SELECT SYNDROME SCREEN℠ TEST

FOR CLINICIAN USE

Detects specific additional genetic abnormalities before embryo transfer.[1]

CooperSurgical®

Select Syndrome Screen℠: Progressing PGT-A

Detects specific additional genetic abnormalities before embryo transfer.[1]

Undetected microdeletions and microduplications may be associated with pregnancy loss, birth defects or developmental and intellectual disabilities.[2,3,4] Some chromosome abnormalities are below the resolution detectable with standard PGT-A.[5,6]

Select Syndrome Screen detects specific additional genetic abnormalities before embryo transfer, giving you and your patients:

- **More informed** embryo selection
- **Deeper insights** from the embryo biopsy
- **Additional** clinical impact

Early education between patients and clinicians may provide better discussions on reproductive options and potential outcomes.

Disorders we screen for

Select Syndrome Screen℠ is an optional test from CooperSurgical that includes **10 impactful genetic disorders*** that may significantly impact a child's health or development.[2,4]

- 1p36 deletion syndrome
- 2q33.1 deletion syndrome
- Angelman/Prader-Willi syndromes
- Cri-du-chat syndrome
- 22q11.2 deletion syndrome (DiGeorge/Velo-Cardio-Facial syndrome)
- Jacobsen syndrome
- Langer-Giedion syndrome
- Potocki-Lupski syndrome
- Smith-Magenis syndrome
- Wolf-Hirschhorn syndrome

* The test only screens for these 10 specific syndromes.

Find out early and offer more informed choices

More informed embryo prioritization

More sequencing power than other generally available PGT-A tests

Industry-leading test resolution

Detection of select critical syndromes

Commitment to continuous innovation

Our test is designed to detect specific microdeletion and microduplication syndromes that can be linked to: congenital abnormalities, intellectual disability, dysmorphic features or certain autism spectrum disorders.[2,4,7]

Microdeletions and microduplications are typically *de novo* events that can affect anyone, of any age, going through IVF.[8,9]

Select Syndrome Screen with PGT before pregnancy

Test Description	Detects specific additional genetic abnormalities[1]
Timing	Before embryo transfer[1]
Choices	Find out early and make informed choices

The targeted disorders in the Select Syndrome Screen test are estimated to occur in 1 in 1,000 live births[1,2**]

Harness the power of a comprehensive test with PGT-A and **Select Syndrome Screen** to receive insights on aneuploidy, mosaicism and select *de novo* errors.

* Prenatal occurrence may be higher.

** Analysis derived frompublished scientific literature.

What do my patient's results mean?

None Detected

The 10 syndromes were not detected in the embryo sample(s), indicating a reduced risk they are present.

Microdeletion/Microduplication Region Impacted

The designated chromosome abnormality was identified in the embryo sample(s). Follow-up with clinic is recommended.

Noninformative

The sample did not produce sufficient informative data points to meet reporting standards. This does not indicate an increased risk. Re-biopsy is not recommended.

Not Tested

Select Syndrome Screen is not performed when a haploid, polyploid or no-result is reported on PGT-A.

Next steps

For IVF patients – Recommend **PGT-A** and **Select Syndrome Screen**[SM].
For patients with results – Provide **education** on options.

For more information – Scan the **QR code** to visit our website or **contact our team**.

Select Syndrome Screen is a genetic test intended only as a screening tool, which is designed to evaluate embryos for certain syndromes or chromosomal abnormalities. It is not a diagnostic test and cannot detect all genetic or health conditions. Healthcare providers should review the test's indications, limitations, and potential risks and discuss these with their patients to determine whether the test is appropriate for the patient's individual circumstances.

Results for Select Syndrome Screen should be interpreted in the context of other clinical information and are subject to limitations such as mosaicism and technical variability. Medical guidelines and healthcare providers recommend that any pregnancy resulting from an embryo screened with this test undergo confirmatory diagnostic testing, such as chorionic villus sampling (CVS) or amniocentesis, to verify genetic status.

References

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