

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

Client #: 12345

DOB: 00/00/1981
SSN: ***-**-****

Date Collected: 09/07/2012
Date Received: 09/08/2012
Lab ID:
Hospital ID:
Specimen Type: POC

City Hospital
1 Main Street
Anywhere, USA

Indication: Missed abortion

Metaphases Counted: 3	Number of Cultures: 1	Banding Technique: GTW
Metaphases Analyzed: 3	Subculture: N	Banding Resolution: 400
Metaphases Karyotyped: 2		Dept. Section: POCCVS

RESULTS: 45,X
Abnormal female karyotype

INTERPRETATION:

Cytogenetic analysis shows an abnormal chromosome complement with 45 chromosomes due to the loss of a sex chromosome, resulting in monosomy X. This is consistent with Turner syndrome.

The loss of a sex chromosome is the most common abnormality found in spontaneous abortions, with more than 99% of 45,X fetuses aborting spontaneously (Nussbaum, R.L, et. al., Thompson & Thompson, Genetics in Medicine, 6th edition. Philadelphia: WB Saunders Co., 2001. Pp. 175).

All available material has been examined and only 3 cells were available for analysis. The number of available cells examined does not meet our laboratory standard of 20.

RECOMMENDATION:
Genetic counseling.

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.

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Signed:

Date: 09/24/2012

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