



GAMT_TEST_AR, GAMT_TEST1_AR

Health Card Number/Type NSO Episode Number:	e: NONE N20221004-XXXX	Date of Birth: Sex:	2022-09-19 08:00 FEMALE
Guardian's Name: Guardian's Phone Numbe Guardian's Address:	GAMT_MOM, GAMT_MOM1 r: 9999999999 OTTAWA, ONTARIO	Date of Referral: Feed Type: Transfusion: Gestational Age: Birth Weight:	2023-01-20 BREAST NO 39/5 (weeks/days) 3300g
	AMPLE PROVIDER SPITAL	Infant's HCP: Infant's HCP Phone:	EXAMPLE PROVIDER 9999999999
Referring Physician: Referral to: Screen Positive for: Treatment Centre:	Dr. Pranesh Chakraborty (Billing # 016047) Hematology Hemoglobinopathies (HGB) HHSC NBS CENTRE		
Case ID: CX	xxxx		

This letter confirms the phone call made to your office on 2023-01-20 in order to refer you the above-named infant.

This infant was screened on 2022-09-20 and was screen positive for a Hemoglobinopathy.

Newborn Screening Ontario is responsible for the confirmation of the diagnosis of Hemoglobinopathies. We would therefore appreciate your assistance in the diagnostic evaluation of this infant. Please send us the test results used to establish the infant's diagnosis by completing the retrieval confirmation and diagnostic evaluation report forms.

Thank you for your collaboration and please accept our kind regards.

Mulail.

Dr. Michael Geraghty, MBBS Medical Advisor OHIP Billing Number 015515

Dr. P. Chakraborty, MD, FRCPC, FCCMG Medical Director OHIP Billing Number 016047

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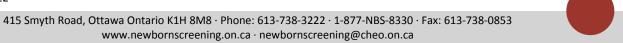
Health Card Number/Type:	NONE	Date of Birth:	2022-09-19 08:00
NSO Episode Number:	N20221004-XXXX	Date of Referral:	2023-01-20

SCREENING OUTCOMES

Test	Screening Result
Amino Acidemias:	
Phenylketonuria and Variants / Biopterin Defects	Negative
Maple Syrup Urine Disease	Negative
Homocystinuria (Hypermethionemias)	Negative
Citrullinemias / Argininosuccinic Aciduria	Negative
Tyrosinemias	Negative
Amino Acidopathies, other	Negative
Organic Acidemias:	
Propionic / Methylmalonic Acidemias	Negative
Isovaleric Acidemia / 2 Methylbutyric Acidemias	Negative
Glutaric Acidemia Type 1	Negative
Guanidinoacetate Methyltrasferase Deficiency	Negative
Organic Acidemias, other	Negative
Fatty Acid Oxidation Defects:	
Medium Chain Acyl Dehydrogenase Deficiency	Negative
Very Long Chain Acyl Dehydrogenase Deficiency	Negative
Long Chain Hydroxyl Acyl Dehydrogenase / Trifunctional Protein Deficiencies	Negative
Carnitine Uptake Defect	Negative
Fatty Acid Oxidation Disorders, other	Negative
Galactosemia	Negative
Biotinidase Deficiency	Negative
Endocrine Disorders:	
Congenital Hypothyroidism	Negative
Congenital Adrenal Hyperplasia	Negative
Sickle Cell and other Hemoglobinopathies	POSITIVE
Cystic Fibrosis	Negative
Severe Combined Immune Deficiency	Negative
Spinal Muscular Atrophy	Negative
Mucopolysaccharidosis Type 1H	Negative

SCREENING COMMENTS

Referred to HSC NBS Centre 416-813-7410





Transfusion:

Birth Weight:

Gestational Age:

NO

3300g

39/5 (weeks/days)



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Health Card Number/Type:	NONE	Date of Birth:	2022-09-19 08:00
NSO Episode Number:	N20221004-XXXX	Date of Collection:	2022-09-20 10:00
Guardian's Name:	GAMT_MOM, GAMT_MOM1	Date of Receipt:	2022-10-04
Guardian's Phone Number:	9999999999	Date of Report:	2023-01-20
Guardian's Address:	OTTAWA, ONTARIO		
		Sex:	FEMALE
		Feed Type:	BREAST

Submitter Unique Number: Submitting Facility: HOSPITAL

Case ID: CXXXXX

	%
FAST	5.2
Hb F+F1	84.4
Hb A	-
Hb S	8.1
Hb C	-
Hb D	-
Hb E	-
Hb X	-
Hemoglobin Pattern	FSX

Comments:

Screen positive for sickle cell (SS or S beta-thalassemia) disease. REVIEWED BY: Kowalski, Michael

Medical/Scientific oversight provided by:

Dr. Matthew P.A. Henderson, PhD, FCACB, FCCMG Laboratory Head of Biochemistry

Dr. P. Chakraborty, MD, FRCPC, FCCMG Medical Director

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Confidential Fax

SCREEN POSITIVE REFERRAL

То:	HHSC NBS CENTRE	From:	Newborn Screening Ontario	
Attention to	: Bob Dylan	Pages:	(including cover page)	
		Date:	2023-01-20	
Re:	_TEST_AR, GAMT_TEST1_AR 2022-09-19 08:00			

Newborn Screening Follow-Up Team,

As discussed, please find the referral on the above-named infant attached. This infant is screen positive for: **Hemoglobinopathies (HGB)**

Thank you for your collaboration and please accept our kind regards.

Newborn Screening Ontario (613) 738-3222 x1045 <u>RNSO@cheo.on.ca</u>

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