ARUP Laboratories
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*****Example Report*****

Patient Age/Gender: Unknown Female
Printed: 13-Sep-19 12:06:02

Procedure	Result	Units	Ref Interval	Accession	Collected	Received	Reported/ Verified
RHC GENO Specimen	Cultured Amnio			19-256-900102	13-Sep-19 11:12:00	13-Sep-19 11:12:00	13-Sep-19 12:04:24
RhCc Genotype	C/C f			19-256-900102	13-Sep-19 11:12:00	13-Sep-19 11:12:00	13-Sep-19 12:04:24
Doctor Review, RHC GENO	Mao, Rong			19-256-900102	13-Sep-19 11:12:00	13-Sep-19 11:12:00	13-Sep-19 12:04:24

13-Sep-19 11:12:00 RhCc Genotype:

Indication for testing: Determine fetal RhCc genotype to assess risk for alloimmune hemolytic disease of the fetus and newborn (HDFN).

Fetal RhCc genotype: C/C

Interpretation: Two copies of the RHCE*2 (C) allele were detected in this prenatal sample; the RHCE*4 (c) allele was not identified. This genotype is predictive of an RhC+c- phenotype in this fetus.

This result has been reviewed and approved by Rong Mao, M.D.

13-Sep-19 11:12:00 RhCc Genotype:
BACKGROUND INFORMATION: RhC/c (RHCE) Antigen Genotyping

CHARACTERISTICS: Erythrocyte alloimmunization may result in hemolytic transfusion reactions or hemolytic disease of the fetus and newborn (HDFN).
C ANTIGEN FREQUENCY: 0.68 Caucasians, 0.27 African Americans, 0.93 Asians.
c ANTIGEN FREQUENCY: 0.80 Caucasians, 0.98 African Americans, 0.47 Asians.
INHERITANCE: Co-dominant.
CAUSE: Antigen-antibody mediated red-cell hemolysis between donor/recipient or transferred maternal antibodies.
POLYMORPHISM TESTED: Rh blood group RHCE*2 (C), RHCE*4 (c): c.307C>T; p.Pro103Ser and 109bp insertion.
CLINICAL SENSITIVITY: 99 percent.
METHODOLOGY: Immucor PreciseType(TM) HEA Molecular BeadChip which is FDA-approved for clinical testing.
ANALYTIC SENSITIVITY AND SPECIFICITY: 99 percent.
LIMITATIONS: Bloody amniotic fluid samples may give false-negative results because of maternal cell contamination. Rare nucleotide changes leading to altered or partial antigen expression may not be detected by this assay. Genotypes resulting in Rh null phenotypes will not be assessed. This assay is occasionally limited in predicting genotype due to extreme variation in the Rh locus. False-negative RhC or Rhc predictions may result due to RHCE-D-CE fusion genes. Patients who have had hematopoietic stem cell transplants may have inconclusive results on this test. Abnormal signal intensities may result in indeterminate genotyping results.

For quality assurance purposes, ARUP Laboratories will confirm the above result at no charge following delivery. Order Confirmation of Fetal Testing and include a copy of the original fetal report (or the mother's name and date of birth) with the test submission. Please contact an ARUP genetic counselor at (800) 242-2787 extension 2141 prior to specimen submission.