SMN1* gene on one chromosome and loss of *SMN1* (deletion) on the other chromosome (silent 2+0 carrier) or individuals that carry an intragenic mutation in *SMN1*. Please also note that 2% of individuals diagnosed with SMA have a causative *SMN1* variant that occurred *de novo*, and therefore cannot be picked up by carrier screening in the parents. Analysis of *SMN1* is performed in association with short-read sequencing of exons 2a-7, followed by confirmation using long-range PCR (described below).

The presence of the c.*3+80T>G (chr5:70,247,901T>G) variant allele in an individual with Ashkenazi Jewish or Asian ancestry is typically indicative of a duplication of *SMN1*. When present in an Ashkenazi Jewish or Asian individual with two copies of *SMN1*, c.*3+80T>G is likely indicative of a silent (2+0) carrier. In individuals with two copies of *SMN1* with African American, Hispanic or Caucasian ancestry, the presence or absence of c.*3+80T>G significantly increases or decreases, respectively, the likelihood of being a silent 2+0 silent carrier.

MLPA for Gaucher disease (*GBA*), cystic fibrosis (*CFTR*), and non-syndromic hearing loss (*GJB2/GJB6*) will only be performed if indicated for confirmation of detected CNVs. If *GBA* analysis was performed, the copy numbers of exons 1, 3, 4, and 6 - 10 of the *GBA* gene (of 11 exons total) were analyzed. If *CFTR* analysis was performed, the copy numbers of all 27 *CFTR* exons were analyzed. If *GJB2/GJB6* analysis was performed, the copy number of the two *GJB2* exons were analyzed, as well as the presence or absence of the two upstream deletions of the *GJB2* regulatory region, del(*GJB6*-D13S1830) and del(*GJB6*-D13S1854).

Next Generation Sequencing (NGS) (Analytical Detection Rate >95%)

NGS was performed on a panel of genes for the purpose of identifying pathogenic or likely pathogenic variants.

Agilent SureSelect™XT Low Input technology was used with a custom capture library to target the exonic regions and intron/exon splice junctions of the relevant genes, as well as a number of UTR, intronic or promoter regions that contain previously reported mutations. Libraries were pooled and sequenced on the Illumina NovaSeq 9000 platform, using paired-end 100 bp reads. The sequencing data was analyzed using a custom bioinformatics algorithm designed and validated in house.

The coding exons and splice junctions of the known protein-coding RefSeq genes were assessed for the average depth of coverage (minimum of 20X) and data quality threshold values. Most exons not meeting a minimum of >20X read depth across the exon are further analyzed by Sanger sequencing. Please note that several genomic regions present difficulties in mapping or obtaining read depth >20X. These regions, which are described below, will not be reflexed to Sanger sequencing if the mapping quality or coverage is poor. Any variants identified during testing in these regions are confirmed by a second method and reported if determined to be pathogenic or likely pathogenic. However, as there is a possibility of false negative results within these regions, detection rates and residual risks for these genes have been calculated with the presumption that variants in these exons will not be detected, unless included in the MassARRAY® genotyping platform.

Exceptions: *ABCD1* (NM_000033.3) exons 8 and 9; *ACADSB* (NM_001609.3) chr10:124,810,695-124,810,707 (partial exon 9); *ADA* (NM_000022.2) exon 1; *ADAMTS2* (NM_014244.4) exon 1; *AGPS* (NM_003659.3) chr2:178,257,512-178,257,649 (partial exon 1); *ALDH7A1* (NM_001182.4) chr5:125,911,150-125,911,163 (partial exon 7) and chr5:125,896,807-125,896,821 (partial exon 10); *ALMS1* (NM_015120.4) chr2:73,612,990-73,613,041 (partial exon 1); *APOPT1* (NM_032374.4) chr14:104,040,437-104,040,455 (partial exon 3); *CDAN1* (NM_138477.2) exon 2; *CEP152* (NM_014985.3) chr15:49,061,146-49,061,165 (partial exon 14) and exon 22; *CEP290* (NM_025114.3) exon 5, exon 7, chr12:88,519,017-88,519,039 (partial exon 13), chr12:88,514,049-88,514,058 (partial exon 15), chr12:88,502,837-88,502,841 (partial exon 23), chr12:88,481,551-88,481,589 (partial exon 32), chr12:88,471,605-88,471,700 (partial exon 40); *CFTR* (NM_000492.3) exon 10; *COL4A4* (NM_000092.4) chr2:227,942,604-227,942,619 (partial exon 25); *COX10* (NM_001303.3) exon 6; *CYP11B1* (NM_000497.3) exons 3-7; *CYP11B2* (NM_000498.3) exons 3-7; *DNAI2* (NM_023036.4) chr17:72,308,136-72,308,147 (partial exon 12); *DOK7* (NM_173660.4) chr4:3,465,131-3,465,161 (partial exon 1) and exon 2; *DUOX2* (NM_014080.4) exons 6-8; *EIF2AK3* (NM_004836.5) exon 8; *EVC* (NM_153717.2) exon 1; *FH* (NM_000143.3) exon 1; *GAMT* (NM_000156.5) exon 1; *GLDC* (NM_000170.2) exon 1; *GNPTAB* (NM_024312.4) chr17:4,837,000-4,837,400 (partial exon 2); *GNPTG* (NM_032520.4) exon 1; *GHR* (NM_000163.4) exon 3; *GYS2* (NM_021957.3) chr12:21,699,370-21,699,409 (partial exon 12); *HGSNAT* (NM_152419.2) exon 1; *IDS* (NM_000202.6) exon 3; *ITGB4* (NM_000213.4) chr17:73,749,976-73,750,060 (partial exon 33); *JAK3* (NM_000215.3) chr19:17,950,462-17,950,483 (partial exon 10); *LIFR* (NM_002310.5) exon 19; *LMBRD1* (NM_018368.3) chr6:70,459,226-70,459,257 (partial exon 5), chr6:70,447,828-70,447,836 (partial exon 7) and exon 12; *LYST* (NM_000081.3) chr1:235,944,158-235,944,176 (partial exon 16) and chr1:235,875,350-235,875,362 (partial exon 43); *MLYCD* (NM_012213.2) chr16:83,933,242-83,933,282 (partial exon 1); *MTR* (NM_000254.2) chr1:237,024,418-237,024,439 (partial exon 20) and chr1:237,038,019-237,038,029 (partial exon 24); *NBEAL2* (NM_015175.2) chr3:47,021,385-47,021,407 (partial exon 1); *NEB* (NM_001271208.1) exons 82-105; *NPC1* (NM_000271.4) chr18:21,123,519-21,123,538 (partial exon 14); *NPHP1* (NM_000272.3) chr2:110,937,251-110,937,263 (partial exon 3); *OCRL* (NM_000276.3) chrX:128,674,450-128,674,460 (partial exon 1); *PHKB* (NM_000293.2) exon 1 and chr16:47,732,498-47,732,504 (partial exon 30); *PIGN* (NM_176787.4) chr18:59,815,547-59,815,576 (partial exon 8); *PIP5K1C* (NM_012398.2) exon 1 and chr19:3637602-3637616 (partial exon 17); *POU1F1* (NM_000306.3) exon 5; *PTPRC* (NM_002838.4) exons 11 and 23; *PUS1* (NM_025215.5) chr12:132,414,446-132,414,532 (partial exon 2); *RPGRIP1L* (NM_015272.2) exon 23; *SGSH* (NM_000199.3) chr17:78,194,022-78,194,072 (partial exon 1); *SLC6A8* (NM_005629.3) exons 3 and 4; *ST3GAL5* (NM_003896.3) exon 1; *SURF1* (NM_003172.3) chr9:136,223,269-136,223,307 (partial exon 1); *TRPM6* (NM_017662.4) chr9:77,362,800-77,362,811 (partial exon 31); *TSEN54* (NM_207346.2) exon 1; *TYR* (NM_000372.4) exon 5; *VWF* (NM_000552.3) exons 24-26, chr12:6,125,675-6,125,684 (partial exon 30), chr12:6,121,244-6,121,265 (partial exon 33), and exon 34.

This test will detect variants within the exons and the intron-exon boundaries of the target regions. Variants outside these regions may not be detected, including, but not limited to, UTRs, promoters, and deep intronic areas, or regions that fall into the Exceptions mentioned above. This technology may not detect all small insertion/deletions and is not diagnostic for repeat expansions and structural genomic variation. In addition, a mutation(s) in a gene not included on the panel could be present in this patient.

Variation interpretation and classification was performed based on the American College of Medical Genetics Standards and Guidelines for the Interpretation of Sequence Variants (Richards et al, 2015). All potentially pathogenic variants may be confirmed by either a specific genotyping assay or Sanger sequencing, if indicated. Any benign variants, likely benign variants or variants of uncertain significance identified during this analysis will not be reported.

Next Generation Sequencing for SMN1

Exonic regions and intron/exon splice junctions of *SMN1* and *SMN2* were captured, sequenced, and analyzed as described above. Any variants located within exons 2a-7 and classified as pathogenic or likely pathogenic were confirmed to be in either *SMN1* or *SMN2* using gene-specific long-range PCR analysis followed by Sanger sequencing. Variants located in exon 1 cannot be accurately assigned to either *SMN1* or *SMN2* using our current methodology, and so these variants are considered to be of uncertain significance and are not reported.

Copy Number Variant Analysis (Analytical Detection Rate >95%)

Large duplications and deletions were called from the relative read depths on an exon-by-exon basis using a custom exome hidden Markov model (XHMM) algorithm. Deletions or duplications determined to be pathogenic or likely pathogenic were confirmed by either a custom arrayCGH platform, quantitative PCR, or MLPA (depending on CNV size and gene content). While this algorithm is designed to pick up deletions and duplications of 2 or more exons in length, potentially pathogenic single-exon CNVs will be confirmed and reported, if detected.

Exon Array (Confirmation method) (Accuracy >99%)

The customized oligonucleotide microarray (Oxford Gene Technology) is a highly-targeted exon-focused array capable of detecting medically relevant microdeletions and microduplications at a much higher resolution than traditional aCGH methods. Each array matrix has approximately 180,000 60-mer oligonucleotide probes that cover the entire genome. This platform is designed based on human genome NCBI Build 37 (hg19) and the CGH probes are enriched to target the exonic regions of the genes in this panel.

Quantitative PCR (Confirmation method) (Accuracy >99%)

The relative quantification PCR is utilized on a Roche Universal Library Probe (UPL) system, which relates the PCR signal of the target region in one group to another. To test for genomic imbalances, both sample DNA and reference DNA is amplified with primer/probe sets that specific to the target region and a control region with known genomic copy number. Relative genomic copy numbers are calculated based on the standard $\Delta\Delta C_t$ formula.

Long-Range PCR (Analytical Detection Rate >99%)

Long-range PCR was performed to generate locus-specific amplicons for *CYP21A2*, *HBA1* and *HBA2* and *GBA*. The PCR products were then prepared for short-read NGS sequencing and sequenced. Sequenced reads were mapped back to the original genomic locus and run through the bioinformatics pipeline. If indicated, copy number from MLPA was correlated with the sequencing output to analyze the results. For *CYP21A2*, a certain percentage of healthy individuals carry a duplication of the *CYP21A2* gene, which has no clinical consequences. In cases where two copies of a gene are located on the same chromosome in tandem, only the second copy will be amplified and assessed for potentially pathogenic variants, due to size limitations of the PCR reaction. However, because these alleles contain at least two copies of the *CYP21A2* gene in tandem, it is expected that this patient has at least one functional gene in the tandem allele and this patient is therefore less likely to be a carrier. When an individual carries both a duplication allele and a pathogenic variant, or multiple pathogenic variants, the current analysis may not be able to determine the phase (cis/trans configuration) of the *CYP21A2* alleles identified. Family studies may be required in certain scenarios where phasing is required to determine the carrier status.

Residual Risk Calculations

Carrier frequencies and detection rates for each ethnicity were calculated through the combination of internal curations of >30,000 variants and genomic frequency data from >138,000 individuals across seven ethnic groups in the gnomAD database. Additional variants in HGMD and novel deleterious variants were also incorporated into the calculation. Residual risk values are calculated using a Bayesian analysis combining the *a priori* risk of being a pathogenic mutation carrier (carrier frequency) and the detection rate. They are provided only as a guide for assessing approximate risk given a negative result, and values will vary based on the exact ethnic background of an individual. This report does not represent medical advice but should be interpreted by a genetic counselor, medical geneticist or physician skilled in genetic result interpretation and the relevant medical literature.

Personalized Residual Risk Calculations

Agilent SureSelectTMXT Low-Input technology was utilized in order to create whole-genome libraries for each patient sample. Libraries were then pooled and sequenced on the Illumina NovaSeq platform. Each sequencing lane was multiplexed to achieve 0.4-2x genome coverage, using paired-end 100 bp reads. The sequencing data underwent ancestral analysis using a customized, licensed bioinformatics algorithm that was validated in house. Identified sub-ethnic groupings were binned into one of 7 continental-level groups (African, East Asian, South Asian, Non-Finnish European, Finnish, Native American, and Ashkenazi Jewish) or, for those ethnicities that matched poorly to the continental-level groups, an 8th "unassigned" group, which were then used to select residual risk values for each gene. For individuals belonging to multiple high-

level ethnic groupings, a weighting strategy was used to select the most appropriate residual risk. For genes that had insufficient data to calculate ethnic-specific residual risk values, or for sub-ethnic groupings that fell into the "unassigned" group, a "worldwide" residual risk was used. This "worldwide" residual risk was calculated using data from all available continental-level groups.

Sanger Sequencing (Confirmation method) (Accuracy >99%)

Sanger sequencing, as indicated, was performed using BigDye Terminator chemistry with the ABI 3730 DNA analyzer with target specific amplicons. It also may be used to supplement specific guaranteed target regions that fail NGS sequencing due to poor quality or low depth of coverage (<20 reads) or as a confirmatory method for NGS positive results. False negative results may occur if rare variants interfere with amplification or annealing.

Tay-Sachs Disease (TSD) Enzyme Analysis (Analytical Detection Rate ≥98%)

Hexosaminidase activity and Hex A% activity were measured by a standard heat-inactivation, fluorometric method using artificial 4-MU-β-N-acetyl glucosaminide (4-MUG) substrate. This assay is highly sensitive and accurate in detecting Tay-Sachs carriers and individuals affected with TSD. Normal ranges of Hex A% activity are 55.0-72.0 for white blood cells and 58.0-72.0 for plasma. It is estimated that less than 0.5% of Tay-Sachs carriers have non-carrier levels of percent Hex A activity, and therefore may not be identified by this assay. In addition, this assay may detect individuals that are carriers of or are affected with Sandhoff disease. False positive results may occur if benign variants, such as pseudodeficiency alleles, interfere with the enzymatic assay. False negative results may occur if both *HEXA* and *HEXB* pathogenic or pseudodeficiency variants are present in the same individual.

Please note these tests were developed and their performance characteristics were determined by Sema4 Opco, Inc. They have not been cleared or approved by the FDA. These analyses generally provide highly accurate information regarding the patient's carrier or affected status. Despite this high level of accuracy, it should be kept in mind that there are many potential sources of diagnostic error, including misidentification of samples, polymorphisms, or other rare genetic variants that interfere with analysis. Families should understand that rare diagnostic errors may occur for these reasons.

SELECTED REFERENCES

Carrier Screening

Grody W et al. ACMG position statement on prenatal/preconception expanded carrier screening. *Genet Med.* 2013 15:482-3.

Fragile X syndrome:

Chen L et al. An information-rich CGG repeat primed PCR that detects the full range of Fragile X expanded alleles and minimizes the need for Southern blot analysis. *J Mol Diag* 2010 12:589-600.

Spinal Muscular Atrophy:

Luo M et al. An Ashkenazi Jewish SMN1 haplotype specific to duplication alleles improves pan-ethnic carrier screening for spinal muscular atrophy. *Genet Med.* 2014 16:149-56.

Ashkenazi Jewish Disorders:

Scott SA et al. Experience with carrier screening and prenatal diagnosis for sixteen Ashkenazi Jewish Genetic Diseases. *Hum. Mutat.* 2010 31:1-11.

Duchenne Muscular Dystrophy:

Flanigan KM et al. Mutational spectrum of DMD mutations in dystrophinopathy patients: application of modern diagnostic techniques to a large cohort. *Hum Mutat.* 2009 30:1657-66.

Variant Classification:

Richards S et al. Standards and guidelines for the interpretation of sequence variants: a joint consensus recommendation of the American College of Medical Genetics and Genomics and the Association for Molecular Pathology. *Genet Med.* 2015 May;17(5):405-24

Additional disease-specific references available upon request.

Name: DONOR CB493

Date of birth: [REDACTED]

Gender: M

Hospital/MR #:

Accession #:

Sample Type: BLOOD

Test Code: 8600

Indication: Donor Screening

Lab Number: 248834

Family #: [REDACTED]

Date Collected: [REDACTED]

Date Received: [REDACTED]

Date Reported: [REDACTED]

David Prescott

Cryobiology

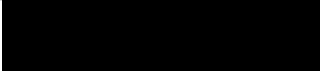
Tel. No.: 614-451-4375

Fax No: 614-451-5284

Chromosome Analysis - Blood

METHOD OF ANALYSIS:

GTG-Banding



Cultures: 2

Cells counted: 30

Cells analyzed: 5

No. of images: 8

Cells karyotyped: 3

Band resolution: 550

RESULTS:

46,XY

INTERPRETATION :

Normal male chromosome analysis.

DISCLAIMER:

The resolution of analysis for this standard cytogenetic methodology does not routinely detect subtle rearrangements (<5Mb) or low-level mosaicism. Standard cytogenetic analysis cannot detect microdeletions/microduplications that might be diagnosed with Chromosomal Microarray Analysis. These results do not rule out the possibility of genetic conditions not detectable by cytogenetic analysis. Depending upon the clinical indication, additional testing may be warranted.

Carlos A. Bacino, M.D., FACMG

ABMG Certified Cytogeneticist and Molecular Geneticist

Medical Director

Weimin Bi, Ph.D.

ABMG Certified Clinical Cytogeneticist

Assistant Laboratory Director

This test was developed and its performance characteristics determined by Baylor Miraca Genetics Laboratories DBA Baylor Genetics (CAP# 2109314 / CLIA# 45D0660090). It has not been cleared or approved by the FDA. Laboratory is regulated under CLIA as qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

Patient Name: CB, 493
Referring Physician: David Prescott, MD
Specimen #: [REDACTED]
Patient ID: [REDACTED]

Client #: [REDACTED]
Case #: [REDACTED]

[REDACTED]
Cryobiology, Inc.
4830-D Knightsbridge Boulevard
Columbus, OH 43214

DOB: [REDACTED] **Date Collected:** [REDACTED]
Sex: M **Date Received:** [REDACTED]
SSN: [REDACTED] **LAB ID:** [REDACTED]
 Hospital ID: [REDACTED]
 Specimen Type: **BLDPER**

Ethnicity: Not Provided
Indication: Not Provided

RESULTS: Negative for the 97 mutations analyzed

INTERPRETATION:

This negative result may need further interpretation depending on the clinical indication.

COMMENTS:

Mutations Detection Rates among Ethnic Groups Detection Rates are based on mutation frequencies in patients affected with cystic fibrosis. Among individuals with an atypical or mild presentation (e.g. congenital absence of the vas deferens, pancreatitis) detection rates may vary from those provided here.

Ethnicity	Detection rate	References
African American	81%	ACOG Committee Opinion 486 PMID: 21422883; Heim PMID: 11388756
Ashkenazi Jewish	97%	ACOG Committee Opinion 486 PMID: 21422883
Asian American	49-55%	ACOG Committee Opinion 486 PMID: 21422883; Watson PMID: 1384328
Caucasian	93%	ACOG Committee Opinion 486 PMID: 21422883; Heim PMID: 11388756; Palomaki PMID: 11882786
Hispanic	78%	ACOG Committee Opinion 486 PMID: 21422883; Heim PMID: 11388756; California Database: (http://www.cdph.ca.gov/programs/GDSP/Documents/CFTlabelCurrent.pdf)
Jewish, non-Ashkenazi	Varies by country of origin	Orgad PMID: 11336401; Kerem PMID:10464623
Mixed or Other	Not Provided	For counseling, consider using the ethnic background with the most conservative risk estimates.

This interpretation is based on the clinical and family relationship information provided and the current understanding of the molecular genetics of this condition.

METHOD / LIMITATIONS:

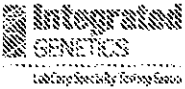
CFTR gene regions are amplified enzymatically. The 97 CF mutations are tested by multiplex allele-specific primer extension, bead array hybridization, and fluorescence detection. The test discriminates between p.F508del and three polymorphisms (p.I506V, p.I507V and p.F508C). Numbering and nomenclature follow Human Genome Variation Society recommendations. Mutations and their legacy names are listed at www.integratedgenetics.com/CFplus. The DNA reference sequence is NG_016465.1. False positive or negative results may occur for reasons that include genetic variants, blood transfusions, bone marrow transplantation, erroneous representation of family relationships, or maternal contamination of a fetal sample.

Integrated Genetics is a business unit of Esoterix Genetic Laboratories, LLC, a wholly-owned subsidiary of Laboratory Corporation of America Holdings.

Electronically Signed By: Ruth A. Heim, Ph.D., FACMG, on [REDACTED]

TO: Cryobiology, Inc.

ATTN: Cryobiology, Inc.

SMN1 Copy Number Analysis

Patient Name: 493 CB

DOB: [REDACTED]

Age: [REDACTED]

SSN #: [REDACTED]

Gender: Male

[REDACTED]
Cryobiology, Inc.
4830-D Knightsbridge Boulevard
Columbus, OH 43214

Specimen #: [REDACTED]

Case #: [REDACTED]

Patient ID #: [REDACTED]

Date Collected: [REDACTED]

Date Received: [REDACTED]

Referring Physician: David Prescott

Client Lab ID #:

Genetic Counselor:

Hospital ID #:

Specimen ID #:

Specimen Type: Peripheral Blood

Specimen(s) Received: 1 - Lavender 7 ml round
bottom tube(s)

Clinical Data: Carrier Test/Gamete donor

Ethnicity: Caucasian

RESULTS: SMN1 copy number: 3 (Reduced Carrier Risk)**INTERPRETATION:**

This individual has an SMN1 copy number of three (or more). This result reduces but does not eliminate the risk to be a carrier of SMA. Ethnic specific risk reductions based on a negative family history and an SMN1 copy number of three are provided in the Comments section of this report.

COMMENT:

Spinal muscular atrophy (SMA) is an autosomal recessive disease of variable age of onset and severity caused by mutations (most often deletions or gene conversions) in the survival motor neuron (SMN1) gene. Molecular testing assesses the number of copies of the SMN1 gene. Individuals with one copy of the SMN1 gene are predicted to be carriers of SMA. Individuals with two or more copies have a reduced risk to be carriers. (Affected individuals have 0 copies of the SMN1 gene.)

This copy number analysis cannot detect individuals who are carriers of SMA as a result of either 2 (or very rarely 3) copies of the SMN1 gene on one chromosome and the absence of the SMN1 gene on the other chromosome or small intragenic mutations within the SMN1 gene. This analysis also will not detect germline mosaicism or mutations in genes other than SMN1. Additionally, de novo mutations have been reported in approximately 2% of SMA patients.

Carrier Frequency and Risk Reductions for Individuals with No Family History of SMA

Ethnicity	Detection Rate ¹	Prior Carrier Risk ¹	Reduced Carrier Risk for 2 copy result	Reduced Carrier Risk for 3 copy result
Caucasian	94.8%	1:47	1:834	1:5,600
Ashkenazi Jewish	90.5%	1:67	1:611	1:5,400
Asian	93.3%	1:59	1:806	1:5,600
Hispanic	90.0%	1:68	1:579	1:5,400
African American	70.5%	1:72	1:130	1:4,200
Asian Indian	90.2%	1:52	1:443	1:5,400
Mixed or Other Ethnic Background	For counseling purposes, consider using the ethnic background with the most conservative risk estimates.			

METHOD/LIMITATIONS: Specimen DNA is isolated and amplified by real-time polymerase chain reaction (PCR) for exon 7 of the SMN1 gene and the internal standard reference genes. A mathematical algorithm is used to calculate and report SMN1 copy numbers of 0, 1, 2 and 3. Based upon this analysis, an upper limit of 3 represents the highest degree of accuracy in reporting SMN1 copy number with statistical confidence. Sequencing of the primer and probe binding sites is performed on all fetal samples and samples with one copy of SMN1 by real-time PCR to rule out the presence of sequence variants which could interfere with analysis and interpretation. False positive or negative results may occur for reasons that include genetic variants, blood transfusions, bone marrow transplantation, erroneous representation of family relationships or contamination of a fetal sample with maternal cells.

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1. Sugarman EA, Nagan N, Zhu H, et al. Pan-ethnic carrier screening and prenatal diagnosis for spinal muscular atrophy: clinical laboratory analysis of >72,400 specimens. *Eur J Hum Genet* 2012; 20:27-32. 2. Prior TW, et al. Technical standards and guidelines for spinal muscular atrophy testing. *Genet Med* 2011; 13(7): 686-694.

The test was developed and its performance characteristics have been determined by Esoterix Genetic Laboratories, LLC. The laboratory is regulated under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high complexity clinical testing. This test must be used in conjunction with clinical assessment, when available. Integrated Genetics is a business unit of Esoterix Genetic Laboratories, LLC, a wholly-owned subsidiary of Laboratory Corporation of America Holdings.

Electronically Signed by: Hui Zhu, Ph.D. FACMG, on [REDACTED]

Reported by: /