

NEWBORN SCREENING REPORT

701/328-4534

Patient		Birth	Date and Gender (Client Reference	Accession #
LAST875642, FIRST875642		202	25-05-13 07:12	875642	78464
		Mal	le		
564 22ND ST		Colle	ected	Received	Project
ANYTOWN, ND 58999		202	25-05-14 09:16	2025-05-15 02:00	
				Ordering Health Care Provider	
	ANYTOWN HOSPITAL				WELBY, MARCUS
ို					Primary Care Provider
SEND-OUT LAB				WELBY, MARCUS	
				Sample Type	
ANYTOWN, ND 58999					Blood spot specimen
					Sample Note(s)
Screen	Birth Order	IA Barcode Number	Transfusion Interferen	ce Weight at Collection	Guardian
Initial		IA0972334	No	2819 grams	MOMLAST875642, MOMFIRST875642

RESULTS OF ANALYSIS - FINAL REPORT

TEST	RESULT	ANALYSIS NOTE(S)
Congenital Adrenal Hyperplasia, Immunoassay		
Congenital adrenal hyperplasia interpretation	Within Normal Limits	
Congenital Hypothyroidism, Immunoassay		
Congenital hypothyroidism interpretation	Within Normal Limits	
Biotinidase Deficiency, Immunoassay		
Biotinidase deficiency interpretation	Within Normal Limits	
Galactosemia, Enzymatic Assay		
Galactosemia interpretation	Within Normal Limits	
Hemoglobinopathies, Various Methods		1
Hemoglobin disorders interpretation	Within Normal Limits	
Cystic Fibrosis, Various Methods		2
Cystic fibrosis interpretation	Within Normal Limits	
Expanded Screening Disorders, Tandem Mass Spectrometry		3
Fatty acid oxidation defects interpretation	Within Normal Limits	
Organic acidemias interpretation	Within Normal Limits	
Amino acidemias interpretation	Within Normal Limits	
Lysosomal Storage Disorders, Tandem Mass Spectrometry		4
Pompe disease interpretation	Borderline - See second tier test result	
Mucopolysaccharidosis Type 1 (MPS1)	Within Normal Limits	
disease interpretation		
Pompe Disease 2nd Tier NBS, Flow Injection Analysis-Tanden		5
Pompe Disease 2nd Tier NBS interpretation	See second tier results report attached to the sam OpenELIS Web Portal	ple in the
Severe Combined Immunodeficiency, Real-Time PCR	Openie Lio Web i Ortai	6
Severe Combined Immunodeficiency (SCID) interpretation	Within Normal Limits	v
Spinal Muscular Atrophy, Real-Time PCR		7
Spinal Muscular Atrophy (SMA) interpretation	Within Normal Limits	

SAMPLE AND ANALYSIS NOTES

- 1. Core conditions screened: Sickle cell disease, Hemoglobin S/C disease, Hemoglobin S beta-thalassemia
- 2. Cystic Fibrosis Transmembrane Conductance Regulator (CFTR) gene variant testing was NOT performed on this sample because the Immunoreactive Trypsinogen (IRT) value was in the normal range.

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- 3. Core conditions screened: Fatty acid oxidation defects: Carnitine uptake defect (Carnitine transport defect), Long-chain 3hydroxy acyl-CoA dehydrogenase deficiency, Medium chain acyl-CoA dehydrogenase deficiency, Trifunctional protein deficiency, Very long-chain acyl-CoA dehydrogenase deficiency; Organic acidemias: Glutaric acidemia type I, 3-Hydroxy 3methylglutaric aciduria, Isovaleric acidemia, 3-Methylcrotonyl-CoA carboxylase deficiency, Methylmalonic acidemia (methylmalonyl-CoA mutase, cobalamin disorders, vitamin B12 disorders), Beta-Ketothiolase deficiency, Propionic acidemia, Holocarboxylase synthetase deficiency: Amino acidemias: Argininosuccinic aciduria, Citrullinemia type 1, Homocystinuria, Maple Syrup Urine Disease, Classic Phenylketonuria, Tyrosinemia type I. The performance characteristics of this test were determined by the State Hygienic Laboratory. It has not been cleared or approved by the U.S. Food and Drug Administration.
- 4. Core conditions screened: Lysosomal Storage Disorders: Pompe disease, Mucopolysaccharidosis Type 1 (MPS1) disease. A Presumptive Positive interpretation for Pompe or MPS1 will automatically reflex to second tier testing if a suitable sample is still available at SHL. A Borderline interpretation for Pompe will automatically reflex to second tier testing if a suitable sample is still available at SHL. If not, program staff will contact with recommendations for second tier testing. A second tier test interpretation will take precedence over the first tier screening interpretation. The performance characteristics of this test were determined by the State Hygienic Laboratory. It has not been cleared or approved by the U.S. Food and Drug Administration.
- 5. The "Pompe Disease 2nd Tier NBS interpretation" will take precedence over the "Pompe disease interpretation". This test was developed and its performance characteristics determined by Mayo Clinic Laboratories, 200 First Street SW, Rochester, MN 55905 (CLIA Certificate: 24D0404292) in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.
- 6. The performance characteristics of this test were determined by the State Hygienic Laboratory. It has not been cleared or approved by the U.S. Food and Drug Administration.
- 7. Spinal Muscular Atrophy (SMA) screening uses a deletion in exon 7 of the survival motor neuron 1 (SMN1) gene to assess risk. 95% of SMA cases are caused by deletion of SMN1 exon 7. Thus, the screening assay may miss up to 5% of SMA cases that are not caused by SMN1 exon 7 deletion.

ANALYSIS INFORMATION

<u>TEST</u>	<u>ANALYZED</u>	<u>SITE</u>	<u>RELEASED</u>
Congenital Adrenal Hyperplasia, Immunoassay	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
2. Congenital Hypothyroidism, Immunoassay	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
3. Biotinidase Deficiency, Immunoassay	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
Galactosemia, Enzymatic Assay	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
5. Hemoglobinopathies, Various Methods	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
6. Cystic Fibrosis, Various Methods	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
7. Expanded Screening Disorders, Tandem Mass Spectrometry	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
8. Lysosomal Storage Disorders, Tandem Mass Spectrometry	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
Pompe Disease 2nd Tier NBS, Flow Injection Analysis-Tandem Mass Spectrometry	2025-05-16 10:35 MBH	10415	2025-05-20 17:14 MBH
10. Severe Combined Immunodeficiency, Real-Time PCR	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH
11. Spinal Muscular Atrophy, Real-Time PCR	2025-05-15 06:00 MBH	10320	2025-05-20 17:14 MBH

SITE(S) PERFORMING TESTING

10320 STATE HYGIENIC LABORATORY ANKENY, IOWA LABORATORIES COMPLEX, 2220 S ANKENY BLVD, ANKENY, IA 50023; Phone 515/725-1630; Fax 515/725-1650; Michael A. Pentella, Ph.D., D(ABMM), Director; CLIA ID Number 16D0709302
MAYO CLINIC LABORATORIES, ROCHESTER MAIN CAMPUS, 200 FIRST STREET SW, ROCHESTER, MN 55905; CLIA Certificate: 24D0404292

10415

For questions about resubmission, results, referrals, and newborn screening procedures, contact the North Dakota Department of Health and Human Services at 701/328-4534. This is a screening test and not indicated for stand-alone purposes; results should be used in conjunction with other available laboratory and clinical information. A false negative or a false positive result must always be considered when screening; therefore, clinical findings and status should be considered whenever interpreting

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laboratory results. Newborn reference values may not be applicable to older infants, thus screening results should be interpreted with caution in such cases. Information on the conditions screened is available at https://www.hhs.nd.gov/cfs/newborn-screening/newborn-blood-spot-screening/information-parents/disorders. The result(s) of this report relate only to the items analyzed. Where the laboratory has not been responsible for the sampling stage the results apply only to the sample as received. This report shall not be reproduced except in full without the written approval of the laboratory.

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