

500 Chipeta Way, Salt Lake City, Utah 84108-1221

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Jonathan R. Genzen, MD, PhD, Chief Medical Officer

Client: ARUP Example Report Only

500 Chipeta Way

Salt Lake City, UT 84108-

USA

Provider: .108 -TEST,**Patient:****RHD, POSITIVE****DOB:****Sex:**

Female

Patient Identifiers:

40652

Visit Number (FIN):

40977

Client Supplied ID:**Specimen Collected:** 19-Sep-22 16:23

X-RhD Gene (RHD) Copy Number	Procedure	Received: 19-Sep-22 16:38	Result	Units	Report/Verified: 19-Sep-22 16:48	Reference Interval
RhD Gene (RHD) Copy Number	Specimen		Amniotic fluid			
RhD Gene (RHD) Copy Number			2 copies ^{f1 i1}			

Result Footnote

f1: RhD Gene (RHD) Copy Number

Indication for testing: Determine fetal RhD zygosity to assess risk for alloimmune hemolytic disease of the fetus and newborn (HDFN).

Homozygous: Two copies of the RhD allele were detected in this prenatal sample, predictive of an RhD-positive phenotype in this fetus.

This result has been reviewed and approved by Rong Mao, M.D.

Test Information

i1: RhD Gene (RHD) Copy Number

BACKGROUND INFORMATION: RhD Gene (RHD) Copy Number

CHARACTERISTICS: Fetal or neonatal erythroblastosis and hydrops.

INCIDENCE OF RHD NEGATIVE GENOTYPE: 15 percent Caucasians, 5 percent African Americans, less than 1 percent Asians.

INHERITANCE: Autosomal recessive

CAUSE: Maternal-fetal Rh D antigen incompatibility

CLINICAL SENSITIVITY: Greater than 98 percent.

METHODS: Determine the presence of the RHD exons 5, 7, and a 37 base pair insertion in the intron 3/exon 4 boundary by PCR and fluorescence monitoring. Allelic height ratios are used to determine the number of copies of RHD as compared to RHCE.

ANALYTICAL SENSITIVITY AND SPECIFICITY: Greater than 99 percent.

LIMITATIONS: A fetal sample is required for determination of fetal RHD genotype.

Bloody amniotic fluid specimens may give false-negative results because of maternal cell contamination; specificity may be compromised by mutations in primer sites or those outside the RHD exons examined; fetuses predicted to be unaffected should continue to be monitored by noninvasive means. Diagnostic errors can occur due to rare sequence variations.

*=Abnormal, #=Corrected, C=Critical, f=Result Footnote, H=High, i=Test Information, L=Low, t=Interpretive Text, @=Performing lab

Unless otherwise indicated, testing performed at:**ARUP Laboratories**

500 Chipeta Way, Salt Lake City, UT 84108

Laboratory Director: Jonathan R. Genzen, MD, PhD

ARUP Accession: 22-262-900230**Report Request ID:** 16422914**Printed:** 20-Sep-22 12:57

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Patient: RHD, POSITIVE

DOB:

Patient Identifiers: 40652

Test Information

i1: RhD Gene (RHD) Copy Number

For quality assurance purposes, ARUP Laboratories will provide confirmation of the above result at no charge for amniotic specimens. Following delivery, please collect a cord blood sample from the infant in a lavender (EDTA), pink (K2EDTA), or yellow (ACD Solution A) tube. Please specify on the test request form that this is a confirmatory study to be performed at no charge. Please provide the mother's name for specimen identification purposes.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

Counseling and informed consent are recommended for genetic testing. Consent forms are available online.

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