Integrated GENETICS
LabCorp Specialty Testing Group

SAMPLE REPORT

Chromosome Analysis

Patient Name: Sample Patient
Referring Physician: John Doe, M.D.
Specimen #: 10000000 **Client #:** 12345
Patient ID: 20000000-1

City Hospital
1 Main Street
Anywhere, USA

DOB: 00/00/1971
SSN: ***-**-****

Date Collected: 09/19/2012
Date Received: 09/20/2012
Lab ID:
Hospital ID:
Specimen Type: **AMNIO**

Indication: Abnormality seen on ultrasound - multiple congenital anomalies (MCA)

Metaphases Counted:	15	**Colonies Counted:**	13	**Banding Technique:**	GTW
Metaphases Analyzed:	5	**Number of Cultures:**	3	**Banding Resolution:**	400
Metaphases Karyotyped:	2	**Subculture:**	N	**Dept. Section:**	A1

RESULTS: 69,XXY
Abnormal karyotype, male

INTERPRETATION:

Cytogenetic analysis shows three copies of each chromosome, resulting in triploidy.

Triploidy is associated with multiple malformations, neurologic dysfunction and severe failure to thrive. It is a common cause of first trimester spontaneous abortions. Triploid conceptions which survive longer in pregnancy are often delivered prematurely or are stillborn. If liveborn, they rarely survive longer than a few days to a few months. Approximately 69% of triploidies are diandric partial hydatidiform moles, in which two of the three sets of chromosomes are paternally derived (Jones, K.L., Smith's Recognizable Patterns of Human Malformation, 5th edition. Philadelphia: Elsevier,Inc., 2006. Pp. 28-31).

COMMENT:
No other chromosome abnormalities are observed. The standard cytogenetic methodology utilized in this analysis does not routinely detect subtle rearrangements or low-level mosaicism and cannot detect microdeletions. Also, it cannot detect molecular cytogenetic abnormalities (such as microdeletions and microduplications) that may be detectable by microarray analysis.

Genetic counseling is recommended for this family.

Follow-up confirmatory analysis is available.

Signed:

Date: 09/28/2012