

Client/Sending Facility: Phoenix Sperm Bank

1492 S Mill Ave Suite 306 Tempe, AZ 85281 Ph: (602)888-7255 AZB-45

Account Number:

Client Reference:

Ordering Physician: JOLLIFFE

Specimen Type: BLOOD

Date Collected: 06/30/2017

Date Received: 07/02/2017

Date Reported: 07/14/2017

LCLS Specimen Number: 181-944-2734-0

Patient Name: 10149, DONOR

Date of Birth:

Gender: M

Patient ID:

Lab Number: YU17-51998 L

Indications: NOT GIVEN

Test: Chromosome, Blood, Routine

Cells Counted: 20 Cells Analyzed: 20 Cells Karyotyped: 2
Band Resolution: 500

CYTOGENETIC RESULT: 46,XY

INTERPRETATION: NORMAL MALE KARYOTYPE

Cytogenetic analysis of PHA stimulated cultures has revealed a MALE karyotype with an apparently normal GTG banding pattern in all cells observed.

This result does not exclude the possibility of subtle rearrangements below the resolution of cytogenetics or congenital anomalies due to other etiologies.



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Patient Name: 10149, DONOR

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Lab Number: YU17-51998 L

Account Number:

Ordering Physician: JOLLIFFE

Specimen Type: BLOOD

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LCLS Specimen Number: 181-944-2734-0

Patient Name: 10149, DONOR

Date of Birth:

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Patient ID:

Lab Number: YU17-51998 L

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Date Collected: 06/30/2017

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I. n. gad

Inder K. Gadi, PhD, FACMG

Arundhati Chatterjee, MD Medical Director Peter Papenhausen, PhD

National Director of Cytogenetics

Technical component performed by Laboratory Corporation of America Holdings,

1904 TW Alexander Drive, RTP, NC, 27709-0153 (800) 345-4363
Professional Component performed by LabCorp CLIA 34D1008914, 1904 TW Alexander Dr, Research Triangle Park, NC 27709. Medical Director, Arundhati Chatterjee, MD.

Professional Component performed by LabCorp CLIA 34D1008914, 1904 TW Alexander Dr., Research Triangle Park, NC 27709. Medical Director, Arundhati Chatterjee, Integrated Genetics is a brand used by Esoterix Genetic Laboratories, LLC, a wholly-owned subsidiary of Laboratory Corporation of America Holdings.

This document contains private and confidential health information protected by state and federal law.



RESULTS RECIPIENT

SEATTLE SPERM BANK

Attn: Dr. Jeffrey Olliffe 4915 25th Ave NE, Suite 204W

Seattle, WA 98105 Phone: (206) 588-1484 Fax: (206) 466-4696 NPI: 1306838271 Report Date: 07/10/2017 MALE

DONOR 10149

DOB: Ethnicity: Mixed or Other

Caucasian

Sample Type: EDTA Blood Date of Collection: 06/30/2017 Date Received: 07/01/2017 Date Tested: 07/10/2017 Barcode: 11004212111510 Indication: Egg or sperm donor FEMALE N/A

Family Prep Screen

POSITIVE: CARRIER

ABOUT THIS TEST

The Counsyl Family Prep Screen (version 2.0) utilizes sequencing, maximizing coverage across all DNA regions tested, to help you learn about your chance to have a child with a genetic disease.

RESULTS SUMMARY

Risk Details	DONOR 10149	Partner
Panel Information	Family Prep Screen 2.0 Universal Panel Minus X-Linked (102 conditions tested)	N/A
POSITIVE: CARRIER Steroid-resistant Nephrotic Syndrome	■ CARRIER* NM_014625.2(NPHS2):c.686G>A (R229Q) heterozygote †	The reproductive risk presented is based on a hypothetical pairing with a partner of the same ethnic group.
Reproductive Risk: 1 in 1,600 Inheritance: Autosomal Recessive	(NZZSQ) Neterozygote	Carrier testing should be considered. See "Next Steps".

No disease-causing mutations were detected in any other gene tested. A complete list of all conditions tested can be found on page 6.

*Carriers generally do not experience symptoms.

CLINICAL NOTES

None

NEXT STEPS

- Carrier testing should be considered for the diseases specified above for the patient's partner, as both parents must be carriers before a child is at high risk of developing the disease.
- Genetic counseling is recommended and patients may wish to discuss any positive results with blood relatives, as there is an increased chance that they are also carriers.

[†]Likely to have a negative impact on gene function.



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NPI: 1306838271
Report Date: 07/10/2017

MALE
DONOB 10149
DOB:
Ethnicity: Mixed or Other
Caucasian

Barcode: 11004212111510

FEMALE N/A

Steroid-resistant Nephrotic Syndrome

Gene: NPHS2 | Inheritance Pattern: Autosomal Recessive

Reproductive risk: 1 in 1,600 Risk before testing: 1 in 640,000

Patient	DONOR 10149	No partner tested	
Result	□ Carrier	N/A	
Variant(s)	NM_014625.2(NPHS2);c.686G>A(R229Q) heterozygote [†]	N/A	
Methodology	Sequencing	N/A	
nterpretation	This individual is a carrier of steroid-resistant nephrotic syndrome. Carriers generally do not experience symptoms. The pathogenicity of R229Q is dependent on the variant observed on the other chromosome. In homozygous state, R229Q is not disease-causing.	N/A	
Detection rate	>99%	N/A	
Exons tested	NM 014625:1-8.	N/A	

†Likely to have a negative impact on gene function.

What is Steroid-Resistant Nephrotic Syndrome?

Steroid-resistant nephrotic syndrome type 2 is a disease that causes significant abnormalities in kidney function, often leading to kidney failure.

The age at which symptoms begin varies; in some cases, symptoms have begun before age 2 while in others, symptoms did not appear until later in childhood.

Symptoms include an excess of protein in the urine, a shortage of protein in the blood, an excess of cholesterol and triglycerides in the blood, and generalized swelling in the body tissues. The water-retention that causes swelling can also cause weight gain and high blood pressure. The disease can cause scar tissue to form in the kidney's glomeruli, which are structures responsible for filtering waste products. This is known as focal segmental glomerulosclerosis.

The disease typically leads to kidney failure, necessitating transplantation in many before the age of 20. Even after receiving a kidney transplant, symptoms of the disease can recur. It is described as "steroid-resistant" because unlike other forms of nephritic syndrome, it does not respond to steroid medications.

The disease is caused by a mutation in the gene that provides the instructions for making podocin, a protein used by the kidney's glomeruli.

How common is Steroid-Resistant Nephrotic Syndrome?

The frequency of steroid-resistant nephritic syndrome type 2 is unknown. Several cases have been reported among Israeli-Arab children, however it has been found in other populations as well.



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MALE
DONOR 10149
DOB:
Ethnicity: Mixed or Other

FEMALE N/A

Caucasian Barcode: 11004212111510

How is Steroid-Resistant Nephrotic Syndrome treated?

The goal of treatment is to minimize damage to the kidneys, partially by controlling blood pressure. Medication may also be required for high cholesterol. Often children with steroid-resistant nephritic syndrome require kidney transplants. They many also need medication to control for infection.

What is the prognosis for a person with Steroid-Resistant Nephrotic Syndrome?

The prognosis for a person with steroid-resistant nephritic syndrome type 2 is varied, however with transplantation and careful medical management, these children can live into adulthood.



RESULTS RECIPIENT SEATTLE SPERM BANK Attn: Dr. Jeffrey Olliffe NPI: 1306838271

Report Date: 07/10/2017

MALE **DONOR 10149** DOB

Ethnicity: Mixed or Other

Caucasian

Barcode: 11004212111510

FEMALE N/A

Methods and Limitations

DONOR 10149 [Family Prep Screen 2.0]: sequencing, targeted genotyping, spinal muscular atrophy, and analysis of homologous regions.

Sequencing

High-throughput sequencing is used to analyze the listed exons, as well as selected intergenic and intronic regions, of the genes in the Conditions Tested section of the report. These regions are sequenced to high coverage and the sequences are compared to standards and references of normal variation. Mutations may not be detected in areas of lower sequence coverage. On average, more than 99% of all bases in the exons listed for each gene are sequenced at the minimum read depth. Variants discovered in other exons of these genes will also be reported if they meet quality control criteria. Triplet repeats and large deletions and duplications may not be detected. Small insertions and deletions may not be as accurately determined as single nucleotide variants. Genes that have closely related pseudogenes are not well analyzed by this method.

Detection rates are calculated by estimating from literature the fraction of disease alleles that the methodology is unable to detect.

All variants that are a recognized cause of the disease will be reported. In addition, variants that have not previously been established as a recognized cause of disease may be identified. In these cases, only variants classified as "predicted" or "likely" pathogenic are reported. Predicted/likely pathogenic variants are described elsewhere in the report as "predicted/likely to have a negative impact on gene function". In general, predicted pathogenic variants are those which are predicted to be pathogenic based on the nature of the sequence change, while likely pathogenic variants are evaluated by reviewing reports of allele frequencies in cases and controls, functional studies, variant annotation and effect prediction, and segregation studies. Benign variants, variants of uncertain significance, and variants not directly associated with the intended disease phenotype are not reported. Literature citations validating reported variants are available upon request.

Targeted genotyping

Targeted DNA mutation analysis is used to determine the genotypes of the listed variants in the Conditions Tested section of the report.

Spinal muscular atrophy

Targeted copy number analysis is used to determine the copy number of exon 7 of the SMN1 gene relative to other genes. Other mutations may interfere with this analysis. Some individuals with two copies of SMN1 are carriers with two SMN1 genes on one chromosome and a SMN1 deletion on the other chromosome. This is more likely in individuals who have 2 copies of the SMN1 gene and are positive for the g.27134T>G SNP, which affects the reported residual risk; Ashkenazi Jewish or Asian patients with this genotype have a high post-test likelihood of being carriers for SMA and are reported as carriers. The g,27134T>G SNP is only reported in individuals who have 2 copies of SMN1.

Analysis of homologous regions

A combination of high-throughput sequencing, read depth-based copy number analysis, and targeted genotyping is used to determine the number of functional gene copies and/or the presence of selected loss of function mutations in certain genes that have homology to other regions. The precise breakpoints of large deletions in these genes cannot be determined, but are estimated from copy number analysis. High numbers of pseudogene copies may interfere with this analysis.

If CYP21A2 is tested, patients who have one or more additional copies of the CYP21A2 gene and a loss of function mutation may not actually be a carrier of 21-hydroxylase-deficient congenital adrenal hyperplasia (CAH). Because the true incidence of non-classic CAH is unknown, the residual carrier and reproductive risk numbers on the report are only based on published incidences for classic CAH. However, the published prevalence of non-classic CAH is highest in individuals of Ashkenazi Jewish, Hispanic, Italian, and Yugoslav descent. Therefore, the residual and reproductive risks are likely an underestimate of overall chances for 21-hydroxylase-deficient CAH, especially in the aforementioned populations, as they do not account for non-classic CAH. If HBA1/HBA2 are tested, some individuals with four alpha globin genes may be carriers, with three genes on one chromosome and a deletion on the other chromosome. This and similar, but rare, carrier states, where complementary changes exist in both the gene and a pseudogene, may not be detected by the assay.



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Caucasian

Barcode: 11004212111510

FEMALE N/A

Limitations

In an unknown number of cases, nearby genetic variants may interfere with mutation detection. Other possible sources of diagnostic error include sample mix-up, trace contamination, bone marrow transplantation, blood transfusions and technical errors. This test is designed to detect and report germline alterations. While somatic variants present at low levels may be detected, these may not be reported. If more than one variant is detected in a gene, additional studies may be necessary to determine if those variants lie on the same chromosome or different chromosomes. The test does not fully address all inherited forms of intellectual disability, birth defects and genetic disease. A family history of any of these conditions may warrant additional evaluation. Furthermore, not all mutations will be identified in the genes analyzed and additional testing may be beneficial for some patients. For example, individuals of African, Southeast Asian, and Mediterranean ancestry are at increased risk for being carriers for hemoglobinopathies, which can be identified by CBC and hemoglobin electrophoresis or HPLC (ACOG Practice Bulletin No. 78. Obstet. Gynecol. 2007;109:229-37).

This test was developed and its performance characteristics determined by Counsyl, Inc. It has not been cleared or approved by the US Food and Drug Administration (FDA). The FDA does not require this test to go through premarket review. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high-complexity clinical testing. These results are adjunctive to the ordering physician's evaluation. CLIA Number: #05D1102604.

LAB DIRECTORS

H. Peter Kang, MD, MS, FCAP

Hyunseok Kang



>99%.

RESULTS RECIPIENT

SEATTLE SPERM BANK

Attn: Dr. Jeffrey Olliffe NPI: 1306838271

Report Date: 07/10/2017

MALE

DONOR 10149

DOB: Ethnicity: Mixed or Other

Caucasian

Barcode: 11004212111510

FEMALE N/A

Conditions Tested

21-hydroxylase-deficient Congenital Adrenal Hyperplasia - Gene: CYP21A2. Autosomal Recessive. Analysis of Homologous Regions. Variants (13): CYP21A2 deletion, CYP21A2 duplication, CYP21A2 triplication, G111Vfs*21, I173N, L308FfsX6, P31L, Q319*, Q319*+CYP21A2dup, R357W, V281L, [I237N;V238E;M240K], c.293-13C>G. Detection Rate: Mixed or Other Caucasian 96%. ABCC8-related Hyperinsulinism - Gene: ABCC8. Autosomal Recessive. Sequencing. Exons: NM_000352:1-39. Detection Rate: Mixed or Other Caucasian >99%. Achromatopsia - Gene: CNGB3. Autosomal Recessive. Sequencing. Exons: NM_019098:1-18. Detection Rate: Mixed or Other Caucasian >99%. Alkaptonuria - Gene: HGD. Autosomal Recessive. Sequencing. Exons: NM_000187:1-14. Detection Rate: Mixed or Other Caucasian >99%. Alpha Thalassemia - Genes: HBA1, HBA2. Autosomal Recessive. Analysis of Homologous Regions. Variants (13): -(alpha)20.5, --BRIT, --MEDI, --MEDII, --SEA, --THAI or --FIL, -alpha3.7, -alpha4.2, HBA1+HBA2 deletion, Hb Constant Spring, anti3.7, anti4.2, del HS-40. Detection Rate: Unknown due to rarity of disease. Alpha-1 Antitrypsin Deficiency - Gene: SERPINA1. Autosomal Recessive. Sequencing, Exons: NM_000295;2-5. Detection Rate: Mixed or Other Caucasian

Alpha-mannosidosis - Gene: MAN2B1. Autosomal Recessive. Sequencing. Exons: NM_000528:1-15,17-24. Detection Rate: Mixed or Other Caucasian >99% Alpha-sarcoglycanopathy - Gene: SGCA. Autosomal Recessive. Sequencing. Exons: NM_000023:1-9. Detection Rate: Mixed or Other Caucasian 99%. Andermann Syndrome - Gene: SLC12A6. Autosomal Recessive, Sequencing. Exons: NM_133647:1-25. Detection Rate: Mixed or Other Caucasian >99%. ARSACS - Gene: SACS. Autosomal Recessive. Sequencing. Exons: NM_014363:2-10. Detection Rate: Mixed or Other Caucasian 97%.

Aspartylglycosaminuria - Gene: AGA. Autosomal Recessive. Sequencing. Exons: NM_000027:1-9. Detection Rate: Mixed or Other Caucasian >99%. Ataxia with Vitamin E Deficiency - Gene: TTPA. Autosomal Recessive. Sequencing. Exons: NM_000370:1-5. Detection Rate: Mixed or Other Caucasian >99%. Ataxia-telangiectasia - Gene: ATM. Autosomal Recessive. Sequencing. Exons: NM_000051:2-63. Detection Rate: Mixed or Other Caucasian 92%. Bardet-Biedl Syndrome, BBS1-related - Gene: BBS1. Autosomal Recessive. Sequencing, Exons: NM_024649:1-17. Detection Rate: Mixed or Other Caucasian

>99%. Bardet-Biedl Syndrome, BBS10-related - Gene: BBS10. Autosomal Recessive. Sequencing. Exons: NM_024685:1-2. Detection Rate: Mixed or Other Caucasian

Beta-sarcoglycanopathy - Gene: SGCB. Autosomal Recessive. Sequencing. Exons: NM_000232;1-6. Detection Rate: Mixed or Other Caucasian >99% Biotinidase Deficiency - Gene: BTD. Autosomal Recessive. Sequencing. Exons: NM_000060:1-4. Detection Rate: Mixed or Other Caucasian >99%. Bloom Syndrome - Gene: BLM. Autosomal Recessive. Sequencing. Exons: NM_000057:2-22. Detection Rate: Mixed or Other Caucasian 96%. Canavan Disease - Gene: ASPA. Autosomal Recessive. Sequencing. Exons: NM_000049:1-6. Detection Rate: Mixed or Other Caucasian 94%. Carnitine Palmitoyltransferase IA Deficiency - Gene: CPT1A. Autosomal Recessive. Sequencing. Exons: NM_001876:2-19. Detection Rate: Mixed or Other Caucasian 98%

Carnitine Palmitoyltransferase II Deficiency - Gene: CPT2. Autosomal Recessive. Sequencing, Exons: NM_000098:1-5. Detection Rate: Mixed or Other Caucasian

Cartilage-hair Hypoplasia - Gene: RMRP. Autosomal Recessive. Sequencing. Exon: NR_003051:1. Detection Rate: Mixed or Other Caucasian >99%. Citrullinemia Type 1 - Gene: ASS1. Autosomal Recessive. Sequencing. Exons: NM_000050:3-16. Detection Rate: Mixed or Other Caucasian >99%.

CLN3-related Neuronal Ceroid Lipofuscinosis - Gene: CLN3. Autosomal Recessive, Sequencing, Exons: NM_001042432:2-16. Detection Rate: Mixed or Other Caucasian >99%.

CLN5-related Neuronal Ceroid Lipofuscinosis - Gene: CLN5. Autosomal Recessive. Sequencing, Exons: NM_006493:1-4. Detection Rate: Mixed or Other Caucasian

Cohen Syndrome - Gene: VPS13B. Autosomal Recessive. Sequencing. Exons: NM_017890:2-62. Detection Rate: Mixed or Other Caucasian 90%.

Congenital Disorder of Glycosylation Type Ia - Gene: PMM2. Autosomal Recessive. Sequencing. Exons: NM_000303:1-8. Detection Rate: Mixed or Other Caucasian >99%.

Congenital Disorder of Glycosylation Type Ib - Gene: MPI. Autosomal Recessive. Sequencing, Exons: NM_002435:1-8. Detection Rate: Mixed or Other Caucasian

Congenital Finnish Nephrosis - Gene: NPHS1. Autosomal Recessive. Sequencing. Exons: NM_004646:2-23,26-27,29. Detection Rate: Mixed or Other Caucasian >99%. Costeff Optic Atrophy Syndrome - Gene: OPA3. Autosomal Recessive. Sequencing. Exons: NM_025136:1-2. Detection Rate: Mixed or Other Caucasian >99%. Cystic Fibrosis - Gene: CFTR. Autosomal Recessive. Sequencing. Exons: NM 000492:1-27. IVS8-5T allele analysis is only reported in the presence of the R117H mutation. Detection Rate: Mixed or Other Caucasian 97%. Cystinosis - Gene: CTNS. Autosomal Recessive. Sequencing. Exons: NM_004937;3-12. Detection Rate: Mixed or Other Caucasian >99%. D-bifunctional Protein Deficiency - Gene: HSD17B4. Autosomal Recessive. Sequencing. Exons: NM_000414:1-24. Detection Rate: Mixed or Other Caucasian 94%

Dihydropyrimidine Dehydrogenase Deficiency - Gene: DPYD. Autosomal Recessive. Sequencing, Exons: NM_000110:1-23. Detection Rate: Mixed or Other Caucasian 93% Factor XI Deficiency - Gene: F11. Autosomal Recessive. Sequencing. Exons:

NM_000128:2-15. Detection Rate: Mixed or Other Caucasian >99% Familial Dysautonomia - Gene: IKBKAP. Autosomal Recessive. Sequencing. Exons: NM_003640:2-37. Detection Rate: Mixed or Other Caucasian >99%. Familial Mediterranean Fever - Gene: MEFV. Autosomal Recessive. Sequencing. Exons: NM_000243:1-10. Detection Rate: Mixed or Other Caucasian >99% Fanconi Anemia Type C - Gene: FANCC. Autosomal Recessive. Sequencing. Exons: NM_000136:2-15. Detection Rate: Mixed or Other Caucasian >99%. FKTN-related Disorders - Gene: FKTN. Autosomal Recessive. Sequencing. Exons: NM_001079802:3-11. Detection Rate: Mixed or Other Caucasian >99%. Galactosemia - Gene: GALT. Autosomal Recessive. Sequencing. Exons: NM_000155:1-11. Detection Rate: Mixed or Other Caucasian >99%. Gaucher Disease - Gene: GBA. Autosomal Recessive. Analysis of Homologous Regions. Variants (10): D409V, D448H, IVS2+1G>A, L444P, N370S, R463C, R463H, R496H, V394L, p.L29Afs*18. Detection Rate: Mixed or Other Caucasian 60%. GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness - Gene: GJB2. Autosomal Recessive. Sequencing. Exons: NM_004004:1-2. Detection Rate: Mixed or Other Caucasian 98%.

Glutaric Acidemia Type 1 - Gene: GCDH. Autosomal Recessive. Sequencing. Exons: NM_000159:2-12. Detection Rate: Mixed or Other Caucasian >99%. Glycogen Storage Disease Type Ia - Gene: G6PC, Autosomal Recessive. Sequencing, Exons: NM_000151:1-5. Detection Rate: Mixed or Other Caucasian

Glycogen Storage Disease Type Ib - Gene: SLC37A4. Autosomal Recessive. Sequencing. Exons: NM_001164277:3-11. Detection Rate: Mixed or Other Caucasian >99%

Glycogen Storage Disease Type III - Gene: AGL. Autosomal Recessive. Sequencing. Exons: NM_000642:2-34. Detection Rate: Mixed or Other Caucasian >99%. Glycogen Storage Disease Type V - Gene: PYGM. Autosomal Recessive. Sequencing, Exons: NM_005609:1-20. Detection Rate: Mixed or Other Caucasian

GRACILE Syndrome - Gene: BCS1L. Autosomal Recessive. Sequencing. Exons: NM_004328:3-9. Detection Rate: Mixed or Other Caucasian >99%. HADHA-related Disorders - Gene: HADHA. Autosomal Recessive. Sequencing. Exons: NM_000182:1-20. Detection Rate: Mixed or Other Caucasian >99%. Hb Beta Chain-related Hemoglobinopathy (Including Beta Thalassemia and Sickle Cell Disease) - Gene: HBB. Autosomal Recessive. Sequencing. Exons: NM_000518:1-3. Detection Rate: Mixed or Other Caucasian 96%. Hereditary Fructose Intolerance - Gene: ALDOB. Autosomal Recessive. Sequencing. Exons: NM_000035:2-9. Detection Rate: Mixed or Other Caucasian

Herlitz Junctional Epidermolysis Bullosa, LAMA3-related - Gene: LAMA3. Autosomal Recessive. Sequencing, Exons: NM_000227:1-16,18-38. Detection Rate: Mixed or Other Caucasian >99%.



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DOB; Ethnicity: Mixed or Other

Caucasian

Barcode: 11004212111510

FEMALE N/A

Herlitz Junctional Epidermolysis Bullosa, LAMB3-related - Gene: LAMB3. Autosomal Recessive. Sequencing. Exons: NM_000228:2-23. Detection Rate: Mixed or Other Caucasian >99%.

Herlitz Junctional Epidermolysis Bullosa, LAMC2-related - Gene: LAMC2. Autosomal Recessive. Sequencing. Exons: NM_005562:1-23. Detection Rate: Mixed or Other Caucasian >99%.

Hexosaminidase A Deficiency (Including Tay-Sachs Disease) - Gene: HEXA, Autosomal Recessive. Sequencing. **Exons:** NM_000520:1-14. **Detection Rate:** Mixed or Other Caucasian >99%.

Homocystinuria Caused by Cystathionine Beta-synthase Deficiency - Gene; CBS. Autosomal Recessive. Sequencing. Exons: NM_000071:3-17. Detection Rate: Mixed or Other Caucasian >99%.

Hypophosphatasia, Autosomal Recessive - Gene: ALPL. Autosomal Recessive. Sequencing. **Exons:** NM_000478:2-12. **Detection Rate:** Mixed or Other Caucasian >99%.

Inclusion Body Myopathy 2 - Gene: GNE. Autosomal Recessive. Sequencing. Exons: NM_001128227:3-12. Detection Rate: Mixed or Other Caucasian >99%. Isovaleric Acidemia - Gene: IVD. Autosomal Recessive. Sequencing. Exons: NM_002225:1-12. Detection Rate: Mixed or Other Caucasian >99%. Joubert Syndrome 2 - Gene: TMEM216. Autosomal Recessive. Sequencing. Exons: NM_001173990:1-5. Detection Rate: Mixed or Other Caucasian >99%. Krabbe Disease - Gene: GALC. Autosomal Recessive. Sequencing. Exons: NM_000153:1-17. Detection Rate: Mixed or Other Caucasian >99%. Lipoamide Dehydrogenase Deficiency - Gene: DLD. Autosomal Recessive. Sequencing. Exons: NM_000108:1-14. Detection Rate: Mixed or Other Caucasian >99%.

Maple Syrup Urine Disease Type 1B - Gene: BCKDHB. Autosomal Recessive. Sequencing. Exons: NM_183050:1-10. Detection Rate: Mixed or Other Caucasian >99%.

Medium Chain Acyl-CoA Dehydrogenase Deficiency - Gene: ACADM. Autosomal Recessive. Sequencing. Exons: NM_000016:1-12. Detection Rate: Mixed or Other Caucasian >99%.

Megalencephalic Leukoencephalopathy with Subcortical Cysts - Gene: MLC1. Autosomal Recessive, Sequencing. Exons: NM_015166:2-12. Detection Rate: Mixed or Other Caucasian > 99%.

Metachromatic Leukodystrophy - Gene: ARSA. Autosomal Recessive. Sequencing. Exons: NM_000487:1-8. Detection Rate: Mixed or Other Caucasian >99%. Mucolipidosis IV - Gene: MCOLN1. Autosomal Recessive. Sequencing. Exons: NM_020533:1-14. Detection Rate: Mixed or Other Caucasian >99%. Mucopolysaccharidosis Type I - Gene: IDUA. Autosomal Recessive. Targeted Genotyping. Variants (2): Q70*, W402*. Detection Rate: Mixed or Other Caucasian 67%.

Muscle-eye-brain Disease - Gene: POMGNT1. Autosomal Recessive. Sequencing. Exons: NM_017739:2-22. Detection Rate: Mixed or Other Caucasian 90%. NEB-related Nemaline Myopathy - Gene: NEB. Autosomal Recessive. Sequencing. Exons: NM_001271208:3-80,117-183. Detection Rate: Mixed or Other Caucasian 91%.

Niemann-Pick Disease Type C - Gene: NPC1. Autosomal Recessive. Sequencing. Exons: NM_000271:1-25. Detection Rate: Mixed or Other Caucasian 96%. Niemann-Pick Disease, SMPD1-associated - Gene: SMPD1. Autosomal Recessive. Sequencing. Exons: NM_000543:1-6. Detection Rate: Mixed or Other Caucasian >99%.

Nijmegen Breakage Syndrome - Gene: NBN. Autosomal Recessive. Sequencing. Exons: NM_002485:1-16. Detection Rate: Mixed or Other Caucasian >99%. Northern Epilepsy - Gene: CLN8. Autosomal Recessive. Sequencing. Exons: NM_018941:2-3. Detection Rate: Mixed or Other Caucasian >99%. PCDH15-related Disorders - Gene: PCDH15. Autosomal Recessive. Sequencing. Exons: NM_033056:2-33. Detection Rate: Mixed or Other Caucasian 85%. Pendred Syndrome - Gene: SLC26A4. Autosomal Recessive. Sequencing. Exons: NM_000441:2-21. Detection Rate: Mixed or Other Caucasian >99%. PEX1-related Zellweger Syndrome Spectrum - Gene: PEX1. Autosomal Recessive. Sequencing. Exons: NM_000466:1-24. Detection Rate: Mixed or Other Caucasian >99%.

Phenylalanine Hydroxylase Deficiency - Gene: PAH. Autosomal Recessive. Sequencing. Exons: NM_000277:1-13. Detection Rate: Mixed or Other Caucasian 98%.

PKHD1-related Autosomal Recessive Polycystic Kidney Disease - Gene: PKHD1. Autosomal Recessive. Sequencing. Exons: NM_138694;2-67. Detection Rate: Mixed or Other Caucasian 98%.

Polyglandular Autoimmune Syndrome Type 1 - Gene: AIRE. Autosomal Recessive. Sequencing. Exons: NM_000383:1-14. Detection Rate: Mixed or Other Caucasian >99%.

Pompe Disease - Gene: GAA. Autosomal Recessive. Sequencing. Exons: NM_000152:2-20. Detection Rate: Mixed or Other Caucasian 90%. PPT1-related Neuronal Ceroid Lipofuscinosis - Gene: PPT1. Autosomal Recessive. Sequencing. Exons: NM_000310:1-9. Detection Rate: Mixed or Other Caucasian >99%.

Primary Carnitine Deficiency - Gene: SLC22A5. Autosomal Recessive. Sequencing. Exons: NM_003060:1-10. Detection Rate: Mixed or Other Caucasian >99%. Primary Hyperoxaluria Type 1 - Gene: AGXT. Autosomal Recessive. Sequencing. Exons: NM_000030:1-11. Detection Rate: Mixed or Other Caucasian >99%. Primary Hyperoxaluria Type 2 - Gene: GRHPR. Autosomal Recessive. Sequencing. Exons: NM_012203:1-9. Detection Rate: Mixed or Other Caucasian >99%. PROP1-related Combined Pituitary Hormone Deficiency - Gene: PROP1. Autosomal Recessive. Sequencing. Exons: NM_006261:1-3. Detection Rate: Mixed or Other Caucasian >99%.

Pseudocholinesterase Deficiency - Gene: BCHE. Autosomal Recessive. Sequencing. Exons: NM_000055:2-4. Detection Rate: Mixed or Other Caucasian >99%. Pycnodysostosis - Gene: CTSK. Autosomal Recessive. Sequencing. Exons: NM_000396:2-8. Detection Rate: Mixed or Other Caucasian >99%. Rhizomelic Chondrodysplasia Punctata Type 1 - Gene: PEX7. Autosomal Recessive. Sequencing. Exons: NM_000288:1-10. Detection Rate: Mixed or Other Caucasian >99%.

Salla Disease - Gene: SLC17A5. Autosomal Recessive. Sequencing. Exons: NM_012434:1-11. Detection Rate: Mixed or Other Caucasian 93%.
Segawa Syndrome - Gene: TH. Autosomal Recessive. Sequencing. Exons: NM_000360:1-13. Detection Rate: Mixed or Other Caucasian 96%.
Short Chain Acyl-CoA Dehydrogenase Deficiency - Gene: ACADS. Autosomal Recessive. Sequencing. Exons: NM_000017:1-10. Detection Rate: Mixed or Other Caucasian >99%.

Sjogren-Larsson Syndrome - Gene: ALDH3A2. Autosomal Recessive. Sequencing. Exons: NM_000382:1-10. Detection Rate: Mixed or Other Caucasian 92%. Smith-Lemli-Opitz Syndrome - Gene: DHCR7. Autosomal Recessive. Sequencing. Exons: NM_001360:3-9. Detection Rate: Mixed or Other Caucasian >99%. Spinal Muscular Atrophy - Gene: SMN1. Autosomal Recessive. Spinal Muscular Atrophy. Variant (1): SMN1 copy number. Detection Rate: Mixed or Other Caucasian 95%.

Steroid-resistant Nephrotic Syndrome - Gene: NPHS2. Autosomal Recessive. Sequencing. Exons: NM_014625:1-8. Detection Rate: Mixed or Other Caucasian >99%.

Sulfate Transporter-related Osteochondrodysplasia - Gene: SLC26A2. Autosomal Recessive. Sequencing. Exons: NM_000112:2-3. Detection Rate: Mixed or Other Caucasian >99%.

TPP1-related Neuronal Ceroid Lipofuscinosis - Gene: TPP1. Autosomal Recessive. Sequencing. Exons: NM_000391:1-13. Detection Rate: Mixed or Other Caucasian >99%.

Tyrosinemia Type I - Gene: FAH. Autosomal Recessive. Sequencing. Exons: NM_000137:1-14. Detection Rate: Mixed or Other Caucasian >99%. Usher Syndrome Type 3 - Gene: CLRN1. Autosomal Recessive. Sequencing. Exons: NM_174878:1-3. Detection Rate: Mixed or Other Caucasian >99%. Very Long Chain Acyl-CoA Dehydrogenase Deficiency - Gene: ACADVL. Autosomal Recessive. Sequencing. Exons: NM_000018:1-20. Detection Rate: Mixed or Other Caucasian >99%.

Wilson Disease - Gene: ATP7B. Autosomal Recessive. Sequencing. Exons: NM_000053:1-21. Detection Rate: Mixed or Other Caucasian >99%.



RESULTS RECIPIENT
SEATTLE SPERM BANK
Attn: Dr. Jeffrey Olliffe
NPI: 1306838271
Report Date: 07/10/2017

MALE DONOR 10149 DOB:

DOB: Ethnicity: Mixed or Other

Caucasian

Barcode: 11004212111510

FEMALE N/A

Risk Calculations

Below are the risk calculations for all conditions tested. Since negative results do not completely rule out the possibility of being a carrier, the **residual risk** represents the patient's post-test likelihood of being a carrier and the **reproductive risk** represents the likelihood the patient's future children could inherit each disease. These risks are inherent to all carrier screening tests, may vary by ethnicity, are predicated on a negative family history and are present even after a negative test result. Inaccurate reporting of ethnicity may cause errors in risk calculation. The reproductive risk presented is based on a hypothetical pairing with a partner of the same ethnic group.

findicates a positive result. See the full clinical report for interpretation and details.

Disease	DONOR 10149 Residual Risk	Reproductive Risk
21-hydroxylase-deficient Congenital Adrenal Hyperplasia	1 in 1,400	1 in 310,000
ABCC8-related Hyperinsulinism	1 in 11,000	< 1 in 1,000,000
Achromatopsia	1 in 8,600	< 1 in 1,000,000
Alkaptonuria	< 1 in 50,000	< 1 in 1,000,000
Alpha Thalassemia	Alpha globin status; aa/aa.	Not calculated
Alpha-1 Antitrypsin Deficiency	1 in 3,400	1 in 460,000
Alpha-mannosidosis	1 in 35,000	< 1 in 1,000,000
Alpha-sarcoglycanopathy	1 in 31,000	< 1 in 1,000,000
Andermann Syndrome	< 1 in 50,000	< 1 in 1,000,000
ARSACS	< 1 in 18,000	< 1 in 1,000,000
Aspartylglycosaminuria	< 1 in 50,000	< 1 in 1,000,000
Ataxia with Vitamin E Deficiency	< 1 in 50,000	< 1 in 1,000,000
Ataxia-telangiectasia	1 in 2,100	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS1-related	1 in 16,000	< 1 in 1,000,000
Bardet-Biedl Syndrome, BBS10-related	1 in 16,000	< 1 in 1,000,000
Beta-sarcoglycanopathy	< 1 in 50,000	< 1 in 1,000,000
Biotinidase Deficiency	1 in 13,000	1 in 670,000
Bloom Syndrome	< 1 in 12,000	< 1 in 1,000,000
Canavan Disease	< 1 in 7,700	< 1 in 1,000,000
Carnitine Palmitoyltransferase IA Deficiency	< 1 in 31,000	< 1 in 1,000,000
Carnitine Palmitoyltransferase II Deficiency	< 1 in 50,000	< 1 in 1,000,000
Cartilage-hair Hypoplasia	< 1 in 50,000	< 1 in 1,000,000
Citrullinemia Type 1	1 in 12,000	< 1 in 1,000,000
CLN3-related Neuronal Ceroid Lipofuscinosis	1 in 22,000	< 1 in 1,000,000
CLN5-related Neuronal Ceroid Lipofuscinosis	< 1 in 23,000	< 1 in 1,000,000
Cohen Syndrome	< 1 in 5,200	< 1 in 1,000,000
Congenital Disorder of Glycosylation Type la	1 in 16,000	< 1 in 1,000,000
Congenital Disorder of Glycosylation Type Ib	< 1 in 50,000	< 1 in 1,000,000
Congenital Finnish Nephrosis	< 1 in 50,000	< 1 in 1,000,000
Costeff Optic Atrophy Syndrome	< 1 in 50,000	< 1 in 1,000,000
Cystic Fibrosis	1 in 910	1 in 99,000
Cystinosis	1 in 22,000	< 1 in 1,000,000
D-bifunctional Protein Deficiency	1 in 2,900	< 1 in 1,000,000
Dihydropyrimidine Dehydrogenase Deficiency	1 in 1,400	1 in 570,000
Factor XI Deficiency	< 1 in 50,000	< 1 in 1,000,000
Familial Dysautonomia	< 1 in 50,000	< 1 in 1,000,000
Familial Mediterranean Fever	< 1 in 50,000	< 1 in 1,000,000
Fanconi Anemia Type C	1 in 16,000	< 1 in 1,000,000
FKTN-related Disorders	< 1 in 50,000	< 1 in 1,000,000
Galactosemia	1 in 8,600	< 1 in 1,000,000
Gaucher Disease	1 in 280	1 in 120,000
GJB2-related DFNB1 Nonsyndromic Hearing Loss and Deafness	1 in 1,700	1 in 220,000
Glutaric Acidemia Type 1	1 in 10,000	< 1 in 1,000,000
Glycogen Storage Disease Type Ia	1 in 18,000	< 1 in 1,000,000
Glycogen Storage Disease Type Ib	1 in 35,000	< 1 in 1,000,000
Glycogen Storage Disease Type III	1 in 16,000	< 1 in 1,000,000
Glycogen Storage Disease Type V	1 in 16,000	< 1 in 1,000,000
GRACILE Syndrome	< 1 in 50,000	< 1 in 1,000,000



RESULTS RECIPIENT

SEATTLE SPERM BANK

Attn: Dr. Jeffrey Olliffe NPI: 1306838271

Report Date: 07/10/2017

MALE

DONOR 10149

DOB: Ethnicity: Mixed or Other

Caucasian

Barcode: 11004212111510

FEMALE N/A

Disease	DONOR 10149 Residual Risk	Reproductive Risk
HADHA-related Disorders	1 in 15,000	< 1 in 1,000,000
Hb Beta Chain-related Hemoglobinopathy (Including Beta Thalassemia and	1 in 1,200	1 in 240,000
Sickle Cell Disease)		-1 (- 1 000 000
Hereditary Fructose Intolerance	1 in 8,000	< 1 in 1,000,000
Herlitz Junctional Epidermolysis Bullosa, LAMA3-related	<1 in 50,000	<1 in 1,000,000
Herlitz Junctional Epidermolysis Bullosa, LAMB3-related	< 1 in 50,000	< 1 in 1,000,000
Herlitz Junctional Epidermolysis Bullosa, LAMC2-related	< 1 in 50,000	< 1 in 1,000,000
Hexosaminidase A Deficiency (Including Tay-Sachs Disease)	1 in 30,000	< 1 in 1,000,000
Homocystinuria Caused by Cystathionine Beta-synthase Deficiency	1 in 25,000	< 1 in 1,000,000
Hypophosphatasia, Autosomal Recessive	1 in 16,000	< 1 in 1,000,000
Inclusion Body Myopathy 2	< 1 in 50,000	< 1 in 1,000,000
Isovaleric Acidemia	1 in 25,000	< 1 in 1,000,000
Joubert Syndrome 2	< 1 in 50,000	< 1 in 1,000,000
Krabbe Disease	1 in 15,000	< 1 in 1,000,000
Lipoamide Dehydrogenase Deficiency	< 1 in 50,000	< 1 in 1,000,000
Maple Syrup Urine Disease Type 1B	1 in 25,000	< 1 in 1,000,000
Medium Chain Acyl-CoA Dehydrogenase Deficiency	1 in 5,900	< 1 in 1,000,000
Megalencephalic Leukoencephalopathy with Subcortical Cysts	< 1 in 50,000	< 1 in 1,000,000
Metachromatic Leukodystrophy	1 in 20,000	< 1 in 1,000,000
Mucolipidosis IV	< 1 in 50,000	< 1 in 1,000,000
Mucopolysaccharidosis Type I	1 in 480	1 in 300,000
Muscle-eye-brain Disease	< 1 in 5,000	< 1 in 1,000,000
NEB-related Nemaline Myopathy	< 1 in 5,500	< 1 in 1,000,000
Niemann-Pick Disease Type C	1 in 5,400	< 1 in 1,000,000
Niemann-Pick Disease, SMPD1-associated	1 in 25,000	< 1 in 1,000,000
Nijmegen Breakage Syndrome	1 in 16,000	< 1 in 1,000,000
Northern Epilepsy	< 1 in 50,000	< 1 in 1,000,000
PCDH15-related Disorders	1 in 2,300	< 1 in 1,000,000
Pendred Syndrome	1 in 7,000	< 1 in 1,000,000
PEX1-related Zellweger Syndrome Spectrum	1 in 11,000	< 1 in 1,000,000
Phenylalanine Hydroxylase Deficiency	1 in 3,000	1 in 600,000
PKHD1-related Autosomal Recessive Polycystic Kidney Disease	1 in 4,100	1 in 990,000
Polyglandular Autoimmune Syndrome Type 1	1 in 14,000	< 1 in 1,000,000
Pompe Disease	1 in 1,600	< 1 in 1,000,000
PPT1-related Neuronal Ceroid Lipofuscinosis	< 1 in 50,000	< 1 in 1,000,000
Primary Carnitine Deficiency	< 1 in 50,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 1	1 in 35,000	< 1 in 1,000,000
Primary Hyperoxaluria Type 2	< 1 in 50,000	< 1 in 1,000,000
PROP1-related Combined Pituitary Hormone Deficiency	1 in 11,000	< 1 in 1,000,000
Pseudocholinesterase Deficiency (Mild Condition)	1 in 2,700	1 in 300,000
Pycnodysostosis	< 1 in 50,000	< 1 in 1,000,000
Rhizomelic Chondrodysplasia Punctata Type 1	1 in 16,000	< 1 in 1,000,000
Salla Disease	< 1 in 7,500	< 1 in 1,000,000
Segawa Syndrome	< 1 in 13,000	< 1 in 1,000,000
Short Chain Acyl-CoA Dehydrogenase Deficiency	1 in 16,000	< 1 in 1,000,000
Sjogren-Larsson Syndrome	1 in 3,100	< 1 in 1,000,000
Smith-Lemli-Opitz Syndrome	1 in 4,900	1 in 970,000
	Negative for g.27134T>G SNP	
Spinal Muscular Atrophy	SMN1: 2 copies 1 in 770	1 in 110,000
Steroid-resistant Nephrotic Syndrome	NM_014625.2(NPHS2):c.686G>A(R229Q) heterozygote	1 in 1,600
Sulfate Transporter-related Osteochondrodysplasia	1 in 11,000	< 1 in 1,000,000
TPP1-related Neuronal Ceroid Lipofuscinosis	1 in 30,000	< 1 in 1,000,000
Tyrosinemia Type I	1 in 17,000	< 1 in 1,000,000
Usher Syndrome Type 3	<1 in 50,000	< 1 in 1,000,000
Very Long Chain Acyl-CoA Dehydrogenase Deficiency	1 in 8,800	< 1 in 1,000,000
Wilson Disease	1 in 8,600	< 1 in 1,000,000
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