

290 x 320

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Patient Name:  
Date of Birth:  
Gender:  
Accession ID:  
Cross Reference:

Specimen Type:  
  
Receive Date:  
Collection Date:  
Report Date:

Client Name:  
  
Mailing Address:  
  
Phone Number:

Client Name:

**Test Performed:** Whole Exome Sequencing and Deletion/Duplication Analysis, Trio

## Analyses of genes related to all



No pathogenic sequence variant(s) in gene related to all detected .

## Relevant Findings and Interpretation

Sequence variants related to all:

Nr.	Classification	Gene	Exon/ Intron	SNP ID	DNA change	Protein change	Chromosomal location	Zygosity	Inheri- tance	Disease Groups	Associated Disease(s)
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Variant Statistics:

Mutation Number	Gene	DNA change	Transcript ID	AF in patient	Nbr. Reads	Quality	Frequency globally	Maximal AF globally	Population with maximal AF
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**Note:** Quality Score: <10 is low quality; 10-20 is medium quality; >20 is high quality

Relevant Articles:

AwesomeCorp - 123 Waffles Roads 12345 Demo-Ville TestLand  
VAT Number IE 1234567X