

Donor 5212

Genetic Testing Summary

Fairfax Cryobank recommends reviewing this genetic testing summary with your healthcare provider to determine suitability.

Last Updated: 04/08/24

Donor Reported Ancestry: German, Indian Jewish Ancestry: No

Genetic Test*	Result	Comments/Donor's Residual Risk**
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Chromosome analysis (karyotype)	Normal male karyotype	No evidence of clinically significant chromosome abnormalities		
Hemoglobin evaluation	Normal hemoglobin fractionation and MCV/MCH results	Reduced risk to be a carrier for sickle cell anemia, beta thalassemia, alpha thalassemia trait (aa/ and a-/a-) and other hemoglobinopathies		
Cystic Fibrosis (CF) carrier screening	Negative by genotyping of 132 mutations in the CFTR gene			
Spinal Muscular Atrophy (SMA) carrier screening	Negative for deletions of exon 7 in the SMN1 gene			
Limited carrier testing performed in 2015	Negative by genotyping in 21 genes	See attached		
Special Testing				
Gene: ATP6V1B1	Negative by genotyping in 2016	See attached.		

^{*}No single test can screen for all genetic disorders. A negative screening result significantly reduces, but cannot eliminate, the risk for these conditions in a pregnancy.

^{**}Donor residual risk is the chance the donor is still a carrier after testing negative.





Ordering Practice:

Practice Code: 926
Fairfax Cryobank
3015 Williams Drive, #110, Fairfax, VA,
22031, US
Physician:

Report Generated: 06/06/2015 Report Updated: 06/08/2015 Donor 5212

Partner Not Tested

DOB:

Gender: Male Ethnicity: Other Procedure ID: 22870

Kit Barcode: Method: Genotyping Specimen: Blood , #24333

Specimen Collection: 06/01/2015 Specimen Received: 06/02/2015 Specimen Analyzed: 06/06/2015

SUMMARY OF RESULTS

NO MUTATIONS IDENTIFIED

Donor 5212 was not identified to carry any of the mutations tested.

All mutations analyzed were not detected, reducing but not eliminating your chance to be a carrier for the associated genetic diseases. A list of all the diseases and mutations you were screened for is included later in this report. The test does not screen for every possible genetic disease.

For disease information, please visit www.recombine.com/diseases. To speak with a Genetic Counselor, call 855.OUR.GENES.

of Male

Panel: Fairfax Cryobank Panel, Diseases Tested: 21, Mutations Tested: 386, Genes Tested: 22, Null Calls: 0

Assay performed by Reprogenetics
CLIA ID: 31D1054821
Lab Technician Bo Chu

Reviewed by Pere Colls, PhD, HCLD, Lab Director





Methods and Limitations

Genotyping: Genotyping is performed using the Illumina Infinium Custom HD Genotyping assay to identify mutations in >200 genes. The assay is not validated for homozygous mutations, and it is possible that individuals affected with disease may not be accurately genotyped.

Spinal Muscular Atrophy: Spinal Muscular Atrophy is tested for via an Identity-by-State shared haplotype comparison algorithm. Detection is limited to haplotypes within our library of known carriers of the most common mutation (deletion of Exon 7).

Limitations: In some cases, genetic variations other than that which is being assayed may interfere with mutation detection, resulting in false-negative or false-positive results. Additional sources of error include, but are not limited to: sample contamination, sample mixup, bone marrow transplantation, blood transfusions, and technical errors.

The test does not test for all forms of genetic disease, birth defects, and intellectual disability. All results should be interpreted in the context of family history; additional evaluation may be indicated based on a history of these conditions. Additional testing may be necessary to determine mutation phase in individuals identified to carry more than one mutation in the same gene. All mutations included within the genes assayed may not be detected, and additional testing may be appropriate for some individuals.



CarrierMap™

Diseases & Mutations Assayed

T X M	Disease	#	Mutations
000	Alpha Thalassemia	13	of Genotyping SEA deletion, 11.1kb deletion, c.207C>A (p.N69K), c.223G>C (p.D75G), c.2T>C (p.M1T), c.94_95delAG (p.R32DfsX24), c.207C>G (p.N69K), c.339C>G (p.H113Q), c.340_351delCTCCCCGCCGAG (p.L114_E117del), c.377T>C (p.L126P), c.427T>C (p.X143Qext32), c.*+94A>G, c.175_del20.5kb (p.His59Tyr)
•00	Beta Thalassemia	83	d' Genotyping c.17_18delCT, c.20delA (p.E7Gfs), c.217insA (p.S73Kfs), c.223+702_444+342del620insAAGTAGA, c.230delC, c.25_26delAA, c.315+1G>A, c.315+2T>C, c.316-197C>T, c.316-146T>G, c.315+745C>G, c.316-1G>A, c.316-1G>A, c.316-2A>G, c.316-3C>A, c.316-3C>G, c.4delG (p.V2Cfs), c.51delC (p.K18Rfs), c.93-21G>A, c.92+1G>A, c.92+5G>A, c.92+5G>C, c.92+5G>T, c.92+6T>C, c.93-1G>A, c.93-1G>T, c50A>C, c.a-78g, c.a-79g, c.a-81g, c.A52T (p.K18X), c.c-137g, c.c-138t, c.c-151t, c.C118T (p.Q40X), c.G169C (p.G57R), c.G295A (p.V99M), c.G34A (p.V12I), c.G415C (p.A139P), c.G47A (p.W16X), c.G48A (p.W16X), c.t-80a, c.T2C (p.M1T), c.T75A (p.G25G), c.444+111A>G, c.g-29a, c.68_74delAAGTTGG, c.G92C (p.R31T), c.27_28insG, c.92+1G>T, c.92+1G>C, c.93-15T>G, c.93-1G>C, c.112delT, c.G113A (p.W38X), c.G114A (p.W38X), c.126delC, c.444+113A>G, c.250delG, c.225delC, c.383_385delAGG (p.Q128_A129delQAinsP), c.321_322insG (p.N109fs), c.316-1G> c.316-2A>C, c.316-106C>T, c.287_288insA (p.197fs), c.271G>T (p.E91X), c.203_204delTG (p.V68Afs), c.154delC (p.P52fs), c.135delC (p.F46fs), c.92+2T>A, c.92+2T>C, c.90C>T (p.G30G), c.59A>G (p.N20S), c.46delT (p.W16Gfs), c.45_46inst (p.L16fs), c.36delT (p.T13fs), c.2T>G (p.M1R), c.1 A>G (p.M1V), c.c-137t, c.c-136g, c.c-142t, c.c-140t
000	Bloom Syndrome	24	d' Genotyping c.2207_2212delATCTGAinsTAGATTC (p.Y736Lfs), c.2407insT, c.557_559delCAA (p.S186X), c.1284G>A (p.W428X), c.1701G>A (p.W567X), c.1933C>T (p.Q645X), c.C2528T (p.T843I), c.C2695T (p.R899X), c.G3107T (p.C1036F), c.2923delC (p.Q975K), c.3558+1G>T, c.3875-2A>G, c.2074+2T>A, c.2343_2344dupGA (p.781EfsX), c.380delC (p.127Tfs), c.3564delC (p.1188Dfs), c.4008delG (p.1336Rfs), c.C947G (p.S316X), c.2193+1_2193+9del9, c.C1642T (p.Q548X), c.3143delA (p.1048NfsX), c.356_357delTA (p.Cys120Hisfs), c.4076+1del6 c.C3281A (p.S1094X)
000	Canavan Disease	7	d Genotyping c.433-2A>G, c.A854C (p.E285A), c.C914A (p.A305E), c.A71G (p.E24G), c.C654A (p.C218X), c.T2C (p.M1T), c.G79A (p.G27R)



$Carrier Map^{\scriptscriptstyle\mathsf{TM}}$

	ct 🥟 Treatment Benefits 🥦 X-Linked 🤇	1410	derdie impaci
TXM	Disease	#	Mutations
• 0 0	Cystic Fibrosis	132	O' Genotyping c.1029delC, 1153_1154insAT, c.1519_1521delATC (p.507dell), c.1521_1523delCTT (p.508delF), c.1545_154 6delTA (p.Y515Xfs), c.1585-1G>A, c.164+12T>C, c.1680-88 6A>G, c.1680-1G>A, c.1766+1G>A, c.1766+1G>T, c.1766+5G>T, c.1818del84, c.1911delG, c.1923delCTCAAAACTinsA, c.1973delGAAATTCAATCCTinsAGAAA, c.2052delA (p.K684sfs, c.2052insA (p.Q685 c.2051_2052delAAinsG (p.K684sfsX38), c.2174insA, c.261delT, c.2657+5G>A, c.273+1G>A, c.273+3A>C, c.274-1G>A, c.2988+1G>A, c.3039delC, c.3140-26A>G, c.325delTATinsG, c.3527delC, c.3535delACCA, c.3691delT, c.3717+12191C>T, c.3744delA, c.3773_3774insT (p.L1258fs), c.442delA, c.489+1G>T, c.531delT, c.579+1G>T, c.579+5G>A (IVS4+5G>A), c.803delA (p.N268fs), c.805_806delAT (p.1269fs), c.933_935delCTT (p.311delF), c.A1645C (p.S549R), c.A2128T (p.K710X), c.C1000T (p.R334W), c.C1013T (p.T338I), c.C13664A (p.A455E), c.C1477T (p.Q493) c.C1572A (p.C524X), c.C1654T (p.Q552X), c.C1657T (p.R553X), c.C1721A (p.P574 c.C2125T (p.R709X), c.C233T (p.R75X), c.C2668T (p.Q890X), c.C3196T (p.R1066C), c.C3276G (p.Y1092X), c.C3472T (p.R1158X), c.C3484T (p.R1162X), c.C349T (p.R117C), c.C3587G (p.S1196X), c.C3472T (p.Q1238X), c.C3764A (p.S1255X), c.C3909G (p.N1030X), c.G1040A (p.R347H), c.G1040C (p.R347P), c.G1438T (p.G480C), c.G1624T (p.G542X), c.G1646A (p.S549N), c.G1646T (p.S5549N), c.G1624T (p.G542X), c.G1646A (p.S1255X), c.G3764T (p.E92X), c.G3266A (p.W1089X), c.G3454C (p.D1152H), c.G350A (p.R117H), c.G3611A (p.W1204X), c.G3752A (p.S1251N), c.G3846A (p.W1282X), c.G3848T (p.R1283M), c.G5326A (p.M1089X), c.G3454C (p.D1152H), c.G350A (p.R177H), c.G361A (p.M569fs), c.G2326A (p.M1089X), c.G3454C (p.D1152H), c.G350A (p.R177H), c.G361A (p.W157X), c.G1366A (p.W1089X), c.G3454C (p.D1152H), c.G350A (p.R177H), c.G361A (p.W1204X), c.G3752A (p.S1251N), c.G3846A (p.W1282X), c.G368AT (p.R1283M), c.G532A (p.G552X), c.G146A (p.S1251N), c.G3846A (p.W1282X), c.G369A (p.M101K), c.T617G (p.1206W), c.C14T (p.P51), c.G917 (p.E7X), c.G171A (p.W57X), c.313delA (p.W157X), c.G380A (p.D1270N), c.G4056C (p.G1352H),
000	Familial Dysautonomia	4	of Genotyping c.2204+6T>C, c.C2741T (p.P914L), c.G2087C (p.R696P), c.C2128T (p.Q710X)
000	Familial Hyperinsulinism: Type 1: ABCC8 Related	10	O' Genotyping c.3989-9G>A, c.4159_4161 delTTC (p.1387 delF), c.C4258T (p.R1420C), c.C4477T (p.R1493W), c.G2147T (p.G716V), c.G4055C (p.R1352P), c.T560A (p.V187D), c.4516G>A (p.E1506K), c.C2506T (p.Q836X), c.579+2T>A
•00	Fanconi Anemia: Type C	8	of Genotyping c.45 6+4A>T, c. 67delG, c.C37T (p.Q13X), c.C553T (p.R185X), c.T1661C (p.L554P), c.C1642T (p.R548X), c.G66A (p.W22X), c.G65A (p.W22X)
•00	Gaucher Disease	6	of Genotyping c.84_85insG, c.A1226G (p.N409S), c.A1343T (p.D448V), c.C1504 (p.R502C), c.G1297T (p.V433L), c.G1604A (p.R535H)
•00	Glycogen Storage Disease: Type IA	13	of Genotyping c.376_377insTA, c.79delC, c.979_981delTTC (p.327delF), c.C1039 (p.Q347X), c.C247T (p.R83C), c.C724T (p.Q242X), c.G248A (p.R83H), c.G562C (p.G188R), c.G648T, c.G809T (p.G270V), c.A113T (p.D38V), c.975delG (p.L326fs), c.724delC
000	Joubert Syndrome	1	of Genotyping c.G35T(p.R12L)



$Carrier Map^{\scriptscriptstyle\mathsf{TM}}$

	Н	igh	lmpact	Treatment Benefits X-Linked	Mc	oderate Impact
Н	T	X	М	Disease	#	Mutations
	•	0	0	Maple Syrup Urine Disease: Type 1B	6	of Genotyping c.G1114T (p.E372X), c.G548C (p.R183P), c.G832A (p.G278S), c.C970T (p.R324X), c.G487T (p.E163X), c.C853T (p.R285X)
		0	0	Maple Syrup Urine Disease: Type 3	8	of Genotyping c.104_105insA, c.G685T (p.G229C), c.A214G (p.K72E), c.A1081G (p.M361V), c.G1123A (p.E375K), c.T1178C (p.I393T), c.C1463T (p.P488L), c.A1483G (p.R495G)
	0	0	0	Mucolipidosis: Type IV	4	of Genotyping c.406-2A>G, c.G1084T (p.D362Y), c.C304T (p.R102X), c.244delC (p.L82fsX)
	0	0	0	Nemaline Myopathy: NEB Related	1	of Genotyping c.7434_7536del2502bp
	0	0	0	Niemann-Pick Disease: Type A	5	of Genotyping c.996delC, c.G1493T (p.R498L), c.T911C (p.L304P), c.C1267T (p.H423Y), c.G1734C (p.K578N)
•	0	0	0	Spinal Muscular Atrophy: SMN1 Linked	19	of Genotyping DEL EXON 7, c,22_23insA, c,43C>T (p,Q15X), c.91_92insT, c.305G>A (p,W102X), c.400G>A (p,E134K), c.439_443delGAAGT, c.558delA, c.585_586insT, c.683T>A (p,L228X), c.734C>T (p,P245L), c.768_778dupTGCTGATGCTT, c.815A>G (p,Y272C), c.821C>T (p,T274I), c.823G>A (p,G275S), c.834+2T>G, c,835-18_835-12delCCTTTAT, c.835G>T, c,836G>T
	0	0	0	Tay-Sachs Disease	31	of Genotyping c. 1073+1 G>A, c. 1277_1278insTATC, c. 1421+1 G>C, c.805+1 G>A, c. C532T (p.R178C), c.G533A (p.R178H), c.G805A (p.G269S), c.C1510T (p.R504C), c.G1496A (p.R499H), c.G509A (p.R170Q), c.1074-1 G>T, c.A1003T (p.1335F), c.910_912delTTC (p.305delF), c.G749A (p.G250D), c.T632C (p.F211S), c.C629T (p.S210F), c.613delC, c.A611G (p.H204R), c.G598A (p.V200M), c.A590C (p.K197T), c.571-1 G>T, c.C540G (p.Y180X), c.T538C (p.Y180H), c.G533T (p.R178L), c.C508T (p.R170W), c.C409T (p.R137X), c.T380G (p.L127R), c.346+1 G>C, c.T116G (p.L39R), c.G78A (p.W26X), c.A1G (p.M1V)
	C	0	0	Usher Syndrome: Type 1F	6	of Genotyping c.C733T (p.R245X), c.2067C>A (p.Y684X), c.C7T (p.R3X), c.C1942T (p.R648X), c.2800C>T (p.R934X), c.4272delA (p.L1425fs)
	C		0	Usher Syndrome: Type 3	4	of Genotyping c.T144G (p.N48K), c.T359A (p.M120K), c.300T>G (p.Y176X), c.C634T (p.Q212X)
	C	0	0	Walker-Warburg Syndrome	1	of Genotyping c. 1167insA (p.F390fs)



CarrierMap™

Partner Not Tested

Ordering Practice:

Practice Code: 926 Fairfax Cryobank

3015 Williams Drive, #110, Fairfax, VA,

22031, US

Physician: Suzanne Seitz Report Generated: 2016-04-29 Donor 5212

DOB

Gender: Male

Ethnicity: European and East Asian

Procedure ID: 22870

Kit Barcode: 🕮

Specimen: Sperm, #53506 Specimen Collection: 2015-06-01 Specimen Received: 2016-04-18 Specimen Analyzed: 2016-04-29

TEST INFORMATION

Test: CarrierMap GEN (Genotyping)

Panel: Custom Panel Diseases Tested: 1 Genes Tested: 1 Mutations Tested: 5

SUMMARY OF RESULTS: NO MUTATIONS IDENTIFIED

Donor 5212 was not identified to carry any of the mutation(s) tested.

No pathogenic mutations were identified in the genes tested, reducing but not eliminating the chance to be a carrier for the associated genetic diseases. CarrierMap assesses carrier status for genetic disease via molecular methods including targeted mutation analysis and/or next-generation sequencing; other methodologies such as CBC and hemoglobin electrophoresis for hemoglobinopathies and enzyme analysis for Tay-Sachs disease may further refine risks for these conditions. Results should be interpreted in the context of clinical findings, family history, and/or other testing. A list of all the diseases and mutations screened for is included at the end of the report. This test does not screen for every possible genetic disease.

For additional disease information, please visit recombine.com/diseases. To speak with a Genetic Counselor, call 855.0UR.GENES.

Assay performed by Reprogenetics
CLIA ID: 31 D 1054821
3 Regent Street, Livingston, NJ 07039

Lab Technician: Bo Chu

Recombine CLIA # 31 D2100763
Reviewed by Pere Colls, PhD, HCLD, Lab Director





Methods and Limitations

Genotyping: Genotyping is performed using the Illumina Infinium Custom HD Genotyping assay to identify mutations in the genes tested. The assay is not validated for homozygous mutations, and it is possible that individuals affected with disease may not be accurately genotyped.

Limitations: In some cases, genetic variations other than that which is being assayed may interfere with mutation detection, resulting in false-negative or false-positive results. Additional sources of error include, but are not limited to: sample contamination, sample mix-up, bone marrow transplantation, blood transfusions, and technical errors. The test does not test for all forms of genetic disease, birth defects, and intellectual disability. All results should be interpreted in the context of family history; additional evaluation may be indicated based on a history of these conditions. Additional testing may be necessary to determine mutation phase in individuals identified to carry more than one mutation in the same gene. All mutations included within the genes assayed may not be detected, and additional testing may be appropriate for some individuals.

This test was developed and its performance determined by Recombine, Inc., and it has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary.



Diseases & Mutations Assayed

Renal Tubular Acidosis and Deafness : Mulations (5): 3° Genotyping | c.242T>C (p.181P), c.232G>A (p.G78R), c.1248+1G>C, c.585+1G>A, c.497delC (p.1166fs)



Residual Risk Information

Detection rates are calculated from the primary literature and may not be available for all ethnic populations. Sequencing detection rates and residual risks are reported as "greater than (>)" and "less than (<)" the values for genotyping, respectively, for each disease. More precise values may become available in the future.

	Unknown		
Renol Tubular Acidosis and Deafness	o' Colombian (Antioquia):	92.86%	Unknown
Disease	Carrier Rate	Defection Rate	Residual Risk