

Final

MDL#: 4328684

Test Results

Physician Copy

Genetic Counselor Information:

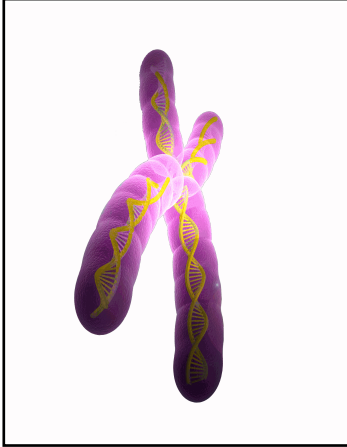


Table with specimen details: Specimen Type: Mouthwash, Date Collection: 1/25/2015, Date Processed: 1/26/2015, Date Reported: 3/2/2015

Patient Information: SSN: XXX-XX-5555 DOB: 1/1/1993 (Age: 22)
DOE, JANE
90 TRENTON ROAD
DAYTON, NJ 08690
Home: (142) 141-4113 Patient ID: 4444444

Ordering Physician/Lab: NPI: 2121212121
JOHN DOE MD
JOHN DOE, MD
202 ANY STREET
DAYTON, NJ 08810
Tel: 555-555-5551
Fax: 555-555-5555
Results Faxed To: JANE DOE HOSPITAL

BRCAcare™ BRCA1 and BRCA2 Analysis Results, COMPREHENSIVE

Interpretation Summary:

POSITIVE FOR A PATHOGENIC MUTATION

Table with 8 columns: Test Performed, Reference Sequence, Common Name, cDNA Change, Amino Acid Change, Exon, References, Interpretation. Rows include BRCA1 Sequencing, BRCA1 Deletion / Duplication Analysis, BRCA2 Sequencing (Pathogenic), and BRCA2 Deletion / Duplication Analysis.

Comprehensive Interpretation:

Test Interpretation:

Sequencing of the coding regions and splice junction sites of the BRCA2 gene was done and was POSITIVE for the Y3308X change in the BRCA2 gene. This change has been associated with the Hereditary Breast Ovarian Cancer Syndrome (HBOC) and is considered to be PATHOGENIC.

In addition to the gene sequencing assay, a multiplex ligation-dependent probe amplification (MLPA) analysis which detects deletions and/or duplications involving one or more exon, including those that affect the entire BRCA1 and BRCA2 gene, was completed. No deletions or duplications were detected.

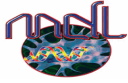
The classification and interpretation of all genetic variants identified as a result of this genetic testing is based on the current scientific information available. As new scientific information becomes available, in some circumstances, the classification and interpretation of the genetic variants may change.

Genetic counseling is advised to learn the full meaning of the test results and to discuss risks to other family members. Relatives should consider genetic counseling and testing. All test results should be interpreted by physician or genetic counselor in the context of the personal/family cancer history, and clinical and laboratory data.

Table for Mail options: Yes USPS, All Yes

Table for Fax options: Yes Manual, All No

Signature of Dante A. Ragasa, Medical Director



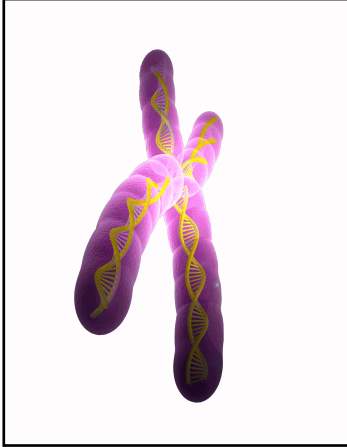
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BRCAcare™ BRCA1 and BRCA2 Analysis Results, COMPREHENSIVE

Comprehensive Interpretation (continued):

Methods and Variant Classification:

The entire gene coding region of the BRCA1/BRCA2 genes, as well as all flanking non-coding regions, were analyzed by Next Generation Sequencing. The multiple-ligation-probe amplification assay (MLPA) was also performed to detect copy number variations (gross deletions and duplications) in the BRCA1 and BRCA2 genes. The MDL BRCA variant classification system is based on the 5-tier system recommendations for the interpretation of sequence variants proposed by the American College of Medical Genetics and Genomics (ACMG). To classify each variant, MDL assigns weight to each piece of available evidence, including literature review, reputable database reports, population frequencies, and computational evidence and prediction. Each identified variant is classified as Benign, Likely Benign, a Variant of Unknown Significance, Likely Pathogenic, or Pathogenic. Variants determined to be benign are not reported, but are available upon request. MDL variant results are reported using numbering and nomenclature recommended by the Human Genome Variation Society (HGVS <http://hgvs.org>). Nucleotide and codon number are based on the reference sequence NC_000017.10 for the BRCA1 gene and NC_000013.10 for the BRCA2 gene.

Test Limitations:

This assay cannot detect mutations affecting gene regions not examined in the assay (e.g. most of the intronic regions).

Disclaimer:

This test was developed and its performance characteristics have been determined by Medical Diagnostic Laboratories, LLC. Performance characteristics refer to the analytical performance of the test. It is not been reviewed by the US Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary.

Mail:	Yes	USPS
	All	Yes

Fax:	Yes	Manual
	All	No

Dante A. Ragasa
Medical Director, Dante A. Ragasa, MD.