967 Mabury Road
San Jose, CA 95133
1 (408) 288-9850
1 (800) 288-8008

Patient Name: CODE, 3469
NOT GIVEN
Age/DOB: M NON-FASTING
Sex:
CHART #: NOT GIVEN
SS #: NOT GIVEN

52928 4350001
Client: REPRODUCTIVE TECHNOLOGIES INC
LORRAINE BONNER MD
2115 MILVIA ST 2ND FLR
BERKELEY, CA 94704
510-841-1858

Accession: K3939222
Collected: 10/26/05 11:15
Received: 10/26/05 18:30
Reported: 11/01/05 10:23
Re-reported: 11/02/05 15:28
Report Status: FINAL
Page: 1

Test	In Range	Out of Range	Reference	Units	LOC

Requisition #: 52928,14,128

AGE AND/OR SEX NOT KNOWN. FOR TESTS WITH REFERENCE RANGES WHICH VARY AS A FUNCTION OF AGE OR SEX, WE CANNOT PROVIDE AGE OR SEX-SPECIFIC REFERENCE RANGES.

CYSTIC FIBROSIS, CARRIER SCREEN

REPORTED ETHNICITY	Not given	NI
CF RESULT	SEE BELOW	NI
RESULT: NEGATIVE; NONE OF THE MUTATIONS LISTED BELOW WERE DETECTED.		
INTERPRETATION	SEE BELOW	NI

This result does not rule out cystic fibrosis disease (CF) or carrier status.* The risk for mutations that cause CF other than the ones tested depends greatly on family and clinical history as well as ethnicity.

Chance of having a CF mutation

Ethnic Group	Detection Rate	Before Test	After Negative Result
Ashkenazi Jewish	97%	1 in 25	1 in 800
Non-Hispanic Caucasian	90%	1 in 25	1 in 240
African-American	69%	1 in 65	1 in 207
Hispanic-American	57%	1 in 46	1 in 105
Other	Insufficient data available		

For assistance with interpretation of these results, please contact your local Quest Diagnostics' genetic counselor or call 1-866-GENEINFO (866-436-3463).

MUTATIONS/POLYMORPH SEE BELOW NI

MUTATIONS/POLYMORPHISMS ANALYZED:
23 Mutations:

A455E	Delta I507	Delta F508	1717-1 G>A
G551D	R553X	R560T	W1282X
R1162X	3659delC	N1303K	R117H
R334W	R347P	3849+10kb C>T	G85E
621+1 G>T	2789+5 G>A	1898+1 G>A	2184delA
711+1 G>T	3120+1 G>A	G542X	

Testing for the intron 8 5T polymorphism is performed only when the R117H mutation is detected. Testing for the I506V and I507V polymorphisms is performed only when a homozygous Delta F508 or Delta I507 mutation is detected.

NOV 3 2005

11-2-05 HR

REPORT CONTINUED ON NEXT PAGE / LEGEND ON LAST PAGE

Refer to reverse side for Performing Location

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METHOD	SEE BELOW				NI

These mutations are detected by polymerase chain reaction (PCR) amplification of specific CFTR gene regions followed by an oligonucleotide ligation assay (OLA) and detection of fluorescent reaction products by automated capillary electrophoresis. Since genetic variation and other factors can affect the accuracy of direct mutation testing, these results should be interpreted in light of clinical and familial data.

This test includes all twenty-three core mutations recommended by the American
College of Medical Genetics (ACMG) for population-based CF carrier screening. While some assay platforms may detect rare mutations not included in the standard ACMG panel, these mutations are not reported due to lack of consensus by ACMG.

This test was developed and its performance characteristics determined by Quest Diagnostics Nichols Institute. It has not been cleared or approved by the U.S. Food and Drug Administration, which has determined that such clearance or approval is not necessary. This test is performed pursuant to a license agreement with Celera Diagnostics.

MEDICAL DIRECTOR	SEE BELOW				NI

Laboratory results and submitted clinical information reviewed by Franklin Quan, Ph.D., ABMG, CGMB.

PERFORMING SITE

NI - Nichols Institute, 33608 Ortega Hwy., San Juan Cap, CA 92675
R.E. REITZ, MD., 800-642-4657

LAST PAGE OF REPORT

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