MAYO CLINIC
Mayo Medical Laboratories

LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME	PATIENT NUMBER	AGE	SEX	ACCESSION #
TESTING, 8668	L3MRNG9166012	14	F	G9166012

ORDERING PHYSICIAN	CLIENT ORDER #	ACCOUNT #
		LIAISONS

COLLECTION DATE TIME	RECEIVED DATE TIME	REPORT PRINTED DATE TIME	SPECIMEN INFORMATION
03/07/11 09:39 A	03/07/11 09:39 A	03/09/11 08:51 A	DATE OF BIRTH: 10/2/1996

Test Client
Attn: Mayo Liaisons
200 First Street SW
Rochester, MN 55905
507-284-8202

TEST REQUESTED	HI LO		REF RANGE	PERFORM SITE *
X,Y Aneuploidy, Buccal Smear, FISH			**REPORTED: 03/07/11 09:47 A**	
Specimen		**Buccal Mucosa**		**MCR**
Specimen ID		**1053685**		**MCR**
Order Date		**07 Mar 2011 09:42**		**MCR**
Method				**MCR**

FISH with probes for X centromere (DXZ1) and Y centromere (DYZ3).

Reason For Referral				**MCR**

r/o Turner syndrome, short stature

Results		**nuc ish(DXZ1x2)**		**MCR**

Of 200 nuclei, 96.6% had an XX signal pattern.

Interpretation				**MCR**

The results are consistent with an XX signal pattern. The expected range for XX cells in normal females is 95% to 100%. This test does not exclude structural abnormalities of sex chromosomes. For a more definitive study, a chromosome analysis should be done.
DISCLAIMER: This test was developed and its performance characteristics determined by Laboratory Medicine and Pathology, Mayo Clinic, Rochester MN. It has not been cleared or approved by the U.S. Food and Drug Administration. This FISH test does not rule out other chromosome abnormalities.

Consultant		**Heather Lynn Owen**		**MCR**
Report Date		**07 Mar 2011 09:46**		**MCR**

*** PERFORMING SITE**

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

PATIENT NAME	ORDER STATUS	COLLECTION DATE AND TIME
TESTING, 8668	Final	03/07/11 09:39 A

Specimen receipt and report times are in CST/CDT

REPRINT