

#### **Donor 5396**

# **Genetic Testing Summary**

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

Last Updated: 09/26/19

Donor Reported Ancestry: Scottish, German, English, Native American 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 gene sequencing in the CFTR gene	1/1250 (residual risk is calculated based on detection rates provided by the testing lab that are not included in the results attached)
Spinal Muscular Atrophy (SMA) carrier screening	Negative for deletions of exon 7 in the SMN1 gene	1/632
Standard testing attached- 22 diseases by gene sequencing	Negative for genes sequenced	

<sup>\*</sup>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.

<sup>\*\*</sup>Donor residual risk is the chance the donor is still a carrier after testing negative.



Partner Not Tested

**Ordering Practice:** 

Practice Code: Fairfax Cryobank -

Physician:

Report Generated: 2017-06-15

**Donor** 5396

DOB:

Gender: Male

Ethnicity: Native American and European

Procedure ID: 95010

Kit Barcode:

Specimen: Blood, #96243 Specimen Collection: 2017-05-30 Specimen Received: 2017-05-31 Specimen Analyzed: 2017-06-14

#### **TEST INFORMATION**

Test: CarrierMap<sup>SEQ</sup> (Genotyping &

Sequencing)

Panel: Fairfax Cryobank Panel V2-

Sequencing

Diseases Tested: 22 Genes Tested: 22 Genes Sequenced: 18

#### SUMMARY OF RESULTS: NO MUTATIONS IDENTIFIED

Donor 5396 was not identified to carry any pathogenic mutations in the gene(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.OUR.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





#### ADDITIONAL RESULTS: NO INCREASED REPRODUCTIVE RISK

The following results are not associated with an increased reproductive risk.

Disease (Gene)	Donor 5396	Partner Not Tested
Spinal Muscular Atrophy: SMN1 Linked (SMN1)*	SMN1 Copy Number: 2 or more copies Method: dPCR & Genotyping	

### \*SMA Risk Information for Individuals with No Family History of SMA

	Detection Rate	Pre-Test Carrier Risk	Post-Test Carrier Risk (2 SMN1 copies)	Post-Test Carrier Risk (3 SMN1 copies)
European	95%	1/35	1/632	1/3,500
Ashkenazi Jewish	90%	1/41	1/350	1/4,000
Asian	93%	1/53	1/628	1/5,000
African American	71%	1/66	1/121	1/3,000
Hispanic	91%	1/117	1/1,061	1/11,000

For other unspecified ethnicities, post-test carrier risk is assumed to be <1%. For individuals with multiple ethnicities, it is recommended to use the most conservative risk estimate.



# 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.

Sequencing: Sequencing is performed using a custom next-generation sequencing (NGS) platform. Only the described exons for each gene listed are sequenced. Variants outside of these regions may not be identified. Some splicing mutations may not be identified. Triplet repeat expansions, intronic mutations, and large insertions and deletions may not be detected. All identified variants are curated, and determination of the likelihood of their pathogenicity is made based on examining allele frequency, segregation studies, predicted effect, functional studies, case/control studies, and other analyses. All variants identified via sequencing that are reported to cause disease in the primary scientific literature will be reported. Variants considered to be benign and variants of unknown significance (VUS) are NOT reported. In the sequencing process, interval drop-out may occur, leading to intervals of insufficient coverage. Intervals of insufficient coverage will be reported if they occur.

Spinal Muscular Atrophy: Carrier status for SMA is assessed via copy number analysis by dPCR and via genotyping. Some individuals with a normal number of SMN1 copies (2 copies) may carry both copies of the gene on the same allele/chromosome; this analysis is not able to detect these individuals. Thus, a normal SMN1 result significantly reduces but does not eliminate the risk of being a carrier. Additionally, SMA may be caused by non-deletion mutations in the SMN1 gene; CarrierMap tests for some, but not all, of these mutations. Some SMA cases arise as the result of de novo mutation events which will not be detected by carrier testing.

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.



# Carrier Map™

# **Diseases & Mutations Assayed**

Alpha Thalassemia (HBA1, HBA2): Mutations (9): & Genotyping | SEA deletion, c.207C>A (p.N69K), c.223G>C (p.D75H), c.2T>C (p.M1T), c.207C>G (p.N69K), c.340\_351delCTCCCGCCGAG (p.L114\_E117del), c.377T>C (p.L126P), c.427T>C (p.X143Qext32), c.\*+94A>G

Beta Thalassemia (HBB): Mutations (81): of Genotyping | c.124\_127delTTCT (p.F42Lfs), 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>C, c.316-2A>G, c.316-3C>A, c.316-3C>G, c.4delG (p.V2Cfs), c.51 delC (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, c.-50A>C, c.-78α>g, c.-79A>G, c.-81A>G, c.52A>T (p.K18X), c.-137c>g, c.-138c>t, c.-151C>T, c.118C>T (p.Q40X), c.169G>C (p.G57R), c.295G>A (p.V99M), c.415G>C (p.A139P), c.47G>A (p.W16X), c.48G>A (p.W16X), c.-80t>a, c.2T>C (p.M1T), c.75T>A (p.G25G), c.444+111A>G, c.-29g>a, c.68\_74delAAGTTGG, c.92G>C (p.R31T), c.92+1G>T, c.93-15T>G, c.93-1G>C, c.112delT, c.113G>A (p.W38X), c.114G>A (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>T, c.316-2A>C, c.287\_288insA (p.L97fs), 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.84\_85insC (p.L29fs), c.59A>G (p.N20S), c.46delT (p.W16Gfs), c.45\_46insG (p.L16fs),  $c.36 delT \ (p.T13 fs), \ c.2T>G \ (p.M1R), \ c.1A>G \ (p.M1V), \ c.-137 c>t, \ c.-136 c>g, \ c.-142 c>t, \ c.-140 c>t delT \ (p.T13 fs), \ c.2T>G \ (p.M1R), \ c.1A>G \ (p.M1V), \ c.-137 c>t, \ c.-136 c>g, \ c.-142 c>t, \ c.-140 c>t delT \ (p.T13 fs), \ c.2T>G \ (p.M1R), \ c.1A>G \ (p.M1V), \ c.-137 c>t, \ c.-136 c>g, \ c.-142 c>t, \ c.-140 c>t delT \ (p.T13 fs), \ c.2T>G \ (p.M1R), \ c.1A>G \ (p.M1V), \ c.-137 c>t, \ c.-136 c>g, \ c.-142 c>t, \ c.-140 c>t delT \ (p.M1R), \$ Sequencing | NM\_000518:1-3

Bloom Syndrome (BLM): Mutations (25): of 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.2528C>T (p.T843I), c.2695C>T (p.R899X), c.3107G>T (p.C1036F), c.2923delC (p.Q975K), c.3558+1G>T, c.3875-

2A>G, c.2074+2T>A, c.2343\_2344dupGA (p.781EfsX), c.318\_319insT (p.L107fs), c.380delC (p.127Tfs), c.3564delC (p.1188Dfs), c.4008delG (p.1336Rfs), c.947C>G (p.S316X), c.2193+1\_2193+9del9, c.1642C>T (p.Q548X), c.3143delA (p.1048NfsX), c.356\_357delTA (p.C120Hfs), c.4076+1delG, c.3281C>A (p.S1094X) Sequencing | NM\_000057:2-22

Canavan Disease (ASPA): Mutations (8): of Genotyping | c.433-2A>G, c.854A>C (p.E285A), c.693C>A (p.Y231X), c.914C>A (p.A305E), c.71A>G (p.E24G), c.654C>A (p.C218X), c.2T>C (p.M1T), c.79G>A (p.G27R) Sequencing | NM\_000049:1-6

Cystic Fibrosis (CFTR): Mutations (150): O' Genotyping | c.1029delC, 1153\_1154insAT, c.1477delCA, c.1519\_1521delATC (p.507dell), c.1521\_1523delCTT (p.508delF), c.1545\_1546delTA (p.Y515Xfs), c.1585-1G>A, c.164+12T>C, c.1680-886A>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.K684fs), c.2052insA (p.Q685fs), c.2051\_2052delAAinsG (p.K684SfsX38), c.2174insA, c.261delTT, 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.I269fs), c.933\_935delCTT (p.311delF), c.946delT, c.1645A>C (p.S549R), c.2128A>T (p.K710X), c.1000C>T (p.R334W), c.1013C>T (p.T338I), c.1364C>A (p.A455E), c.1477C>T (p.Q493X), c.1572C>A (p.C524X), c.1654C>T (p.Q552X), c.1657C>T (p.R553X), c.1721C>A (p.P574H), c.2125C>T (p.R709X), c.223C>T (p.R75X), c.2668C>T (p.Q890X), c.3196C>T (p.R1066C), c.3276C>G (p.Y1092X), c.3472C>T (p.R1158X), c.3484C>T (p.R1162X), c.349C>T (p.R117C), c.3587C>G (p.S1196X), c.3712C>T (p.Q1238X), c.3764C>A (p.S1255X), c.3909C>G (p.N1303K), c.1040G>A (p.R347H), c.1040G>C (p.R347P), c.1438G>T (p.G480C), c.1558G>T (p.V520F), c.1624G>T (p.G542X), c.1646G>A (p.S549N), c.1646G>T (p.S549I), c.1652G>A (p.G551D), c.1675G>A (p.A559T), c.1679G>C (p.R560T), c.178G>T (p.E60X), c.1865G>A (p.G622D), c.254G>A (p.G85E), c.271G>A (p.G91R), c.274G>T (p.E92X), c.3209G>A (p.R1070Q), c.3266G>A (p.W1089X), c.3454G>C (p.D1152H), c.350G>A (p.R117H), c.3611 G>A (p.W1204X), c.3752G>A (p.S1251 N), c.3846G>A (p.W1282X), c.3848G>T (p.R1283M), c.532G>A (p.G178R), c.988G>T (p.G330X), c.1090T>C (p.S364P), c.3302T>A (p.M1101K), c.617T>G (p.L206W), c.14C>T (p.P5L), c.19G>T (p.E7X), c.171G>A (p.W57X), c.313delA (p.I105fs), c.328G>C (p.D110H), c.580-1G>T, c.1055G>A (p.R352Q), c.1075C>A (p.Q359K), c.1079C>A (p.T360K), c.1647T>G (p.S549R), c.1976delA (p.N659fs), c.2290C>T (p.R764X), c.2737\_2738insG (p.Y913X), c.3067\_3072delATAGTG (p.11023\_V1024delT), c.3536\_3539delCCAA (p.T1179fs), c.3659delC (p.T1220fs), c.54-5940\_273+10250del21080bp (p.S18fs), c.4364C>G (p.S1455X), c.4003C>T (p.L1335F), c.2538G>A (p.W846X), c.200C>T (p.P67L), c.4426C>T (p.Q1476X), c.1116+1G>A, c.1986\_1989delAACT (p.T663R), c.2089\_2090insA (p.R697Kfs), c.2215delG (p.V739Y), c.263T>G (p.L196X), c.3022delG (p.V1008S), c.3908dupA (p.N1303Kfs), c.658C>T (p.Q220X), c.868C>T (p.Q290X), c.1526delG (p.G509fs), c.2908+1085-3367+260del7201, c.11 C>A (p.S4X), c.3878\_3881 delTATT (p.V1293fs), c.3700A>G (p.I1234V), c.416A>T (p.H139L), c.366T>A (p.Y122X), c.3767\_3768insC (p.A1256fs), c.613C>T (p.P205S), c.293A>G (p.Q98R), c.3731 G>A (p.G 1244E), c.535C>A (p.Q 179K), c.3368-2A>G, c.455T>G (p.M 152R), c.1610\_1611 delAC (p.D537fs), c.3254A>G (p.H1085R), c.496A>G (p.K166E), c.1408\_1417delGTGATTATGG (p.V470fs), c.1585-8G>A, c.2909G>A (p.G970D), c.653T>A

(p.L218X), c.1175T>G (p.V392G), c.3139\_3139+1 delGG, c.3717+4A>G (IVS22+4A>G)

Familial Dysautonomia (IKBKAP): Mutations (4): & Genotyping | c.2204+6T>C, c.2741C>T (p.P914L), c.2087G>C (p.R696P), c.2128C>T (p.Q710X) Sequencing | NM\_003640:2-37

Familial Hyperinsulinism: Type 1: ABCC8 Related (ABCC8): Mutations (11): o' Genotyping | c.3989-9G>A, c.4159\_4161 delTTC (p.1387delF), c.4258C>T (p.R1420C), c.4477C>T (p.R1493W), c.2147G>T (p.G716V), c.4055G>C (p.R1352P), c.560T>A (p.V187D), c.4516G>A (p.E1506K), c.2506C>T (p.Q836X), c.579+2T>A, c.1333-1013A>G (IVS8-1013A>G) Sequencing | NM\_000352:1-39

Fanconi Anemia: Type C (FANCC): Mutations (8): of Genotyping | c.456+4A>T, c.67delG, c.37C>T (p.Q13X), c.553C>T (p.R185X), c.1661T>C (p.L554P), c.1642C>T (p.R548X), c.66G>A (p.W22X), c.65G>A (p.W22X) Sequencing | NM\_000136:2-15

Gaucher Disease (GBA): Mutations (6): & Genotyping | c.84\_85insG, c.1226A>G (p.N409S), c.1343A>T (p.D448V), c.1504C>T (p.R502C), c.1297G>T (p.V433L), c.1604G>A

Glycogen Storage Disease: Type IA (G6PC): Mutations (13): of Genotyping | c.376\_377insTA, c.79delC, c.979\_981delTTC (p.327delF), c.1039C>T (p.Q347X), c.247C>T (p.R83C), c.724C>T (p.Q242X), c.248G>A (p.R83H), c.562G>C (p.G188R), c.648G>T, c.809G>T (p.G270V), c.113A>T (p.D38V), c.975delG (p.L326fs), c.724delC Sequencing |

Joubert Syndrome (TMEM216): Mutations (2): 3' Genotyping | c.218G>T (p.R73L), c.218G>A (p.R73H) Sequencing | NM\_001173991:1-5

Maple Syrup Urine Disease: Type 1B (BCKDHB): Mutations (6): O' Genotyping | c.1114G>T (p.E372X), c.548G>C (p.R183P), c.832G>A (p.G278S), c.970C>T (p.R324X), c.487G>T (p.E163X), c.853C>T (p.R285X) Sequencing | NM\_183050:1-10

Maple Syrup Urine Disease: Type 3 (DLD): Mutations (8): ♂ Genotyping | c.104\_105insA, c.685G>T (p.G229C), c.214A>G (p.K72E), c.1081A>G (p.M361V), c.1123G>A (p.E375K), c.1178T>C (p.I393T), c.1463C>T (p.P488L), c.1483A>G (p.R495G) Sequencing | NM\_000108:1-14

Mucolipidosis: Type IV (MCOLN1): Mutations (5):  $\sigma$  Genotyping | c.-1015\_788del6433, c.406-2A>G, c.1084G>T (p.D362Y), c.304C>T (p.R102X), c.244delC (p.L82fsX) Sequencing NM\_020533:1-14

Nemaline Myopathy: NEB Related (NEB): Mutations (2): of Genotyping | c.7434\_7536del2502bp, c.8890-2A>G (IVS63-2A>G) Sequencing | NM\_001164508:63-66,86,95-96,103,105,143,168-172, NM\_004543:3-149

Niemann-Pick Disease: Type A (SMPD1): Mutations (6): of Genotyping | c.996delC, c.1493G>T (p.R498L), c.911T>C (p.L304P), c.1267C>T (p.H423Y), c.1734G>C (p.K578N), c.1493G>A (p.R498H) Sequencing | NM\_000543:1-6

Sickle-Cell Anemia (HBB): Mutations (1): of Genotyping | c.20A>T (p.E7V) Sequencing |

Spinal Muscular Atrophy: SMN1 Linked (SMN1): Mutations (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 dPCR | DEL

Tay-Sachs Disease (HEXA): Mutations (78): 07 Genotyping | c.1073+1G>A, c.1277\_1278insTATC, c.1421+1G>C, c.805+1G>A, c.532C>T (p.R178C), c.533G>A (p.R178H), c.805G>A (p.G269S), c.1510C>T (p.R504C), c.1496G>A (p.R499H), c.509G>A (p.R170Q), c.1003A>T (p.I335F), c.910\_912delTTC (p.305delF), c.749G>A (p.G250D), c.632T>C (p.F211S), c.629C>T (p.S210F), c.613delC, c.611A>G (p.H204R), c.598G>A (p.V200M), c.590A>C (p.K197T), c.571-1G>T, c.540C>G (p.Y180X), c.538T>C (p.Y180H), c.533G>T (p.R178L), c.508C>T (p.R170W), c.409C>T (p.R137X), c.380T>G (p.L127R), c.346+1G>C, c.116T>G (p.L39R), c.78G>A (p.W26X), c.1A>G (p.M1V), c.1495C>T (p.R499C), c.459+5G>A (IVS4+5G>A), c.1422-2A>G, c.535C>T (p.H179Y), c.1141 delG (p.V381fs), c.796T>G (p.W266G), c.155C>A (p.S52X), c.426delT (p.F142fs), c.413-2A>G, c.570+3A>G, c.536A>G (p.H179R), c.1146+1G>A, c.736G>A (p.A246T), c.1302C>G (p.F434L), c.778C>T (p.P260S), c.1008G>T (p.Q336H), c.1385A>T (p.E462V), c.964G>A (p.D322N), c.340G>A (p.E114K), c.1432G>A (p.G478R), c.1178G>C (p.R393P), c.805+1G>C, c.1426A>T (p.R476X), c.623A>T (p.D208V), c.1537C>T (p.Q513X), c.1511G>T (p.R504L), c.1307\_1308delTA (p.I436fs), c.571-8A>G, c.624\_627delTCCT (p.D208fs), c.1211\_1212delTG (p.L404fs), c.621T>G (p.D207E), c.1511 G>A (p.R504H), c.1177C>T (p.R393X), c.2T>C (p.M1T), c.1292G>A (p.W431X), c.947\_948insA (p.Y316fs), c.607T>G (p.W203G), c.1061\_1063delTCT (p.F354\_Y355delinsX), c.615delG (p.L205fs), c.805+2T>C, c.1123delG (p.E375fs), c.1121A>G (p.Q374R), c.1043\_1046delTCAA (p.F348fs), c.1510delC (p.R504fs), c.1451T>C (p.L484P), c.964G>T (p.D322Y), c.1351 C>G (p.L451V), c.571-2A>G (IVS5-2A>G) Sequencing | NM\_000520:1-14

Usher Syndrome: Type 1F (PCDH15): Mutations (7): 6th Genotyping | c.733C>T (p.R245X), c.2067C>A (p.Y684X), c.7C>T (p.R3X), c.1942C>T (p.R648X), c.1101delT (p.A367fsX), c.2800C>T (p.R934X), c.4272delA (p.L1425fs) Sequencing | NM\_001142763:2-35

Usher Syndrome: Type 3 (CLRN1): Mutations (5):  $\sigma$  Genotyping | c.144T>G (p.N48K), c.131T>A (p.M120K), c.567T>G (p.Y189X), c.634C>T (p.Q212X), c.221T>C (p.L74P) Sequencing | NM\_001195794:1-4

Walker-Warburg Syndrome (FKTN): Mutations (5): & Genotyping | c.1167insA (p.F390fs), c.139C>T (p.R47X), c.748T>G (p.C250G), c.648-1243G>T (IVS5-1243G>T), c.515A>G (p.H172R) Sequencing | NM\_006731:2-10

Sequencing | NM\_000492:1-27









# Residual Risk Information

Detection rates are calculated from the primary literature and may not be available for all ethnic populations. The values listed below are for genotyping. Sequencing provides higher detection rates and lower residual risks for each disease. More precise values for sequencing may become available in the future.

dual sk
97
175
93
04
39
020
own
own
840
own
07
<b>7</b> 21
275
96
212
38
,100
160
84
0,10
own
117
64
own
81
100
95
65
45
641
,200
,200 ,700
,700
,700 ,400

Disease	Carrier Rate	Detection Rate	Residual Risk
Niemann-Pick Disease: Type A	♂ Ashkenazi Jewish: 1/101	95.00%	1/2,020
Sickle-Cell Anemia	♂ African American: 1/10	>99%	<1/1,000
	♂ Hispanic American: 1/95	>99%	<1/9,500
Tay-Sachs Disease	♂ Argentinian: 1/280	82.35%	1/1,587
	♂ Ashkenazi Jewish: 1/29	99.53%	1/6,177
	♂ Cajun: 1/30	>99%	<1/3,000
	o European: 1/280	25.35%	1/375
	♂ General: 1/280	32.09%	1/412
	♂ Indian: Unknown	85.71%	Unknown
	♂ Iraqi Jewish: 1/140	56.25%	1/320
	♂ Japanese: 1/127	82.81%	1/739
	♂ Moroccan Jewish: 1/110	22.22%	1/141
	♂ Portuguese: 1/280	92.31%	1/3,640
	♂ Spaniard: 1/280	67.65%	1/865
	o" United Kingdom: 1/161	71.43%	1/564
Usher Syndrome: Type 1F	♂ Ashkenazi Jewish: 1/126	93.75%	1/2,016
Usher Syndrome: Type 3	♂ Ashkenazi Jewish: 1/120	>99%	<1/12,00 0
	♂ Finnish: 1/134	>99%	<1/13,40 0
Walker-Warburg Syndrome	♂ Ashkenazi Jewish: 1/150	>99%	<1/15,00 0