

Client: Example Client ABC123
123 Test Drive
Salt Lake City, UT 84108
UNITED STATES

Physician: Doctor, Example

Patient: Patient, Example

DOB: ██████████
Gender: Male
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Cystic Fibrosis (CFTR) 165 Pathogenic Variants

ARUP test code 2013661

Cystic Fibrosis, Allele 1	p.Phe508del	*
Cystic Fibrosis, Allele 2	Negative	
Cystic Fibrosis 5T Variant	Heterozygous	*
Cystic Fibrosis, 165 Variants, Interp	1 variant	*

According to information provided to ARUP, this patient has bilateral absence of the vas deferens. One severe pathogenic cystic fibrosis (CF) variant F508del, was identified, indicating this individual is at least a carrier of CF. In addition, one copy of the mild 5T variant was identified. If the severe and mild variants are located on opposite chromosomes, they are not predicted to result in classic CF, but may be causative for a CFTR-related disorder, such as bilateral absence of the vas deferens, pancreatitis, or bronchiectasis. Adult family members and this individual's reproductive partner should be offered CF carrier screening. Genetic consultation is recommended.

Specimen: Whole Blood
Symptoms: Yes
Ethnicity: Caucasian
Family History: No

This result has been reviewed and approved by weimin Sun, Ph.D.

BACKGROUND INFORMATION: Cystic Fibrosis (CFTR), 165 Pathogenic Variants
CHARACTERISTICS OF CLASSIC CYSTIC FIBROSIS (CF): Chronic sino-pulmonary disease, gastrointestinal malabsorption/pancreatic insufficiency, and obstructive azoospermia. Symptoms of a CFTR-related disorder are often limited to a single organ system such as isolated pancreatitis, bilateral absence of the vas deferens, nasal polyposis, or bronchiectasis.
INCIDENCE: 1 in 2,300 Ashkenazi Jewish, 1 in 2,500 Caucasians, 1 in 13,500 Hispanics, 1 in 15,100 African Americans, 1 in 35,100 Asians.
INHERITANCE: Autosomal recessive.
PENETRANCE: High for severe pathogenic variants, variable for moderate or mild pathogenic variants.
Cause of Classic CF: Two severe, or one severe and one moderate, pathogenic CFTR variants on opposite chromosomes.

H=High, L=Low, *=Abnormal, C=Critical

Unless otherwise indicated, testing performed at:

Cause of CFTR-Related Disorder: Two pathogenic CFTR variants on opposite chromosomes; two mild, one mild and one severe or one mild and one moderate.

PATHOGENIC VARIANTS TESTED:

*Note: variants are listed by standard nomenclature. Legacy names are also provided for the 23 recommended ACMG variants.
 c.1A>G, p.Met1Val; c.54-5940_273+10250del, Exons 2-3del;
 c.115C>T, p.Gln39X; c.178G>T, p.Glu60X; c.200C>T, p.Pro67Leu;
 c.223C>T, p.Arg75X; c.254G>A (Legacy G85E), p.Gly85Glu;
 c.262_263delTT, p.Leu88IlefsX22 (aka p.Leu88fs); c.273+1G>A, Intronic; c.273+3A>C, Intronic; c.274-1G>A, Intronic; c.274G>A, p.Glu92Lys; c.274G>T, p.Glu92X; c.292C>T, p.Gln98X; c.313delA, p.Ile105SerfsX2 (aka p.Ile105fs); c.325_327delTATinsG, p.Tyr109GlyfsX4 (aka p.Tyr109fs); c.328G>C, p.Asp110His;
 c.349C>T, p.Arg117Cys; c.350G>A (Legacy R117H), p.Arg117His; c.366T>A, p.Tyr122X; c.442delA, p.Ile148LeufsX5 (aka p.Ile148fs); c.489+1G>T (Legacy 621+1G>T), Intronic; c.531delT, p.Ile177MetfsX12 (aka p.Ile177fs); c.532G>A, p.Gly178Arg; c.579+1G>T (Legacy 711+1G>T), Intronic; c.579+5G>A, Intronic; c.579+3A>G, Intronic; c.580-1G>T, Intronic; c.595C>T, p.His199Tyr; c.613C>T, p.Pro205Ser; c.617T>G, p.Leu206Trp; c.658C>T, p.Gln220X; c.680T>G, p.Leu227Arg; c.720_741delAGGGAGAATGATGATGAAGTAC, p.Gly241GlufsX13 (aka p.Gly241fs); c.803delA, p.Asn268IlefsX17 (aka p.Asn268fs); c.805_806delAT, p.Ile269ProfsX4 (aka p.Ile269fs); c.933_935delCTT, p.Phe312del; c.948delT, p.Phe316LeufsX12 (aka p.Phe316fs); c.988G>T, p.Gly330X; c.1000C>T (Legacy R334W), p.Arg334Trp; c.1007T>A, p.Ile336Lys; c.1021T>C, p.Ser341Pro; c.1022_1023insTC, p.Phe342HisfsX28 (aka p.Phe342fs); c.1040G>A, p.Arg347His; c.1040G>C (Legacy R347P), p.Arg347Pro; c.1055G>A, p.Arg352Gln; c.1081delT, p.Trp361GlyfsX8 (aka p.Trp361fs); c.1116+1G>A, Intronic; c.1127_1128insA, p.Gln378AlafsX4 (aka p.Gln378fs); c.1153_1154insAT, p.Asn386IlefsX3 (aka p.Asn386fs); c.1202G>A, p.Trp401X; c.1203G>A, p.Trp401X; c.1209+1G>A, Intronic; c.1329_1330insAGAT, p.Ile444ArgfsX3 (aka p.Ile444fs); c.1340delA, p.Lys447ArgfsX2 (aka p.Lys447fs); c.1364C>A (Legacy A455E), p.Ala455Glu; c.1393-1G>A, Intronic; c.1397C>A, p.Ser466X; c.1397C>G, p.Ser466X; c.1400T>C, p.Leu467Pro; c.1418delG, p.Gly473GlufsX54 (aka p.Gly473fs); c.1438G>T, p.Gly480Cys; c.1466C>A, p.Ser489X; c.1475C>T, p.Ser492Phe; c.1477C>T, p.Gln493X; c.1519_1521delATC (Legacy I507del), p.Ile507del; c.1521_1523delCTT (Legacy F508del), p.Phe508del; c.1545_1546delTA, p.Tyr515X; c.1558G>T, p.Val520Phe; c.1572C>A, p.Cys524X; c.1573C>T, p.Gln525X; c.1585-1G>A (Legacy 1717-1G>A), Intronic; c.1585-8G>A, Intronic; c.1624G>T (Legacy G542X), p.Gly542X; c.1645A>C, p.Ser549Arg; c.1646G>A, p.Ser549Asn; c.1647T>G, p.Ser549Arg; c.1651G>A, p.Gly551Ser; c.1652G>A (Legacy G551D), p.Gly551Asp; c.1654C>T, p.Gln552X; c.1657C>T (Legacy R553X), p.Arg553X; c.1675G>A, p.Ala559Thr; c.1679G>A, p.Arg560Lys; c.1679G>C (Legacy R560T), p.Arg560Thr; c.1679+1.6kbA>G, Intronic; c.1680-1G>A, Intronic; c.1703delT, p.Leu568CysfsX4 (aka p.Leu568fs); c.1705T>G, p.Tyr569Asp; c.1721C>A, p.Pro574His; c.1753G>T, p.Glu585X; c.1766+1G>A (Legacy 1898+1G>A), Intronic; c.1766+3A>G, Intronic; c.1792_1798delAAAACTA, p.Lys598GlyfsX11 (aka p.Lys598fs); c.1911delG, p.Gln637HisfsX26 (aka p.Gln637fs); c.1923_1931del19insA, p.Ser641ArgfsX5 (aka p.Ser641fs); c.1973_1985del13insAGAAA, p.Arg658LysfsX4 (aka p.Arg658fs); c.1976delA, p.Asn659IlefsX4 (aka p.Asn659fs); c.2012delT, p.Leu671X; c.2051_2052del, p.Lys684ThrfsX4; c.2051_2052delinsG (aka c.2051_2delinsG), p.Lys684SerfsX38; c.2052delA (Legacy 2184delA), p.Lys684AsnfsX38; c.2125C>T, p.Arg709X; c.2128A>T, p.Lys710X; c.2175_2176insA, p.Glu726ArgfsX4 (aka p.Glu726fs); c.2195T>G, p.Leu732X; c.2215delG, p.Val739TyrfsX16 (aka p.Val739fs); c.2290C>T, p.Arg764Ter; c.2453delT, p.Leu818TrpfsX3 (aka p.Leu818fs); c.2464G>T, p.Glu822X; c.2490+1G>A, Intronic; c.2491G>T, p.Glu831X; c.2537G>A, p.Trp846X; c.2538G>A, p.Trp846X; c.2551C>T, p.Arg851X; c.2583delT, p.Phe861LeufsX3 (aka p.Phe861fs); c.2657+5G>A (Legacy 2789+5G>A), Intronic; c.2668C>T, p.Gln890X; c.2737_2738insG, p.Tyr913X; c.2780T>C, p.Leu927Pro; c.2810_2811inst, p.Val938GlyfsX37 (aka p.Val938fs); c.2834C>T, p.Ser945Leu; c.2875delG, p.Ala959HisfsX9 (aka

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ARUP LABORATORIES | 800-522-2787 | aruplab.com
500 Chipeta Way, Salt Lake City, UT 84108-1221
Tracy I. George, MD, Laboratory Director

Patient: Patient, Example
ARUP Accession: 21-140-126684
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
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p.Ala959fs); c.2908G>C, p.Gly970Arg; c.2988+1G>A (Legacy 3120+1G>A), Intronic; c.2988G>A, Intronic; c.2989-1G>A, Intronic; c.3039delC, p.Tyr1014ThrfsX9 (aka p.Tyr1014fs); c.3067_3072delATAGTG, p.Ile1023_Val1024del (aka I1023_V1024del); c.3140-26A>G, Intronic; c.3194T>C, p.Leu1065Pro; c.3196C>T, p.Arg1066Cys; c.3197G>A, p.Arg1066His; c.3230T>C, p.Leu1077Pro; c.3266G>A, p.Trp1089X; c.3276C>A, p.Tyr1092X; c.3276C>G, p.Tyr1092X; c.3302T>A, p.Met1101Lys; c.3310G>T, p.Glu1104X; c.3472C>T, p.Arg1158X; c.3484C>T (Legacy R1162X), p.Arg1162X; c.3528delC (Legacy 3659delC), p.Lys1177SerfsX15 (aka p.Lys1177fs); c.3536_3539del, p.Thr1179AsnfsX12 (aka p.Thr1179fs); c.3587C>G, p.Ser1196X; c.3611G>A, p.Trp1204X; c.3612G>A, p.Trp1204X; c.3659delC, p.Thr1220LysfsX8 (aka p.Thr1220fs); c.3691delT, p.Ser1231ProfX4 (aka p.Ser1231fs); c.3712C>T, p.Gln1238X; c.3718-2477C>T (Legacy 3849+10kbC>T), Intronic; c.3731G>A, p.Gly1244Glu; c.3744delA, p.Lys1250ArgfsX9 (aka p.Lys1250fs); c.3752G>A, p.Ser1251Asn; c.3763T>C, p.Ser1255Pro; c.3764C>A, p.Ser1255X; c.3773_3774insT, p.Leu1258PhefsX7 (aka p.Leu1258fs); c.3846G>A (Legacy W1282X), p.Trp1282X; c.3873+1G>A, Intronic; c.3909C>G (Legacy N1303K), p.Asn1303Lys; c.3937C>T, p.Gln1313X; c.3964-78_4242+577del, Exons 22-23del; c.4028delG, p.Gly1343AlafsX4 (aka p.Gly1343fs); c.4046G>A, p.Gly1349Asp; c.4077_4080delTGTTinsAA, p.Val1360fsX3 (aka p.Val1360fs); c.4111G>T, p.Glu1371X; c.4251delA, p.Glu1418ArgfsX14 (aka p.Glu1418fs). The IVS-8 variant, c.1210-12[5], will be reported only when R117H is detected or in patients who are reported to be symptomatic.

CLINICAL SENSITIVITY: Ashkenazi Jewish 96 percent; Caucasian 92 percent; Hispanic 80 percent; African American 78 percent; Asian American 55 percent.

METHODOLOGY: Polymerase chain reaction (PCR) and fluorescence monitoring.

Analytical Sensitivity & Specificity: 99 percent.

LIMITATIONS: Diagnostic errors can occur due to rare sequence variations. Only the 165 pathogenic CFTR variants and 5T variant (listed above) will be interrogated.

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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VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Cystic Fibrosis, Allele 1	21-140-126684	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Cystic Fibrosis, Allele 2	21-140-126684	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Cystic Fibrosis 5T Variant	21-140-126684	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Cystic Fibrosis, 165 Variants, Interp	21-140-126684	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

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