

## INFORMATION SHEET

# PGT-A results



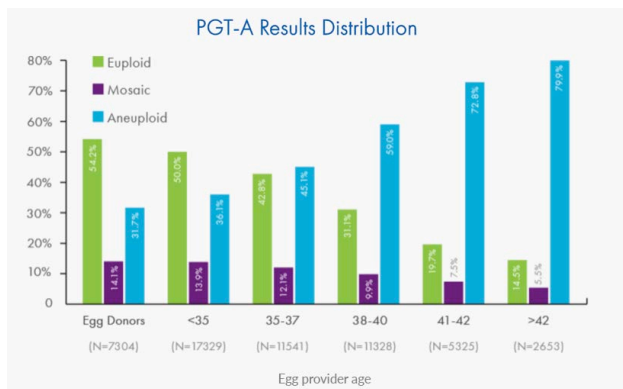
While you are waiting for your results, this information sheet provides you with some information regarding PGT-A and the possible results that may be reported.

### PGT-A

PGT-A is a genetic test for your embryo that is designed to screen for chromosome aneuploidy and is suitable for most patients undergoing IVF, in particular as an egg provider's age increases. PGT-A testing has been requested on some or all of your embryos from your current cycle.

### Risk of aneuploidy

All egg providers produce embryos that have chromosome abnormalities. As the egg providers age increases, the risk of chromosome abnormalities increases. The graph below shows the chance of receiving euploid results (chromosomally normal), aneuploid results (chromosomally abnormal) and mosaic results (combination of normal and abnormal cells) based on the age of the egg provider.



Internal CooperGenomics data of blastocyst biopsies tested via Next Generation Sequencing (2014-2017)

### Possible results

PGT-A results will take up to 4 weeks. When your PGT-A results are available you will receive a call from our Genetics Team to disclose the results and explain your specific embryo results in detail. The possible results are:

#### EUPLOID – SUITABLE FOR TRANSFER

Samples are reported as euploid when they have been determined to contain the expected complement of chromosomes (“normal”), within the limits of testing. These embryos are considered at low risk of being chromosomally abnormal and they are suitable for transfer.

#### ANEUPLOID – NOT SUITABLE FOR TRANSFER

Samples are reported as aneuploid when they have been determined to contain a chromosome complement that differs from the expected complement of chromosomes (“abnormal”). These embryos are considered at high risk of being chromosomally abnormal and they are not suitable for transfer. Specific aneuploidies that may be detected are:

**Trisomy:** an extra copy of a chromosome

**Monosomy:** a missing copy of a chromosome

**Segmental:** a duplication (dup) or deletion (del) of a specific segment of a chromosome

#### MOSAIC – NOT RECOMMENDED FOR TRANSFER

Samples are reported as mosaic if a significant proportion of the cells are determined to contain a chromosome abnormality (greater than 20%, but less than 80%). Approximately 10% of samples may return a mosaic result. These embryos are considered at increased risk of adverse outcomes, and they are not recommended for transfer. However, they may be considered for transfer if you have no euploid embryos available for transfer and you understand and accept the associated risks. You will need an appointment with our Genetics Team prior to transfer.

Mosaic embryos are classified as:

**Low level mosaic:** 20-40% of cells contain a chromosome abnormality.

**High level mosaic:** 40-80% of cells contain a chromosome abnormality.



# INFORMATION SHEET




## PGT-A results

### COMPLEX ABNORMAL - NOT SUITABLE FOR TRANSFER

Samples are reported as complex abnormal when they contain three or more aneuploid chromosomes, some of which may be in the mosaic form. These embryos are considered at high risk of being chromosomally abnormal and they are **not suitable for transfer**.

### NO RESULT - SUITABLE FOR TRANSFER OR RE-BIOPSY

It is possible that the laboratory is unable to obtain any results for a particular sample. This can be due to a number of different factors. Approximately 1-3% of samples may return a “no result”. The chromosomal and risk status of any embryo with a “no result” should be considered unknown. You may choose to request transfer of a “no result” embryo. It may be possible to re-biopsy your embryo and re-test a new sample. If possible, re-biopsy and re-testing of a “no result” embryo can be performed at no additional cost to you.

Possible PGT-A results			
	Euploid	Mosaic	Aneuploid
Number of chromosomes per cell	Normal	Mixed (some normal and some abnormal)	Abnormal
Likelihood of producing a successful pregnancy	High	Low, but possible	Very unlikely
Recommended for transfer	Yes	No; provider may consider transfer if no euploid embryos available	No



CooperSurgical®  
Fertility Solutions