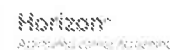


Patient Information Patient Name: Date Of Birth: Gender: Male Patient ID: N/A Medical Record #: N/A Collection Kit: Accession ID: Case File ID: Ethnicity:	Test Information Ordering Physician: Coralie Beauchamps Clinic Information: Clinique Ovo Phone: Report Date: 07/22/2026 Sample Collected: Sample Received: Sample Type:
---	---



CARRIER SCREENING REPORT

ABOUT THIS SCREEN: Horizon™ is a carrier screen for specific autosomal recessive and X-linked diseases. This information can help patients learn their risk of having a child with specific genetic conditions.

ORDER SELECTED: The Horizon Custom panel was ordered for this patient. Males are not screened for X-linked diseases

FINAL RESULTS SUMMARY:



CARRIER for GLYCOGEN STORAGE DISEASE TYPE 5 (McArdle Disease)

Positive for the pathogenic variant c.148C>T (p.R50*) in the PYGM gene. If this individual's partner is a carrier for GLYCOGEN STORAGE DISEASE TYPE 5 (McArdle Disease), their chance to have a child with this condition is 1 in 4 (25%). Carrier screening for this individual's partner is suggested.

Negative for 550 out of 551 diseases

No other pathogenic variants were detected in the genes that were screened. The patient's remaining carrier risk after the negative screening results is listed for each disease/gene on the Horizon website at <https://www.natera.com/cond-session/fr-31/>. Please see the following pages of this report for a comprehensive list of all conditions included on this individual's screen.

Carrier screening is not diagnostic and may not detect all possible pathogenic variants in a given gene.

RECOMMENDATIONS

Individuals who would like to review their Horizon report with a Natera Laboratory Genetic Counselor may schedule a telephone genetic information session by calling 650-249-9090 or visiting naterasession.com. Clinicians with questions may contact Natera at 650-249-9090 or email support@natera.com. Individuals with positive results may wish to discuss these results with family members to allow them the option to be screened. Comprehensive genetic counseling to discuss the implications of these test results and possible associated reproductive risk is recommended.

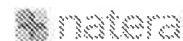
Christine M. Eng, M.D.
Medical Director, Baylor Genetics

Linxian Meng, PhD
Laboratory Director, Baylor Genetics

J. Denise Kien-Ken, PhD, FACMG
Senior Laboratory Director, Natera

Yang Wang, PhD, FACMG
Laboratory Director, Natera

This pre-analytic and pre-test phase of the test was performed by Natera, Inc., 13011 McClellan Pass, Building # Suite 110, Austin, TX 78753 (CLIA ID #502093700). This test was performed by Baylor Miraca Genetics, DBA Baylor Genetics, 2450 Redwood Blvd, Houston, TX 77058 (CLIA ID #02666090). The performance characteristics of this test were developed by Baylor Miraca Genetics, DBA Baylor Genetics (CLIA ID #02666090). This test has not been cleared or approved by the U.S. Food and Drug Administration (FDA). These laboratories are regulated under CLIA as qualified to perform high-complexity testing. © Natera, Inc. 2022. All Rights Reserved.



Page 2/23

Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

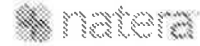
Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mch.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician: Coralie Beauchamps



Date Of Birth:
Case File ID:

Clinic Information: Clinique Ovo

Report Date: 07/22/2026

GLYCOGEN STORAGE DISEASE TYPE 5 (McArdle Disease)

Understanding Your Horizon Carrier Screen Results

What is Glycogen Storage Disease, Type 5 (McArdle Disease)?

Glycogen Storage Disease, Type 5 (GSD5), also called McArdle disease, is an inherited disorder in which the body cannot change glycogen to glucose, the sugar used by the body for energy. This leads lack of enough energy for muscle cells to work properly. The symptoms of GSD5 can vary from mild to severe and commonly occur in young adults between the ages of 20 and 30. Symptoms include muscle cramping, pain, weakness, soreness, and fatigue when exercising. Individuals with this disorder may also experience blood in the urine and temporary kidney failure. Clinical trials involving potential new treatments for this condition may be available (see www.clinicaltrials.gov).

What causes Glycogen Storage Disease Type 5 (McArdle Disease)?

Glycogen Storage Disease, Type 5 (GSD5) is caused by a change, or mutation, in both copies of the PYGM gene pair. These mutations cause the genes to not work properly or not work at all. When both copies of this gene do not work correctly, it leads to the symptoms described above. GSD5 is inherited in an autosomal recessive manner. This means that, in most cases, both parents must be carriers of a mutation in one copy of the PYGM gene to have a child with GSD5. People who are carriers for GSD5 are usually healthy and do not have symptoms nor do they have GSD5 themselves. Usually a child inherits two copies of each gene, one copy from the mother and one copy from the father. If the mother and father are both carriers for GSD5 there is a 1 in 4, or 25%, chance in each pregnancy for both partners to pass on their PYGM gene mutations to the child, who will then have GSD5. Individuals found to carry more than one mutation for GSD5 should discuss their risk for having an affected child and any potential effects to their own health with their health care provider. There are a number of other subtypes of Glycogen Storage Disease, each caused by mutations in different genes. A person who is a carrier for GSD5 is not likely to be at significantly increased risk for having a child with other subtypes of this disorder.

What can I do next?

You may wish to speak with a local genetic counselor about your carrier test results. A genetic counselor in your area can be located on the National Society of Genetic Counselors website (www.nsgc.org). Your siblings and other relatives are at increased risk to also have this mutation. You are encouraged to inform your family members of your test results as they may wish to consider being tested themselves. If you are pregnant, your partner can have carrier screening for GSD5 ordered by a health care professional. If your partner is not found to be a carrier for GSD5, your risk of having a child with this condition is greatly reduced. Couples at risk of having a baby with GSD5 can opt to have prenatal diagnosis done through chorionic villus sampling (CVS) or amniocentesis during pregnancy or can choose to have the baby tested after birth for GSD5. If you are not yet pregnant, your partner can have carrier screening for GSD5 ordered by a health care professional. If your partner is found to be a carrier for GSD5 you have several reproductive options to consider:

- Natural pregnancy with or without prenatal diagnosis of the fetus or testing the baby after birth for Glycogen Storage Disease, Type 5
- Preimplantation genetic diagnosis (PGD) with in vitro fertilization (IVF) to test embryos Glycogen Storage Disease, Type 5
- Adoption or use of a sperm or egg donor who is not a carrier for Glycogen Storage Disease, Type 5

What resources are available?

- Genetics Home Reference: <http://ghr.nlm.nih.gov/condition/glycogen-storage-disease-type-v>
- Prenatal diagnosis done through CVS: <http://www.marchofdimes.org/chorionic-villus-sampling.aspx>
- Prenatal diagnosis done through Amniocentesis: <http://www.marchofdimes.org/amniocentesis.aspx>
- PGD with IVF: <http://www.natera.com/spectrum>



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mch.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician:



Date Of Birth:
Case File ID:

Clinic Information:

Report Date:

VARIANT DETAILS

PYGM, c.148C>T (p.R50*), pathogenic

- The c.148C>T (p.R50*) variant in the PYGM gene has been observed at a frequency of 0.1499% in the gnomAD v2.1.1 dataset.
- This variant has been reported in a homozygous state or with another variant in individual(s) with glycogen storage disease, type V (PMID: 8316268, 16786513, 21802952, 22250184, 23653251).
- Functional studies demonstrated that this variant causes impaired protein function (PMID: 22730558).
- This premature termination variant is predicted to cause nonsense-mediated decay (NMD) in a gene where loss-of-function is a known mechanism of disease.
- This variant has been reported in ClinVar [ID: 2298].



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, MCB.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information

Patient Name:

Test Information

Ordering Physician:



Clinic Information:

Date Of Birth:

Case File ID:

Report Date:

DISEASES SCREENED

Below is a list of all diseases screened and the result. Certain conditions have unique patient-specific numerical values, therefore, results for those conditions are formatted differently.

Autosomal Recessive

1
17-BETA HYDROXYSTEROID DEHYDROGENASE 3 DEFICIENCY (HSD17B3) negative

3
3-BETA-HYDROXYSTEROID DEHYDROGENASE TYPE II DEFICIENCY (HSD3B2) negative
3-HYDROXY-3-METHYLGLUTARYL-COENZYME A LYASE DEFICIENCY (HMGCL) negative
3-HYDROXYACYL-CoA DEHYDROGENASE DEFICIENCY (HADH) negative
3-METHYLCROTONYL-CoA CARBOXYLASE 1 DEFICIENCY (MCCC1) negative
3-METHYLCROTONYL-CoA CARBOXYLASE 2 DEFICIENCY (MCCC2) negative
3-PHOSPHOGLYCERATE DEHYDROGENASE DEFICIENCY (PHGDH) negative

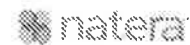
5
5-ALPHA-REDUCTASE DEFICIENCY (SRD5A2) negative

6
6-PYRUVYL-TETRAHYDROPTERIN SYNTHASE (PTPS) DEFICIENCY (PTFS) negative

A
ABCA4-RELATED CONDITIONS (ABCA4) negative
ABETALIPOPROTEINEMIA (MTPP) negative
ACHONDROGENESIS, TYPE 1B (SLC26A2) negative
ACHROMATOPSIA, CNGB3-RELATED (CNGB3) negative
ACRODERMATITIS ENTEROPATHICA (SLC39A4) negative
ACTION MYOCLONUS-RENAL FAILURE (AMRF) SYNDROME (SCARB2) negative
ACUTE INFANTILE LIVER FAILURE, TRMU-RELATED (TRMU) negative
ACYL-CoA OXIDASE I DEFICIENCY (ACOX1) negative
AICARDI-GOUTIERES SYNDROME (SAMHD1) negative
AICARDI-GOUTIERES SYNDROME, RNASEH2A-RELATED (RNASEH2A) negative
AICARDI-GOUTIERES SYNDROME, RNASEH2B-RELATED (RNASEH2B) negative
AICARDI-GOUTIERES SYNDROME, RNASEH2C-RELATED (RNASEH2C) negative
AICARDI-GOUTIERES SYNDROME, TREX1-RELATED (TREX1) negative
ALPHA-MANNOSIDOSIS (MAN2B1) negative
ALPHA-THALASSEMIA (HBA1/HBA2) negative
ALPORT SYNDROME, COL4A3-RELATED (COL4A3) negative
ALPORT SYNDROME, COL4A4-RELATED (COL4A4) negative
ALSTROM SYNDROME (ALMS1) negative
AMISH INFANTILE EPILEPSY SYNDROME (ST3GAL5) negative
ANDERMANN SYNDROME (SLC12A6) negative
ARGININE:GLYCINE AMIDINOTRANSFERASE DEFICIENCY (AGAT DEFICIENCY) (GATM) negative
ARGININEMIA (ARG1) negative
ARGININOSUCCINATE LYASE DEFICIENCY (ASL) negative
AROMATASE DEFICIENCY (CYP19A1) negative
ASPARAGINE SYNTHETASE DEFICIENCY (ASN5) negative
ASPARTYLGLYCOSAMINURIA (AGA) negative
ATAXIA WITH VITAMIN E DEFICIENCY (TTPA) negative
ATAXIA-TELANGIECTASIA (ATM) negative
ATAXIA-TELANGIECTASIA-LIKE DISORDER 1 (MRE11) negative
ATRANSFERRINEMIA (TF) negative
AUTISM SPECTRUM, EPILEPSY AND ARTHROGRYPOSIS (SLC35A3) negative
AUTOIMMUNE POLYGLANDULAR SYNDROME, TYPE 1 (AIRE) negative
AUTOSOMAL RECESSIVE CONGENITAL ICHTHYOSIS (ARCI), SLC27A4-RELATED (SLC27A4) negative
AUTOSOMAL, RECESSIVE SPASTIC ATAXIA OF CHARLEVOIX-SAGUENAY (SACS) negative

B
BARDET-BIEDL SYNDROME, ARL6-RELATED (ARL6) negative
BARDET-BIEDL SYNDROME, BBS10-RELATED (BBS10) negative
BARDET-BIEDL SYNDROME, BBS12-RELATED (BBS12) negative
BARDET-BIEDL SYNDROME, BBS1-RELATED (BBS1) negative
BARDET-BIEDL SYNDROME, BBS2-RELATED (BBS2) negative
BARDET-BIEDL SYNDROME, BBS4-RELATED (BBS4) negative
BARDET-BIEDL SYNDROME, BBS5-RELATED (BBS5) negative
BARDET-BIEDL SYNDROME, BBS7-RELATED (BBS7) negative
BARDET-BIEDL SYNDROME, BBS9-RELATED (BBS9) negative
BARDET-BIEDL SYNDROME, TTC8-RELATED (TTC8) negative
BARE LYMPHOCYTE SYNDROME, CITA-RELATED (CITA) negative
BARTTER SYNDROME, BSND-RELATED (BSND) negative
BARTTER SYNDROME, KCNJ1-RELATED (KCNJ1) negative
BARTTER SYNDROME, SLC12A1-RELATED (SLC12A1) negative
BATTEN DISEASE, CLN3-RELATED (CLN3) negative
BETA-HEMOGLOBINOPATHIES (HBB) negative
BETA-KETOTHIOLASE DEFICIENCY (ACAT1) negative
BETA-MANNOSIDOSIS (MANBA) negative
BETA-UREIDOPROPIONASE DEFICIENCY (UPB1) negative
BILATERAL FRONTAL-PARIETAL POLYMICROGYRIA (GPR56) negative
BIOTINIDASE DEFICIENCY (BTD) negative
BIOTIN-THIAMINE-RESPONSIVE BASAL GANGLIA DISEASE (BTBGD) (SLC19A3) negative
BLOOM SYNDROME (BLM) negative
BRITTLE CORNEA SYNDROME 1 (ZNF469) negative
BRITTLE CORNEA SYNDROME 2 (PRDM5) negative

C
CANAVAN DISEASE (ASPA) negative
CARBAMOYL PHOSPHATE SYNTHETASE I DEFICIENCY (CPS1) negative
CARNITINE DEFICIENCY (SLC22A5) negative
CARNITINE PALMITOYLTRANSFERASE IA DEFICIENCY (CPT1A) negative
CARNITINE PALMITOYLTRANSFERASE II DEFICIENCY (CPT2) negative
CARNITINE-ACYLCARNITINE TRANSLOCASE DEFICIENCY (SLC25A20) negative
CARPENTER SYNDROME (RAB23) negative
CARTILAGE-HAIR HYPOPLASIA (RMRP) negative
CATECHOLAMINERGIC POLYMORPHIC VENTRICULAR TACHYCARDIA (CASQ2) negative
CD59-MEDIATED HEMOLYTIC ANEMIA (CD59) negative
CEP152-RELATED MICROCEPHALY (CEP152) negative
CEREBRAL DYSGENESIS, NEUROPATHY, ICHTHYOSIS, AND PALMOPLANTAR KERATODERMA (CEDNIK) SYNDROME (SNAP29) negative
CEREBROTENDINOUS XANTHOMATOSIS (CYP27A1) negative
CHARCOT-MARIE-TOOTH DISEASE, RECESSIVE INTERMEDIATE C (PLEKHG5) negative
CHARCOT-MARIE-TOOTH-DISEASE, TYPE 4D (NDRG1) negative
CHEDIAK-HIGASHI SYNDROME (LYST) negative
CHOREOACANTHOCYTOSIS (VPS13A) negative
CHRONIC GRANULOMATOUS DISEASE, CYBA-RELATED (CYBA) negative
CHRONIC GRANULOMATOUS DISEASE, NCF2-RELATED (NCF2) negative
CILIOPATHIES, RPGRIP1L-RELATED (RPGRIP1L) negative
CITRIN DEFICIENCY (SLC25A13) negative
CITRULLINEMIA, TYPE 1 (AS51) negative
CLN10 DISEASE (CTSD) negative
COHEN SYNDROME (VPS13B) negative
COL11A2-RELATED CONDITIONS (COL11A2) negative
COMBINED MALONIC AND METHYLMALONIC ACIDURIA (ACSF3) negative



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mcb.A (No licence : 3111)

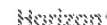
Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information

Patient Name:

Test Information

Ordering Physician:



Attestation de confidentialité

Clinic Information:

Date Of Birth:

Case File ID:

Report Date:

C
COMBINED OXIDATIVE PHOSPHORYLATION DEFICIENCY 1 (GFM1) negative
COMBINED OXIDATIVE PHOSPHORYLATION DEFICIENCY 3 (TSFM) negative
COMBINED PITUITARY HORMONE DEFICIENCY 1 (POU1F1) negative
COMBINED PITUITARY HORMONE DEFICIENCY-2 (PROP1) negative
CONGENITAL ADRENAL HYPERPLASIA, 11-BETA-HYDROXYLASE DEFICIENCY (CYP11B1) negative
CONGENITAL ADRENAL HYPERPLASIA, 17-ALPHA-HYDROXYLASE DEFICIENCY (CYP17A1) negative
CONGENITAL ADRENAL HYPERPLASIA, 21-HYDROXYLASE DEFICIENCY (CYP21A2) negative
CONGENITAL ADRENAL INSUFFICIENCY, CYP11A1-RELATED (CYP11A1) negative
CONGENITAL AMEGAKARYOCYTIC THROMBOCYTOPENIA (MPL) negative
CONGENITAL CHRONIC DIARRHEA (DGA71) negative
CONGENITAL DISORDER OF GLYCOSYLATION TYPE 1, ALG1-RELATED (ALG1) negative
CONGENITAL DISORDER OF GLYCOSYLATION, TYPE 1A, PMM2-Related (PMM2) negative
CONGENITAL DISORDER OF GLYCOSYLATION, TYPE 1B (MP1) negative
CONGENITAL DISORDER OF GLYCOSYLATION, TYPE 1C (ALG6) negative
CONGENITAL DYSERYTHROPOIETIC ANEMIA TYPE 2 (SEC23B) negative
CONGENITAL FINNISH NEPHROSIS (NPHS1) negative
CONGENITAL HYDROCEPHALUS 1 (CCDC88C) negative
CONGENITAL HYPERINSULINISM, KCNJ11-Related (KCNJ11) negative
CONGENITAL INSENSITIVITY TO PAIN WITH ANHIDROSIS (CIPA) (NTRK1) negative
CONGENITAL MYASTHENIC SYNDROME, CHAT-RELATED (CHAT) negative
CONGENITAL MYASTHENIC SYNDROME, CHRNE-RELATED (CHRNE) negative
CONGENITAL MYASTHENIC SYNDROME, COLQ-RELATED (COLQ) negative
CONGENITAL MYASTHENIC SYNDROME, DOK7-RELATED (DOK7) negative
CONGENITAL MYASTHENIC SYNDROME, RAPSN-RELATED (RAPSN) negative
CONGENITAL NEPHROTIC SYNDROME, PLCE1-RELATED (PLCE1) negative
CONGENITAL NEUTROPENIA, G6PC3-RELATED (G6PC3) negative
CONGENITAL NEUTROPENIA, HAX1-RELATED (HAX1) negative
CONGENITAL NEUTROPENIA, VPS45-RELATED (VPS45) negative
CONGENITAL SECRETORY CHLORIDE DIARRHEA 1 (SLC26A3) negative
CORNEAL DYSTROPHY AND PERCEPTIVE DEAFNESS (SLC4A11) negative
CORTICOSTERONE METHYLOXIDASE DEFICIENCY (CYP11B2) negative
COSTEFF SYNDROME (3-METHYLGLUTACONIC ACIDURIA, TYPE 3) (OPA3) negative
CRB1-RELATED RETINAL DYSTROPHIES (CRB1) negative
CYSTIC FIBROSIS (CFTR) negative
CYSTINOSIS (CTNS) negative
CYTOCHROME C OXIDASE DEFICIENCY, PET100-RELATED (PET100) negative
CYTOCHROME P450 OXIDOREDUCTASE DEFICIENCY (POR) negative

D
D-BIFUNCTIONAL PROTEIN DEFICIENCY (HSD17B4) negative
DEAFNESS, AUTOSOMAL RECESSIVE 77 (LOXHD1) negative
DIHYDROPTERIDINE REDUCTASE (DHPR) DEFICIENCY (QDPR) negative
DIHYDROPYRIMIDINE DEHYDROGENASE DEFICIENCY (DPYD) negative
DONNAI-BARROW SYNDROME (LRP2) negative
DUBIN-JOHNSON SYNDROME (ABCC2) negative
DYSKERATOSIS CONGENITA SPECTRUM DISORDERS (TERT) negative
DYSKERATOSIS CONGENITA, RTEL1-RELATED (RTEL1) negative
DYSTROPHIC EPIDERMOLYSIS BULLOSA, COL7A1-Related (COL7A1) negative

E
EARLY INFANTILE EPILEPTIC ENCEPHALOPATHY, CAD-RELATED (CAD) negative
EHLERS-DANLOS SYNDROME TYPE VI (PLOD1) negative
EHLERS-DANLOS SYNDROME, CLASSIC-LIKE, TNXB-RELATED (TNXB) negative
EHLERS-DANLOS SYNDROME, TYPE VII C (ADAMT52) negative
ELLIS-VAN CREVELD SYNDROME, EVC2-RELATED (EVC2) negative
ELLIS-VAN CREVELD SYNDROME, EVC-RELATED (EVC) negative
ENHANCED S-CONE SYNDROME (NR2E3) negative
EPIMERASE DEFICIENCY (GALACTOSEMIA TYPE IIB) (GALE) negative
EPIPHYSEAL DYSPLASIA, MULTIPLE, 7/DESBUQUOIS DYSPLASIA 1 (CANT1) negative
ERCC6-RELATED DISORDERS (ERCC6) negative
ERCC8-RELATED DISORDERS (ERCC8) negative
ETHYLMALONIC ENCEPHALOPATHY (ETHE1) negative

F
FAMILIAL DYSAUTONOMIA (IKBKAP) negative
FAMILIAL HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS, PRF1-RELATED (PRF1) negative
FAMILIAL HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS, STX11-RELATED (STX11) negative
FAMILIAL HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS, STXB2-RELATED (STXB2) negative
FAMILIAL HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS, UNC13D-RELATED (UNC13D) negative
FAMILIAL HYPERCHOLESTEROLEMIA, LDLRAP1-RELATED (LDLRAP1) negative
FAMILIAL HYPERCHOLESTEROLEMIA, LDLR-RELATED (LDLR) negative
FAMILIAL HYPERINSULINISM, ABCC8-RELATED (ABCC8) negative
FAMILIAL NEPHROGENIC DIABETES INSIPIDUS, AQP2-RELATED (AQP2) negative
FANCONI ANEMIA, GROUP A (FANCA) negative
FANCONI ANEMIA, GROUP C (FANCC) negative
FANCONI ANEMIA, GROUP D2 (FANCD2) negative
FANCONI ANEMIA, GROUP E (FANCE) negative
FANCONI ANEMIA, GROUP F (FANCF) negative
FANCONI ANEMIA, GROUP G (FANGC) negative
FANCONI ANEMIA, GROUP I (FANCI) negative
FANCONI ANEMIA, GROUP J (BRIP1) negative
FANCONI ANEMIA, GROUP L (FANCL) negative
FARBER LIPOGRANULOMATOSIS (ASAH1) negative
FOVEAL HYPOPLASIA (SLC38A8) negative
FRASER SYNDROME 3, GRIP1-RELATED (GRIP1) negative
FRASER SYNDROME, FRAS1-RELATED (FRAS1) negative
FRASER SYNDROME, FREM2-RELATED (FREM2) negative
FRIEDREICH ATAXIA (FXN) negative
FRUCTOSE-1,6-BISPHOSPHATASE DEFICIENCY (FBP1) negative
FUCOSIDOSIS, FUCA1-RELATED (FUCA1) negative
FUMARASE DEFICIENCY (FH) negative

G
GABA-TRANSAMINASE DEFICIENCY (ABAT) negative
GALACTOKINASE DEFICIENCY (GALACTOSEMIA, TYPE II) (GALK1) negative
GALACTOSEMIA (GALT) negative
GALACTOSIALIDOSIS (CTSA) negative
GAUCHER DISEASE (GBA) negative
GCH1-RELATED CONDITIONS (GCH1) negative
GDF5-RELATED CONDITIONS (GDF5) negative
GERODERMA OSTEODYSPLASTICA (GORAB) negative
GITELMAN SYNDROME (SLC12A3) negative
GLANZMANN THROMBASTHENIA (ITGB3) negative
GLUTARIC ACIDEMIA, TYPE 1 (GCDH) negative
GLUTARIC ACIDEMIA, TYPE 2A (ETFA) negative
GLUTARIC ACIDEMIA, TYPE 2B (ETFB) negative
GLUTARIC ACIDEMIA, TYPE 2C (ETFDH) negative
GLUTATHIONE SYNTHETASE DEFICIENCY (GSS) negative
GLYCINE ENCEPHALOPATHY, AMT-RELATED (AMT) negative
GLYCINE ENCEPHALOPATHY, GLDC-RELATED (GLDC) negative
GLYCOGEN STORAGE DISEASE TYPE 5 (McArdle Disease) (PYGM) see first page
GLYCOGEN STORAGE DISEASE TYPE IXB (PHKB) negative
GLYCOGEN STORAGE DISEASE TYPE IXC (PHKG2) negative
GLYCOGEN STORAGE DISEASE, TYPE 1a (G6PC) negative
GLYCOGEN STORAGE DISEASE, TYPE 1b (SLC37A4) negative
GLYCOGEN STORAGE DISEASE, TYPE 2 (POMPE DISEASE)(GAA) negative
GLYCOGEN STORAGE DISEASE, TYPE 3 (AGL) negative
GLYCOGEN STORAGE DISEASE, TYPE 4 (GBE1) negative
GLYCOGEN STORAGE DISEASE, TYPE 7 (PFKM) negative
GRACILE SYNDROME (BCS1L) negative
GUANIDINOACETATE METHYLTRANSFERASE DEFICIENCY (GAMT) negative

H
HARLEQUIN ICHTHYOSIS (ABCA12) negative
HEME OXYGENASE 1 DEFICIENCY (HMOX1) negative
HEMOCHROMATOSIS TYPE 2A (HFE2) negative
HEMOCHROMATOSIS, TYPE 3, TFR2-Related (TFR2) negative
HEPATOCEREBRAL MITOCHONDRIAL DNA DEPLETION SYNDROME, MPV17-RELATED (MPV17) negative

255 Industrial Road, Suite 401 | San Carlos, CA 95050 | www.natera.com | 855-244-9090 | Fax 1-850-779-2272

Page 5/15



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

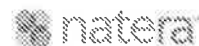
Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mcb.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician:



Clinic Information:

Date Of Birth:

Case File ID:

Report Date:

H
HEREDITARY FRUCTOSE INTOLERANCE (ALDOB) negative
HEREDITARY HEMOCHROMATOSIS TYPE 28 (HAMP) negative
HEREDITARY SPASTIC PARAPARESIS, TYPE 49 (TECP2) negative
HEREDITARY SPASTIC PARAPLEGIA, CYP7B1-RELATED (CYP7B1) negative
HERMANSKY-PUDLAK SYNDROME, AP3B1-RELATED (AP3B1) negative
HERMANSKY-PUDLAK SYNDROME, BLOC1S3-RELATED (BLOC1S3) negative
HERMANSKY-PUDLAK SYNDROME, BLOC1S6-RELATED (BLOC1S6) negative
HERMANSKY-PUDLAK SYNDROME, HPS1-RELATED (HPS1) negative
HERMANSKY-PUDLAK SYNDROME, HPS3-RELATED (HPS3) negative
HERMANSKY-PUDLAK SYNDROME, HPS4-RELATED (HPS4) negative
HERMANSKY-PUDLAK SYNDROME, HPS5-RELATED (HPS5) negative
HERMANSKY-PUDLAK SYNDROME, HPS6-RELATED (HPS6) negative
HOLOCARBOXYLASE SYNTHETASE DEFICIENCY (HLC5) negative
HOMOCYSTINURIA AND MEGALOBLASTIC ANEMIA TYPE CBLG (MTR) negative
HOMOCYSTINURIA DUE TO DEFICIENCY OF MTHFR (MTHFR) negative
HOMOCYSTINURIA, CBS-RELATED (CBS) negative
HOMOCYSTINURIA, Type cblE (MTRR) negative
HYDROLETHALUS SYNDROME (HYLS1) negative
HYPER-IGM IMMUNODEFICIENCY (CD40) negative
HYPERORNITHINEMIA-HYPERAMMONEMIA-HOMOCITRULLINURIA (HHH SYNDROME) (SLC25A15) negative
HYPERPHOSPHATEMIC FAMILIAL TUMORAL CALCINOSIS, GALNT3-RELATED (GALNT3) negative
HYPOMYELINATING LEUKODYSTROPHY 12 (VPS11) negative
HYPOPHOSPHATASIA, ALPL-RELATED (ALPL) negative

I
IMERSLUND-GRASBECK SYNDROME 2 (AMN) negative
IMMUNODEFICIENCY-CENTROMERIC INSTABILITY-FACIAL ANOMALIES (ICF) SYNDROME, DNMT3B-RELATED (DNMT3B) negative
IMMUNODEFICIENCY-CENTROMERIC INSTABILITY-FACIAL ANOMALIES (ICF) SYNDROME, ZBTB24-RELATED (ZBTB24) negative
INCLUSION BODY MYOPATHY 2 (GNE) negative
INFANTILE CEREBRAL AND CEREBELLAR ATROPHY (MED17) negative
INFANTILE NEPHRONOPHTHISIS (INVS) negative
INFANTILE NEUROAXONAL DYSTROPHY (PLA2G6) negative
ISOLATED ECTOPIA LENTIS (ADAMTSL4) negative
ISOLATED SULFITE OXIDASE DEFICIENCY (SUOX) negative
ISOLATED THYROID-STIMULATING HORMONE DEFICIENCY (TSHB) negative
ISOVALERIC ACIDEMIA (IVD) negative

J
JOHANSON-BUZZARD SYNDROME (UBR1) negative
JOUBERT SYNDROME 2 / MECKEL SYNDROME 2 (TMEM216) negative
JOUBERT SYNDROME AND RELATED DISORDERS (JRSR), TMEM67-RELATED (TMEM67) negative
JOUBERT SYNDROME, AHI1-RELATED (AHI1) negative
JOUBERT SYNDROME, ARL13B-RELATED (ARL13B) negative
JOUBERT SYNDROME, B9D1-RELATED (B9D1) negative
JOUBERT SYNDROME, B9D2-RELATED (B9D2) negative
JOUBERT SYNDROME, C2CD3-RELATED/OROFACIODIGITAL SYNDROME 14 (C2CD3) negative
JOUBERT SYNDROME, CC2D2A-RELATED/COACH SYNDROME (CC2D2A) negative
JOUBERT SYNDROME, CEP104-RELATED (CEP104) negative
JOUBERT SYNDROME, CEP120-RELATED/SHORT-RIB THORACIC DYSPLASIA 13 WITH OR WITHOUT POLYDACTYLY (CEP120) negative
JOUBERT SYNDROME, CEP41-RELATED (CEP41) negative
JOUBERT SYNDROME, CPLANE1-RELATED / OROFACIODIGITAL SYNDROME 6 (CPLANE1) negative
JOUBERT SYNDROME, CSPP1-RELATED (CSPP1) negative
JOUBERT SYNDROME, INPP5E-RELATED (INPP5E) negative
JUNCTIONAL EPIDERMOLYSIS BULLOSA, COL17A1-RELATED (COL17A1) negative
JUNCTIONAL EPIDERMOLYSIS BULLOSA, ITGA6-RELATED (ITGA6) negative
JUNCTIONAL EPIDERMOLYSIS BULLOSA, ITGB4-RELATED (ITGB4) negative
JUNCTIONAL EPIDERMOLYSIS BULLOSA, LAMB3-RELATED (LAMB3) negative
JUNCTIONAL EPIDERMOLYSIS BULLOSA, LAMC2-RELATED (LAMC2) negative
JUNCTIONAL EPIDERMOLYSIS BULLOSA/LARYNGOONYCHOCUTANEOUS SYNDROME, LAMA3-RELATED (LAMA3) negative

K
KRABBE DISEASE (GALC) negative

L
LAMELLAR ICHTHYOSIS, TYPE 1 (TGM1) negative
LARON SYNDROME (GHR) negative
LEBER CONGENITAL AMAUROSIS 2 (RPE65) negative
LEBER CONGENITAL AMAUROSIS TYPE AIPL1 (AIPL1) negative
LEBER CONGENITAL AMAUROSIS TYPE GUCY2D (GUCY2D) negative
LEBER CONGENITAL AMAUROSIS TYPE TULP1 (TULP1) negative
LEBER CONGENITAL AMAUROSIS, IQCB1-RELATED/SENIOR-LOKEN SYNDROME 5 (IQCB1) negative
LEBER CONGENITAL AMAUROSIS, TYPE CEP290 (CEP290) negative
LEBER CONGENITAL AMAUROSIS, TYPE LCA5 (LCA5) negative
LEBER CONGENITAL AMAUROSIS, TYPE RDH12 (RDH12) negative
LEIGH SYNDROME, FRENCH-CANADIAN TYPE (LRPPRC) negative
LETHAL CONGENITAL CONTRACTURE SYNDROME 1 (GLE1) negative
LEUKOENCEPHALOPATHY WITH VANISHING WHITE MATTER (EIF2B5) negative
LEUKOENCEPHALOPATHY WITH VANISHING WHITE MATTER, EIF2B1-RELATED (EIF2B1) negative
LEUKOENCEPHALOPATHY WITH VANISHING WHITE MATTER, EIF2B2-RELATED (EIF2B2) negative
LEUKOENCEPHALOPATHY WITH VANISHING WHITE MATTER, EIF2B3-RELATED (EIF2B3) negative
LEUKOENCEPHALOPATHY WITH VANISHING WHITE MATTER, EIF2B4-RELATED (EIF2B4) negative
LIG4 SYNDROME (LIG4) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY TYPE 8 (TRIM32) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2A (CAPN3) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2B (DYSF) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2C (SGCG) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2D (SGCA) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2E (SGCB) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2F (SGCD) negative
LIMB-GIRDLE MUSCULAR DYSTROPHY, TYPE 2I (FKRP) negative
LIPOAMIDE DEHYDROGENASE DEFICIENCY (DIHYDROLIPOAMIDE DEHYDROGENASE DEFICIENCY) (DLD) negative
LIPOID ADRENAL HYPERPLASIA (STAR) negative
LIPOPROTEIN LIPASE DEFICIENCY (LPL) negative
LONG CHAIN 3-HYDROXYACYL-CoA DEHYDROGENASE DEFICIENCY (HADHA) negative
LRAT-RELATED CONDITIONS (LRAT) negative
LUNG DISEASE, IMMUNODEFICIENCY, AND CHROMOSOME BREAKAGE SYNDROME (LICS) (N5MCE3) negative
LYSINURIC PROTEIN INTOLERANCE (SLC7A7) negative

M
MALONYL-CoA DECARBOXYLASE DEFICIENCY (MLYCD) negative
MAPLE SYRUP URINE DISEASE, TYPE 1A (BCKDHA) negative
MAPLE SYRUP URINE DISEASE, TYPE 1B (BCKDHB) negative
MAPLE SYRUP URINE DISEASE, TYPE 2 (DBT) negative
MCKUSICK-KAUFMAN SYNDROME (MKKS) negative
MECKEL SYNDROME 7/NEPHRONOPHTHISIS 3 (NPHP3) negative
MECKEL-GRUBER SYNDROME, TYPE 1 (MKSI) negative
MECR-RELATED NEUROLOGIC DISORDER (MECR) negative
MEDIUM CHAIN ACYL-CoA DEHYDROGENASE DEFICIENCY (ACADM) negative
MEDNIK SYNDROME (AP1S1) negative
MEGALENCOPHALIC LEUKOENCEPHALOPATHY WITH SUBCORTICAL CYSTS (MLC1) negative
MEROSIN-DEFICIENT MUSCULAR DYSTROPHY (LAMA2) negative
METABOLIC ENCEPHALOPATHY AND ARRHYTHMIAS, TANGO2-RELATED (TANGO2) negative
METACHROMATIC LEUKODYSTROPHY, ARSA-RELATED (ARSA) negative
METACHROMATIC LEUKODYSTROPHY, PSAP-RELATED (PSAP) negative
METHYLMALONIC ACIDEMIA AND HOMOCYSTINURIA TYPE CBLF (LMBRD1) negative
METHYLMALONIC ACIDEMIA, MCEE-RELATED (MCEE) negative
METHYLMALONIC ACIDURIA AND HOMOCYSTINURIA, TYPE CBLC (MMACHC) negative
METHYLMALONIC ACIDURIA AND HOMOCYSTINURIA, TYPE CblD (MMADHC) negative



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

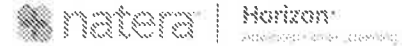
Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mch.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician:



Clinic Information:

Date Of Birth:
Case File ID:

Report Date:

M
METHYLMALONIC ACIDURIA, MMAA-RELATED (MMAA) negative
METHYLMALONIC ACIDURIA, MMAA-RELATED (MMAA) negative
METHYLMALONIC ACIDURIA, TYPE MUT (O) (MUT) negative
MEVALONIC KINASE DEFICIENCY (MKV) negative
MICROCEPHALIC OSTEOPLASTIC PRIMORDIAL DWARFISM TYPE II (PCNT) negative
MICROPHthalmia / ANOPHTHALMIA, VSX2-RELATED (VSX2) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, ACAD9-RELATED (ACAD9) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NDUFA5-RELATED (NDUFA5) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NDUFA5-RELATED (NDUFA5) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NUCLEAR TYPE 10 (NDUFA2) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NUCLEAR TYPE 17 (NDUFA6) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NUCLEAR TYPE 19 (FOXRED1) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NUCLEAR TYPE 3 (NDUF57) negative
MITOCHONDRIAL COMPLEX I DEFICIENCY, NUCLEAR TYPE 4 (NDUFV1) negative
MITOCHONDRIAL COMPLEX IV DEFICIENCY, NUCLEAR TYPE 2, SCO2-RELATED (SCO2) negative
MITOCHONDRIAL COMPLEX IV DEFICIENCY, NUCLEAR TYPE 6 (COX15) negative
MITOCHONDRIAL DNA DEPLETION SYNDROME 2 (FK2) negative
MITOCHONDRIAL DNA DEPLETION SYNDROME 3 (DGUOK) negative
MITOCHONDRIAL MYOPATHY AND SIDEROBLASTIC ANEMIA (MLASA1) (PUS1) negative
MITOCHONDRIAL TRIFUNCTIONAL PROTEIN DEFICIENCY, HADHB-RELATED (HADHB) negative
MOLYBDENUM COFACTOR DEFICIENCY TYPE B (MOC52) negative
MOLYBDENUM COFACTOR DEFICIENCY, TYPE A (MOC51) negative
MUCOLIPIDOSIS II/III A (GNPTAB) negative
MUCOLIPIDOSIS III GAMMA (GNPTG) negative
MUCOLIPIDOSIS, TYPE IV (MCOLN1) negative
MUCOPOLYSACCHARIDOSIS, TYPE I (HURLER SYNDROME) (IDUA) negative
MUCOPOLYSACCHARIDOSIS, TYPE III A (SANFILIPPO A) (SGSH) negative
MUCOPOLYSACCHARIDOSIS, TYPE III B (SANFILIPPO B) (NAGLU) negative
MUCOPOLYSACCHARIDOSIS, TYPE III C (SANFILIPPO C) (HGSNAT) negative
MUCOPOLYSACCHARIDOSIS, TYPE III D (SANFILIPPO D) (GNS) negative
MUCOPOLYSACCHARIDOSIS, TYPE IV A (MORQUIO SYNDROME) (GALNS) negative
MUCOPOLYSACCHARIDOSIS, TYPE IV B/GM1 GANGLIOSIDOSIS (GLB1) negative
MUCOPOLYSACCHARIDOSIS, TYPE IX (HYAL1) negative
MUCOPOLYSACCHARIDOSIS, TYPE VI (MAROTEAUX-LAMY) (ARSB) negative
MUCOPOLYSACCHARIDOSIS, TYPE VII (GUSB) negative
MULIBREY NANISM (TRIM37) negative
MULTIPLE PTERYGIUM SYNDROME, CHRNG-RELATED/ESCOBAR SYNDROME (CHRNG) negative
MULTIPLE SULFATASE DEFICIENCY (SUMF1) negative
MUSCLE-EYE-BRAIN DISEASE, POMGNT1-RELATED (POMGNT1) negative
MUSCULAR DYSTROPHY-DYSTROGLYCANOPATHY (RXYLT1) negative
MUSK-RELATED CONGENITAL MYASTHENIC SYNDROME (MUSK) negative
MYONEUROGASTROINTESTINAL ENCEPHALOPATHY (MNGIE) (TYMP) negative
MYOTONIA CONGENITA (CLCN1) negative

N
N-ACETYLGLUTAMATE SYNTHASE DEFICIENCY (NAGS) negative
NEMALINE MYOPATHY, NEB-RELATED (NEB) negative
NEPHRONOPHTHISIS 1 (NPH1) negative
NEURONAL CEROID LIPOFUSCINOSIS, CLN5-RELATED (CLN5) negative
NEURONAL CEROID LIPOFUSCINOSIS, CLN6-RELATED (CLN6) negative
NEURONAL CEROID LIPOFUSCINOSIS, CLN8-RELATED (CLN8) negative
NEURONAL CEROID LIPOFUSCINOSIS, MFSDB-RELATED (MFSDB) negative
NEURONAL CEROID LIPOFUSCINOSIS, PPT1-RELATED (PPT1) negative
NEURONAL CEROID LIPOFUSCINOSIS, TPP1-RELATED (TPP1) negative
NGLY1-CONGENITAL DISORDER OF GLYCOSYLATION (NGLY1) negative
NIEMANN-PICK DISEASE, TYPE C1 / D (NPC1) negative
NIEMANN-PICK DISEASE, TYPE C2 (NPC2) negative
NIEMANN-PICK DISEASE, TYPES A / B (SMPPD1) negative
NIJMEGEN BREAKAGE SYNDROME (NBN) negative
NON-SYNDROMIC HEARING LOSS, GJB2-RELATED (GJB2) negative
NON-SYNDROMIC HEARING LOSS, MYO15A-RELATED (MYO15A) negative
NONSYNDROMIC HEARING LOSS, OTOA-RELATED (OTOA) negative

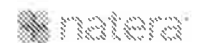
NONSYNDROMIC HEARING LOSS, OTOF-RELATED (OTOF) negative
NONSYNDROMIC HEARING LOSS, PJKV-RELATED (PJKV) negative
NONSYNDROMIC HEARING LOSS, SYNE4-RELATED (SYNE4) negative
NONSYNDROMIC HEARING LOSS, TMCI1-RELATED (TMCI1) negative
NONSYNDROMIC HEARING LOSS, TMPS53-RELATED (TMPS53) negative
NONSYNDROMIC INTELLECTUAL DISABILITY (CC2D1A) negative
NORMOPHOSPHATEMIC TUMORAL CALCINOSIS (SAMD9) negative

O
OCULOCUTANEOUS ALBINISM TYPE III (TYRP1) negative
OCULOCUTANEOUS ALBINISM TYPE IV (SLC45A2) negative
OCULOCUTANEOUS ALBINISM, OCA2-RELATED (OCA2) negative
OCULOCUTANEOUS ALBINISM, TYPES 1A AND 1B (TYR) negative
ODONTO-ONYCHO-DERMAL DYSPLASIA / SCHOPF-SCHULZ-PASSARGE SYNDROME (WNT10A) negative
OMENN SYNDROME, RAG2-RELATED (RAG2) negative
ORNITHINE AMINOTRANSFERASE DEFICIENCY (OAT) negative
OSTEOGENESIS IMPERFECTA TYPE VII (CRTAP) negative
OSTEOGENESIS IMPERFECTA TYPE VIII (P3H1) negative
OSTEOGENESIS IMPERFECTA TYPE XI (FKBP10) negative
OSTEOGENESIS IMPERFECTA TYPE XIII (BMP1) negative
OSTEOPETROSIS, INFANTILE MALIGNANT, TCIRG1-RELATED (TCIRG1) negative
OSTEOPETROSIS, OSTM1-RELATED (OSTM1) negative

P
PANTOTHENATE KINASE-ASSOCIATED NEURODEGENERATION (PANK2) negative
PAPILLON LEFEVRE SYNDROME (CTSC) negative
PARKINSON DISEASE 15 (FBXO7) negative
PENDRED SYNDROME (SLC26A4) negative
PERLMAN SYNDROME (DIS3L2) negative
PGM3-CONGENITAL DISORDER OF GLYCOSYLATION (PGM3) negative
PHENYLKETONURIA (PAH) negative
PIGN-CONGENITAL DISORDER OF GLYCOSYLATION (PIGN) negative
PITUITARY HORMONE DEFICIENCY, COMBINED 3 (LHX3) negative
POLG-RELATED DISORDERS (POLG) negative
POLYCYSTIC KIDNEY DISEASE, AUTOSOMAL RECESSIVE (PKHD1) negative
PONTocerebellar hypoplasia, EXOSC3-RELATED (EXOSC3) negative
PONTocerebellar hypoplasia, RARS2-RELATED (RARS2) negative
PONTocerebellar hypoplasia, TSEN2-RELATED (TSEN2) negative
PONTocerebellar hypoplasia, TSEN54-RELATED (TSEN54) negative
PONTocerebellar hypoplasia, TYPE 1A (VRK1) negative
PONTocerebellar hypoplasia, TYPE 2D (SEP5C) negative
PONTocerebellar hypoplasia, VPS53-RELATED (VPS53) negative
PRIMARY CILIARY DYSKINESIA, CCDC103-RELATED (CCDC103) negative
PRIMARY CILIARY DYSKINESIA, CCDC39-RELATED (CCDC39) negative
PRIMARY CILIARY DYSKINESIA, DNAH11-RELATED (DNAH11) negative
PRIMARY CILIARY DYSKINESIA, DNAH5-RELATED (DNAH5) negative
PRIMARY CILIARY DYSKINESIA, DNAI1-RELATED (DNAI1) negative
PRIMARY CILIARY DYSKINESIA, DNAI2-RELATED (DNAI2) negative
PRIMARY CONGENITAL GLAUCOMA/PETERS ANOMALY (CYP1B1) negative
PRIMARY HYPEROXALURIA, TYPE 1 (AGXT) negative
PRIMARY HYPEROXALURIA, TYPE 2 (GRHPR) negative
PRIMARY HYPEROXALURIA, TYPE 3 (HOGA1) negative
PRIMARY MICROCEPHALY 1, AUTOSOMAL RECESSIVE (MCPH1) negative
PROGRESSIVE EARLY-ONSET ENCEPHALOPATHY WITH BRAIN ATROPHY AND THIN CORPUS CALLOSUM (TBCD) negative
PROGRESSIVE FAMILIAL INTRAHEPATIC CHOLESTASIS, ABCB4-RELATED (ABCB4) negative
PROGRESSIVE FAMILIAL INTRAHEPATIC CHOLESTASIS, TYPE 1 (PFIC1) (ATP8B1) negative
PROGRESSIVE FAMILIAL INTRAHEPATIC CHOLESTASIS, TYPE 2 (ABCB11) negative
PROGRESSIVE FAMILIAL INTRAHEPATIC CHOLESTASIS, TYPE 4 (PFIC4) (TJP2) negative
PROGRESSIVE PSEUDORHEUMATOID DYSPLASIA (CCN6) negative
PROLIDASE DEFICIENCY (PEPD) negative
PROPIONIC ACIDEMIA, PCCA-RELATED (PCCA) negative
PROPIONIC ACIDEMIA, PCCB-RELATED (PCCB) negative
PSEUDODOLCHOLINSTERASE DEFICIENCY (BCHE) negative

201 Industrial Road Suite 410 | San Carlos, CA 94070 | www.natera.com | 650.249.9090 | Fax | 650.770.3272

Page 7/21



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, MCB.A (No licence : 3111)

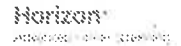
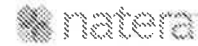
Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information

Patient Name:

Test Information

Ordering Physician:



Clinic Information:

Date Of Birth:

Case File ID:

Report Date:

P
PSEUDOXANTHOMA ELASTICUM (ABCC6) **negative**
PTERIN-4 ALPHA-CARBINOLAMINE DEHYDRATASE (PCD) DEFICIENCY (PCBD1) **negative**
PYCNODYSOSTOSIS (CTSK) **negative**
PYRIDOXAL 5'-PHOSPHATE-DEPENDENT EPILEPSY (PNPO) **negative**
PYRIDOXINE-DEPENDENT EPILEPSY (ALDH7A1) **negative**
PYRUVATE CARBOXYLASE DEFICIENCY (PC) **negative**
PYRUVATE DEHYDROGENASE DEFICIENCY, PDHB-RELATED (PDHB) **negative**

R
REFSUM DISEASE, PHYH-RELATED (PHYH) **negative**
RENAL TUBULAR ACIDOSIS AND DEAFNESS, ATP6V1B1-RELATED (ATP6V1B1) **negative**
RENAL TUBULAR ACIDOSIS, PROXIMAL, WITH OCULAR ABNORMALITIES AND MENTAL RETARDATION (SLC4A4) **negative**
RETINITIS PIGMENTOSA 25 (EYS) **negative**
RETINITIS PIGMENTOSA 26 (CERKL) **negative**
RETINITIS PIGMENTOSA 28 (FAM161A) **negative**
RETINITIS PIGMENTOSA 36 (PRCD) **negative**
RETINITIS PIGMENTOSA 59 (DHDSD) **negative**
RETINITIS PIGMENTOSA 62 (MAK) **negative**
RHIZOMELIC CHONDRODYSPLASIA PUNCTATA, TYPE 1 (PEX7) **negative**
RHIZOMELIC CHONDRODYSPLASIA PUNCTATA, TYPE 2 (GNPAT) **negative**
RHIZOMELIC CHONDRODYSPLASIA PUNCTATA, TYPE 3 (AGPS) **negative**
RLBP1-RELATED RETINOPATHY (RLBP1) **negative**
ROBERTS SYNDROME (ESCO2) **negative**
RYR1-RELATED CONDITIONS (RYR1) **negative**

S
SALLA DISEASE (SLC17A5) **negative**
SANDHOFF DISEASE (HEXB) **negative**
SCHIMKE IMMUNOSKELETOUS DYSPLASIA (SMARCA1) **negative**
SCHINDLER DISEASE (NAGA) **negative**
SEGAWA SYNDROME, TH-RELATED (TH) **negative**
SENIOR-LOKEN SYNDROME 4/NEPHRONOPHTHISIS 4 (NPHP4) **negative**
SEPIAPTERIN REDUCTASE DEFICIENCY (SPR) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), CD3D-RELATED (CD3D) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), CD3E-RELATED (CD3E) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), FOXP1-RELATED (FOXP1) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), IKBKB-RELATED (IKBKB) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), IL7R-RELATED (IL7R) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), JAK3-RELATED (JAK3) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), PTPRC-RELATED (PTPRC) **negative**
SEVERE COMBINED IMMUNODEFICIENCY (SCID), RAG1-RELATED (RAG1) **negative**
SEVERE COMBINED IMMUNODEFICIENCY, ADA-Related (ADA) **negative**
SEVERE COMBINED IMMUNODEFICIENCY, TYPE ATHABASKAN (DCLRE1C) **negative**
SHORT-RIB THORACIC DYSPLASIA 3 WITH OR WITHOUT POLYDACTYLY (DYNC2H1) **negative**
SHWACHMAN-DIAMOND SYNDROME, SBD5-RELATED (SBD5) **negative**
SIALIDOSIS (NEU1) **negative**
SJOGREN-LARSSON SYNDROME (ALDH3A2) **negative**
SMITH-LEMLY-OPITZ SYNDROME (DHCRT) **negative**
SPASTIC PARAPLEGIA, TYPE 15 (ZFYVE26) **negative**
SPASTIC TETRAPLEGIA, THIN CORPUS CALLOSUM, AND PROGRESSIVE MICROCEPHALY (SPATCCM) (SLC1A4) **negative**
SPG11-RELATED CONDITIONS (SPG11) **negative**
SPINAL MUSCULAR ATROPHY (SMN1) **negative** SMN1: >= 3 copies; g.27134T>G; present; the g.27134T>G variant does not modify carrier risk in individuals who carry 3 or more copies of SMN1.
SPINAL MUSCULAR ATROPHY WITH RESPIRATORY DISTRESS TYPE 1 (IGHMBP2) **negative**
SPINOCEREBELLAR ATAXIA, AUTOSOMAL RECESSIVE 10 (ANO10) **negative**
SPINOCEREBELLAR ATAXIA, AUTOSOMAL RECESSIVE 12 (WWOX) **negative**
SPONDYLOCTOSTAL DYSOSTOSIS 1 (DLL3) **negative**
SPONDYLOTHORACIC DYSOSTOSIS, MESP2-Related (MESP2) **negative**
STEEL SYNDROME (COL27A1) **negative**
STEROID-RESISTANT NEPHROTIC SYNDROME (NPHS2) **negative**
STUVE-WIEDEMANN SYNDROME (UFR) **negative**

SURF1-RELATED CONDITIONS (SURF1) **negative**
SURFACTANT DYSFUNCTION, ABCA3-RELATED (ABCA3) **negative**

T
TAY-SACHS DISEASE (HEXA) **negative**
TBCE-RELATED CONDITIONS (TBCE) **negative**
THIAMINE-RESPONSIVE MEGALOBlastic ANEMIA SYNDROME (SLC19A2) **negative**
THYROID DYSHORMONOGENESIS 1 (SLC5A5) **negative**
THYROID DYSHORMONOGENESIS 2A (TPO) **negative**
THYROID DYSHORMONOGENESIS 3 (TG) **negative**
THYROID DYSHORMONOGENESIS 6 (DUOX2) **negative**
TRANSCOBALAMIN II DEFICIENCY (TCN2) **negative**
TRICHOHEPATOENTERIC SYNDROME, SKIC2-RELATED (SKIC2) **negative**
TRICHOHEPATOENTERIC SYNDROME, TTC37-RELATED (TTC37) **negative**
TRICHOHYDROSTROPHY 1/XERODERMA PIGMENTOSUM, GROUP D (ERCC2) **negative**
TRIMETHYLAMINURIA (FMO3) **negative**
TRIPLE A SYNDROME (AAAS) **negative**
TSHR-RELATED CONDITIONS (TSHR) **negative**
TYROSINEMIA TYPE III (HPO) **negative**
TYROSINEMIA, TYPE 1 (FAH) **negative**
TYROSINEMIA, TYPE 2 (FAH) **negative**

U
USHER SYNDROME, TYPE 1B (MYO7A) **negative**
USHER SYNDROME, TYPE 1C (USH1C) **negative**
USHER SYNDROME, TYPE 1D (CDH23) **negative**
USHER SYNDROME, TYPE 1F (PCDH15) **negative**
USHER SYNDROME, TYPE 1J/DEAFNESS, AUTOSOMAL RECESSIVE, 48 (CIB2) **negative**
USHER SYNDROME, TYPE 2A (USH2A) **negative**
USHER SYNDROME, TYPE 2C (ADGRV1) **negative**
USHER SYNDROME, TYPE 3 (CLRN1) **negative**

V
VERY LONG-CHAIN ACYL-CoA DEHYDROGENASE DEFICIENCY (ACADVL) **negative**
VICI SYNDROME (EPG5) **negative**
VITAMIN D-DEPENDENT RICKETS, TYPE 1A (CYP27B1) **negative**
VITAMIN D-RESISTANT RICKETS TYPE 2A (VDR) **negative**
VLDLR-ASSOCIATED CEREBELLAR HYPOPLASIA (VLDLR) **negative**

W
WALKER-WARBURG SYNDROME, CRPPA-RELATED (CRPPA) **negative**
WALKER-WARBURG SYNDROME, FKTN-RELATED (FKTN) **negative**
WALKER-WARBURG SYNDROME, LARGE1-RELATED (LARGE1) **negative**
WALKER-WARBURG SYNDROME, POMT1-RELATED (POMT1) **negative**
WALKER-WARBURG SYNDROME, POMT2-RELATED (POMT2) **negative**
WARSAW BREAKAGE SYNDROME (DDX11) **negative**
WERNER SYNDROME (WRN) **negative**
WILSON DISEASE (ATP7B) **negative**
WOLCOTT-RALLISON SYNDROME (EIF2AK3) **negative**
WOLMAN DISEASE (LIPA) **negative**
WOODHOUSE-SAKATI SYNDROME (DCAF17) **negative**

X
XERODERMA PIGMENTOSUM VARIANT TYPE (POLH) **negative**
XERODERMA PIGMENTOSUM, GROUP A (XPA) **negative**
XERODERMA PIGMENTOSUM, GROUP C (XPC) **negative**

Z
ZELLWEGER SPECTRUM DISORDER, PEX13-RELATED (PEX13) **negative**
ZELLWEGER SPECTRUM DISORDER, PEX16-RELATED (PEX16) **negative**
ZELLWEGER SPECTRUM DISORDER, PEX5-RELATED (PEX5) **negative**
ZELLWEGER SPECTRUM DISORDERS, PEX10-RELATED (PEX10) **negative**
ZELLWEGER SPECTRUM DISORDERS, PEX12-RELATED (PEX12) **negative**
ZELLWEGER SPECTRUM DISORDERS, PEX1-RELATED (PEX1) **negative**
ZELLWEGER SPECTRUM DISORDERS, PEX26-RELATED (PEX26) **negative**

351 Midway Road, Suite 400 | San Carlos, CA 95050 | www.natera.com | 855-244-4040 | Fax 1-855-779-2272

Page 9/11



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mch.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician:



Date Of Birth:
Case File ID:

Clinic Information:

Report Date:

Z
ZELLWEGER SPECTRUM DISORDERS, PEX2-RELATED (PEX2) negative
ZELLWEGER SPECTRUM DISORDERS, PEX6-RELATED (PEX6) negative

201 Industrial Road, Suite 410 | San Carlos, CA 94070 | www.natera.com | 650-249-9090 | Fax 1-650-790-2272

Page 6/15



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

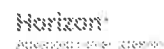
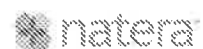
Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mcb.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician:



Date Of Birth:
Case File ID:

Clinic Information:

Report Date:

Testing Methodology, Limitations, and Comments:

Next-generation sequencing (NGS)

Sequencing library prepared from genomic DNA isolated from a patient sample is enriched for targets of interest using standard hybridization capture protocols and PCR amplification (for targets specified below). NGS is then performed to achieve the standards of quality control metrics, including a minimum coverage of 99% of targeted regions at 20X sequencing depth. Sequencing data is aligned to human reference sequence, followed by deduplication, metric collection and variant calling (coding region +/- 20bp). Variants are then classified according to ACMGG/AMP standards of interpretation using publicly available databases including but not limited to ENSEMBL, HGMD Pro, ClinGen, ClinVar, 1000G, ESP and gnomAD. Variants predicted to be pathogenic or likely pathogenic for the specified diseases are reported. It should be noted that the data interpretation is based on our current understanding of the genes and variants at the time of reporting. Putative positive sequencing variants that do not meet internal quality standards or are within highly homologous regions are confirmed by Sanger sequencing or gene-specific long-range PCR as needed prior to reporting.

Copy Number Variant (CNV) analysis is limited to deletions involving two or more exons for all genes on the panel, in addition to specific known recurrent single-exon deletions. CNVs of small size may have reduced detection rate. This method does not detect gene inversions, single-exonic and sub-exonic deletions (unless otherwise specified), and duplications of all sizes (unless otherwise specified). Additionally, this method does not define the exact breakpoints of detected CNV events. Confirmation testing for copy number variation is performed by specific PCR, Multiplex Ligation-dependent Probe Amplification (MLPA), next generation sequencing, or other methodology.

This test may not detect certain variants due to local sequence characteristics, high/low genomic complexity, homologous sequence, or allele dropout (PCR-based assays). Variants within noncoding regions (promoter, 5'UTR, 3'UTR, deep intronic regions, unless otherwise specified), small deletions or insertions larger than 25bp, low-level mosaic variants, structural variants such as inversions, and/or balanced translocations may not be detected with this technology.

SPECIAL NOTES

For ABCC6, sequencing variants in exons 1-7 are not detected due to the presence of regions of high homology.

For CFTR, when the CFTR R117H variant is detected, reflex analysis of the polythymidine variations (5T, 7T and 9T) at the intron 9 branch/acceptor site of the CFTR gene will be performed. Multi-exon duplication analysis is included.

For CYP21A2, targets were enriched using long-range PCR amplification, followed by next generation sequencing. Duplication analysis will only be performed and reported when c.955C>T (p.Q319*) is detected. Sequencing and CNV analysis may have reduced sensitivity, if variants result from complex rearrangements, in trans with a gene deletion, or CYP21A2 gene duplication on one chromosome and deletion on the other chromosome. This analysis cannot detect sequencing variants located on the CYP21A2 duplicated copy.

For DDX11, sequencing variants in exons 7-11 and CNV for the entire gene are not analyzed due to high sequence homology.

For GJB2, CNV analysis of upstream deletions of GJB6-CRYL1 critical region is included.

For HBA1/HBA2, CNV analysis is offered to detect common deletions of -alpha3.7, -alpha4.2, --MED, --SEA, --FIL, --THAI, --alpha20.5, and/or HS-40. Sequencing and CNV analysis may have reduced sensitivity due to high sequence homology.

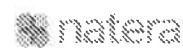
For OTOA, sequencing variants in exons 25-29 and CNV in exons 21-29 are not analyzed due to high sequence homology.

For RPGRIP1L, variants in exon 23 are not detected due to assay limitation.

For SAMD9, only p.K1495E variant will be analyzed and reported.

201 Industrial Road, Suite 410 | San Carlos, CA 94070 | www.natera.com | 650-249-9090 | Fax 1-650-799-7272

Page 10/15



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

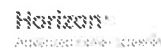
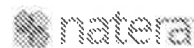
Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mch.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.

Patient Information
Patient Name:

Test Information
Ordering Physician:



Date Of Birth:
Case File ID:

Clinic Information:

Report Date:

Friedreich Ataxia (FXN)

The GAA repeat region of the FXN gene is assessed by trinucleotide PCR assay and capillary electrophoresis. Variances of +/-1 repeat for normal alleles and up to +/-3 repeats for premutation alleles may occur. For fully penetrant expanded alleles, the precise repeat size cannot be determined, therefore the approximate allele size is reported. Sequencing and copy number variants are analyzed by next-generation sequencing analysis.

Friedreich Ataxia Repeat Categories

Categories	GAA Repeat Sizes
Normal	<34
Premutation	34 - 65
Full	>65

Spinal Muscular Atrophy (SMN1)

The total combined copy number of SMN1 and SMN2 exon 7 is quantified based on NGS read depth. The ratio of SMN1 to SMN2 is calculated based on the read depth of a single nucleotide that distinguishes these two genes in exon 7. In addition to copy number analysis, testing for the presence or absence of a single nucleotide polymorphism (g.27134T>G in intron 7 of SMN1) associated with the presence of a SMN1 duplication allele is performed using NGS.

Ethnicity	Two SMN1 copies carrier risk before g.27134T>G testing	Carrier risk after g.27134T>G testing	
		g.27134T>G ABSENT	g.27134T>G PRESENT
Caucasian	1 in 632	1 in 769	1 in 29
Ashkenazi Jewish	1 in 350	1 in 580	LIKELY CARRIER
Asian	1 in 628	1 in 702	LIKELY CARRIER
African-American	1 in 121	1 in 396	1 in 34
Hispanic	1 in 1061	1 in 1762	1 in 140

Variant Classification

Only pathogenic or likely pathogenic variants are reported. Other variants including benign variants, likely benign variants, variants of uncertain significance, or inconclusive variants identified during this analysis may be reported in certain circumstances. Our laboratory's variant classification criteria are based on the ACMG and internal guidelines and our current understanding of the specific genes. This interpretation may change over time as more information about a gene and/or variant becomes available. Natera and its lab partner(s) may reclassify variants at certain intervals but may not release updated reports without a specific request made to Natera by the ordering provider. Natera may disclose incidental findings if deemed clinically pertinent to the test performed.

Negative Results

A negative carrier screening result reduces the risk for a patient to be a carrier of a specific disease but does not completely rule out carrier status. Please visit <https://www.natera.com/genetic-testing/halt/> for a table of carrier rates, detection rates, residual risks and promised variants/exons per gene. Carrier rates before and after testing vary by ethnicity and assume a negative family history for each disease screened and the absence of clinical symptoms in the patient. Any patient with a family history for a specific genetic disease will have a higher carrier risk prior to testing and, if the disease-causing mutation in their family is not included on the test, their carrier risk would remain unchanged. Genetic counseling is recommended for patients with a family history of genetic disease so that risk figures based on actual family history can be determined and discussed along with potential implications for reproduction. Horizon carrier screening has been developed to identify the reproductive risks for monogenic inherited conditions. Even when one or both members of a couple screen negative for pathogenic variants in a specific gene, the disease risk for their offspring is not zero. There is still a low risk for the condition in their offspring due to a number of different mechanisms that are not detected by Horizon including, but not limited to, pathogenic variant(s) in the tested gene or in a different gene not included on Horizon, pathogenic variant(s) in an upstream regulator, uniparental disomy, de novo mutation(s), or digenic or polygenic inheritance.

Additional Comments

These analyses generally provide highly accurate information regarding the patient's carrier status. Despite this high level of accuracy, it should be kept in mind that there are many potential sources of diagnostic error, including misidentification of samples, polymorphisms, or other rare genetic variants that interfere with analysis. Families should understand that rare diagnostic errors may occur for these reasons.

201 Industrial Road, Suite 410 | San Carlos, CA 94070 | www.natera.com | 650.249.9090 | Fax 1-450.730.2272

Page 23/28



Légende: AN = anormal AB = anormal bas AH = anormal haut C = critique CB = critique bas CH = critique haut X = absurde XB = absurde bas XH = absurde haut

Directeur scientifique/Chef de laboratoire/Biochimiste Clinique
Dr Artak Tadevosyan, PhD, DEPD, CSPQ, FCACB (No licence : 2014-199)

Microbiologiste
Dre Véronique Sandekian, PhD, Mcb.A (No licence : 3111)

Ce message peut renfermer des renseignements protégés ou des informations confidentielles. Si vous l'avez reçu par erreur ou s'il ne vous est pas destiné, veuillez en détruire toute copie et prévenir immédiatement l'expéditeur.