

1-800-533-1710

PATIENT NAME			PATIENT NU	MBER		AGE	SEX	ACCESSION #
TESTING, 82943			L3MRNG91	L3MRNG9165457		34	F	G9165457
ORDERING PHYSICIAN			CLIENT ORD	ER#				ACCOUNT # LIAISONS
COLLECTION	RECEIVED		REPORT PRI	NTED	SPECIMEN INFORMA	TION		
02/25/11 09:45 A	02/25/11 0	9:45 A	03/10/11	03:33 P	DATE OF BIRTH:			
DATE TIME	DATE	TIME	DATE	TIME				
Test Client								
Attn: Mayo Liaisons								
200 First Street SW								
Rochester, MN 55905								
507-284-8202								

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TEST REQUESTED LO REF RANGE PERFORM SITE *

Hexosaminidase A and Tot, WBC/Mole

REPORTED: 02/25/11 11:10 A

Hexosaminidase A and

19.0 U/g Prot

MCR

Total, WBC

-- EXPECTED VALUES --

16.4-36.2 U/g of cellular protein

Percent A 73 %
MML Comment

63-75 MCR MCR

In this sample, total hexosaminidase activity and percent hexosaminidase A are normal. Automatic reflex to molecular genetic testing will NOT be performed. If desired, please call (1-800-533-1710) within one month to add Tay-Sachs Disease, Mutation Analysis, HEXA (MML 82588).

These results indicate this individual is NOT affected with Tay-Sachs disease (OMIM 272800) and suggest that this individual is NOT a carrier for Tay-Sachs disease. However, please note that a small percentage (<0.5%) of carriers may exhibit normal hexosaminidase A activity and will not be detected by this method (Triggs-Raine et al. NEJM. 1990; 323:6-12). In addition, patients with or carriers of the AB variant (OMIM 272750) or late-onset Tay-Sachs disease (B1 variant OMIM 272800) will not be detected. If this patient shows symptoms of later-onset Tay-Sachs (>= 2 years), consider ordering Hexosaminidase A (MUGS), Serum (MML 80350) to rule out the B1 variant. Please contact the Biochemical Genetics consultant or genetic counselor on call (1-800-533-1710) to discuss remaining residual risk or questions you may have.

* Perform Site Legend on last page of report

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, 82943	Final	02/25/11 09:45 A



1-800-533-1710

PATIENT NAME TESTING, 82943			PATIENT NU L3MRNG91			AGE 34	SEX F	ACCESSION # G9165457
ORDERING PHYSICIAN			CLIENT ORD				<u> - </u>	ACCOUNT #
COLLECTION 02/25/11 09:45 A DATE TIME	RECEIVED 02/25/11 09 DATE	9:45 A TIME	REPORT PR 03/10/11 DATE	NTED 03:33 P TIME	SPECIMEN INFORMA DATE OF BIRTH:	TION		
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202								
TEST REQUESTED	HI LO				1	REF RAN	GE I	PERFORM SITE *

* PERFORMING SITE

MCR	Mayo Clinic Dpt of Lab Med & Pathology	Lab Director: Franklin R. Cockerill, III, M.D.
	200 First Street SW Rochester, MN 55905	

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, 82943	Final	02/25/11 09:45 A