





To:	S.R Hospital-Thanjavur	SampleID	2200057812
	No.29, Sivaji Nagar	PatientID	1002218860
	Tamil Nadu	Collected on	08/05/2022
	Thanjavur - 613001 Contact:	Received on	13/05/2022 11:32
	Report Of: B/O SINDHUJA	Registered on	13/05/2022 13:03
	Pt. Contact: 9159793452	Reported on	14/05/2022 11:39
		Referred by	DR.V.THENDRAL

### carleM<sup>™</sup> Newborn Screening - Trio

Patient Name: B/O SI	ALUHDA	Patient DOB: 04/05/2022		

Weight: 3.35 Kg

City: THANJAVUR Hospital ID:

Sample Type: DBS

Method: Time-resolved Fluroimmunoassay

- corrient) is curated to ensure early detection of IEMs (Inborn Errors of Metabolism) so that they can be identified and managed appropriately at an early stage and the adverse outcomes associated with IEMs can be prevented.
- Through carleM<sup>™</sup> Metabolic Testing program we want to ensure that all your metabolic testing requirements from screening to • management receive multidisciplinary advice from our expert team of Metabolic Geneticists, Metabolic Dietitian, and Genetic Counsellors collaboratively at one place and aid you in your decision to achieve the best possible outcomes for your loved ones.

### **Clinical History**

Newborn screening test was offered to screen for Inborn Errors of Metabolism in the baby. ٠

Gender: FEMALE

Screening for Common 3 Parameters								
Metabolites	Results	Normal Ranges	Observed Levels	Interpretations				
Congenital Hypothyroidism (TSH)	othyroidism (TSH) 0.81 N: 0.1 to 10 μU/mL μU/mL		Normal level of TSH.	Screen Negative				
Congenital Adrenal Hyperplasia (17-OHP)	10.30 nmol/L	N: 0.1 to 30 nmol/L	Normal level of 17- OHP.	Screen Negative				
Enzyme	Result	Normal Range	Observed Level	Interpretation				
G6PD Deficiency (G6PD enzyme)	3.17 U/g Hb	N: 2.5 U/g Hb & Above	Normal activity of G6PD enzyme.	Screen Negative				

TSH: Thyroid-stimulating Hormone; 17- OHP: 17-hydroxyprogesterone; G6PD: Glucose-6-phosphate dehydrogenase



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#### Impression

The given blood sample shows all the metabolites/enzymes studied to be within normal limits.

Suggestion

Clinical correlation is recommended.

Path

Rakhee P. Vishwakarma MSc. Mphil., Scientific Officer

screening panel.

Verified by **Mr. Pradip Kadam** In-charge Biochemistry

ara

Dr. Chaitanya Datar MBBS, MD (Medical Genetics), Consultant, Clinical & Metabolic Geneticist

\*Note: All the above results would pertain to the level of the metabolites at the time of sample collection. It must be noted that the clinical condition, dietary intake, medical supplementation etc. at the time of sample collection does have an impact on metabolite levels. Therefore consideration of these factors is essential while interpreting these results.

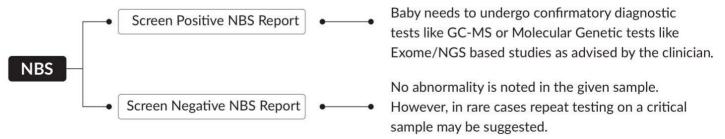
Understanding and Interpreting carleM<sup>™</sup> Trio Newborn Screening Test Report Screening for Common 3 Parameters

A "negative" or "in-range" result means that the baby's blood test did not show any signs of the conditions included on the newborn

• A "positive" or "out-of-range" result means that the baby's screening exam did show signs that the baby may be at higher risk of having one or more of the conditions included in the newborn screening panel. This does not mean that the baby definitely has a medical condition. However, follow-up testing must be performed immediately to determine if a condition is actually present after consultation with a gualified medical practitioner.

Positive Newborn screening results give out the abnormal levels of metabolites and enzymes in the body indicative of a particular type of Inborn Error of Metabolism.

The final report interpretation involves correlation between the abnormal metabolites/enzymes and the medical history, family history, clinical presentation, etc.



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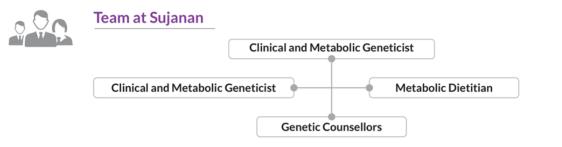


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### The caries Advantage

carleM<sup>™</sup> is an unique metabolic testing program which offers you the added value of 40+ years of leading metabolic disorder experts of the country.

carleM<sup>™</sup> program is the only metabolic testing program in India to offer extensive care consisting of:





## Laboratory:

State-of-the-art diagnostic facility with capability to perform screening to advance metabolic testing such as TMS, GC-MS, Disorder specific advanced metabolic panels to Molecular testing like Exomes or other NGS based testing options, as advised by the clinician.



# Metabolic Dietitian:

Many IEMs require strict nutritional intervention. Metabolic dietitian at carleM<sup>™</sup> ensures guidelines and protocol based nutritional guidance for such disorders.



# Clinical &

# Metabolic Geneticists:

- Metabolic disorders can be complex and it requires understanding of complex biochemical pathways and various diagnostic options available for diagnosis of IEMs.
- Post diagnosis management of IEMs also require expertise to advise guideline based management to the patient.

### Genetic Counsellors across India:

 Given the inherited nature of most IEMs and the necessary long-term management for these disorders, the genetic counsellor's role in clinical setting is integral in providing ongoing support and education for patients and their families.

• This includes coping with the disease burden, helping patients and families adapt to a condition in the family and ensuring adequate understanding of the genetic risks and the available prenatal diagnostic and reproductive choices.

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### General Disclaimers

- Genetic/metabolic testing may have technical limitations. These limitations pertaining to different assays have been mentioned in the respective reports.
- It is assumed that the specimen belongs to the person undergoing the test.
- The above results must be interpreted in conjunction with the clinical profile of the patient by the referring Clinician
- Genetic counselling pertaining to the report must be considered. It is the patient/relative's responsibility to seek further guidance.
- Isolated laboratory investigations may not confirm the diagnosis of a disease. They help in arriving at a diagnosis in conjunction with the clinical presentation and other investigations.
- Some of the special tests may be outsourced to some of our referral laboratories and the reports may be transcribed on our letterhead.
- · Partial reproduction of this report is not considered valid.
- This report is not valid for medico-legal purpose.

Neither the lab nor its employees/representatives are liable / responsible for any loss or damage that may be incurred to any person/s as a result of the incorrect use of the report or inaction thereof.

**END OF REPORT** 

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