

Leuven, 07/11/2008

Referring clinician: Doctor X
Street
City, Country

Molecular genetic analysis for Cystic Fibrosis (*CFTR* gene)

<u>Last Name:</u>	BRAUN	<u>Ethnic origin:</u>	Mother from Brittany, father from Germany
<u>First name:</u>	Gary	<u>Sample received:</u>	03/06/2007
<u>Date of birth:</u>	20/06/2006	<u>Sample type:</u>	DNA
<u>Gender:</u>	Male	<u>Your reference:</u>	CF06-2
<u>Place of birth:</u>	Hamburg, Germany	<u>Our reference:</u>	MUCO-412

Reason for referral: Identification of the *CFTR* mutations responsible for the CF phenotype: failure to thrive, chronic diarrhoea, two episodes of bronchiolitis and a positive sweat test. The mother of Gary Braun has recently become pregnant.

RESULT Highly likely compound heterozygous for c.1652G>A, p.Gly551Asp (traditional name: G551D) and c.1657C>T, p.Arg553* (traditional name: R553X)

Genotype in HGVS: c.[1652G>A(;):1657C>T]
Reference Sequence NM_000492.3

INTERPRETATION

Gary Braun is heterozygous for the c.1652G>A, p.Gly551Asp (traditional name: G551D) and c.1657C>T, p.Arg553* (traditional name: R553X) cystic fibrosis mutations. He is highly likely to be a compound heterozygote of these two mutations, which would confirm the diagnosis of cystic fibrosis.

Such confirmation can be obtained by **testing the parents** to establish carrier status and origin of each mutation.

Referral of the parents for genetic counselling is recommended.

Once carrier detection is confirmed, **this couple has a 25% risk to have an affected child for each pregnancy** and prenatal diagnosis can be offered in this pregnancy and in every subsequent pregnancy.

In addition, **carrier testing** can be offered to their **relatives**, in the framework of a genetic counselling session.

Analysis performed by



Molecular biologist Y

Approved by



Laboratory director Z

The method used: PCR and reverse dot blot (INNO-LIPA *CFTR*19 & *CFTR*17+Tn update).
Mutations screened for in traditional nomenclature: F508del, I507del, G542X, 1717-1G>A, G551D, R553X, R560T, Q552X, W1282X, S1251N, 3905insT, N1303K, *CFTR*dele2,3, 711+1G>T, 3272-26A>G, 1898+1G>A, 3199del6, 3120+1G>A, 394delTT, G85E, E60X, 621+1G>T, R117H, 1078delT, R347P, R334W, 2143delT, 2183AA>G, 2184delA, 711+5G>A, R1162X, 3659delC, 3849+10kbC>A, A455E. **The mutation detection rate is about 87% for the German population (WHO report 2004, <http://www.genet.sickkids.on.ca/cftr>).**