

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:****RHC GENO, POSITIVE****DOB:****Sex:**

Female

Patient Identifiers:

40669

Visit Number (FIN):

40994

Client Supplied ID:**Specimen Collected:** 19-Sep-22 16:35

RhC/c (RHCE) Antigen Genotyping Procedure	Received: 19-Sep-22 16:38	Result	Units	Report/Verified: 20-Sep-22 15:23	Reference Interval
RHC GENO Specimen		Cultured Amnio			
RhCc Genotype		C/c ^{f1 i1}			

Result Footnote

f1: RhCc Genotype

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

Fetal RhCc genotype: C/c

Interpretation: One copy of the RHCE*2 (C) allele and one copy of the RHCE*4 (c) allele were detected in this prenatal sample. This result is predictive of an RhC+c+ phenotype.

This result has been reviewed and approved by Yuan Ji, Ph.D.

Test Information

i1: RhCc Genotype

BACKGROUND INFORMATION: RhC/c (RHCE) Antigen Genotyping

CHARACTERISTICS: Erythrocyte alloimmunization may result in hemolytic transfusion reactions or hemolytic disease of the fetus and newborn (HDFN).

C ANTIGEN FREQUENCY: 0.68 Caucasians, 0.27 African Americans, 0.93 Asians.

c ANTIGEN FREQUENCY: 0.80 Caucasians, 0.98 African Americans, 0.47 Asians.

INHERITANCE: Co-dominant.

CAUSE: Antigen-antibody mediated red-cell hemolysis between donor/recipient or transferred maternal antibodies.

POLYMORPHISM TESTED: Rh blood group RHCE*2 (C), RHCE*4 (c): c.307C>T; p.Pro103Ser and 109bp insertion.

CLINICAL SENSITIVITY: 99 percent.

METHODOLOGY: Immucor PreciseType(TM) HEA Molecular BeadChip which is FDA-approved for clinical testing.

ANALYTIC SENSITIVITY AND SPECIFICITY: 99 percent.

LIMITATIONS: Bloody amniotic fluid samples may give false-negative results because of maternal cell contamination. Rare nucleotide changes leading to altered or partial antigen expression may not be detected by this assay. Genotypes resulting in Rh null phenotypes will not be assessed. This assay is occasionally limited in predicting genotype due to extreme variation in the Rh locus. False-negative RhC or

* = 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: 22-262-900242**Report Request ID:** 16423092**Printed:** 20-Sep-22 17:04

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Patient: RHC GENO, POSITIVE

DOB:

Patient Identifiers: 40669

Test Information

i1: RhCc Genotype

Rhc predictions may result due to RHCE-D-CE fusion genes. Patients who have had hematopoietic stem cell transplants may have inconclusive results on this test. Abnormal signal intensities may result in indeterminate genotyping results.

For quality assurance purposes, ARUP Laboratories will confirm the above result at no charge following delivery. Order Confirmation of Fetal Testing and include a copy of the original fetal report (or the mother's name and date of birth) with the test submission. Please contact an ARUP genetic counselor at (800) 242-2787 extension 2141 prior to specimen submission.

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