





Dear Ms. Doe,

Your sample for the analysis arrived on in the laboratory and was evaluated according to the highest laboratory quality standards. The results were evaluated and released by two independent geneticists and molecular biologists. After obtaining the results, your personal report was compiled. We hereby convey the results to you in the format of your choice.

We would like to thank you for your trust and hope that you are satisfied with our service. We are always open to questions and suggestions. Please do not hesitate to contact us. We value your feedback. This is the only way we can continuously improve our services.

We hope the analysis meets your expectations.

Kind regards,

Dr. Daniel Wallerstorfer BSc.  
Laboratory Director

Florian Schneebauer, MSc.  
Laboratory Manager

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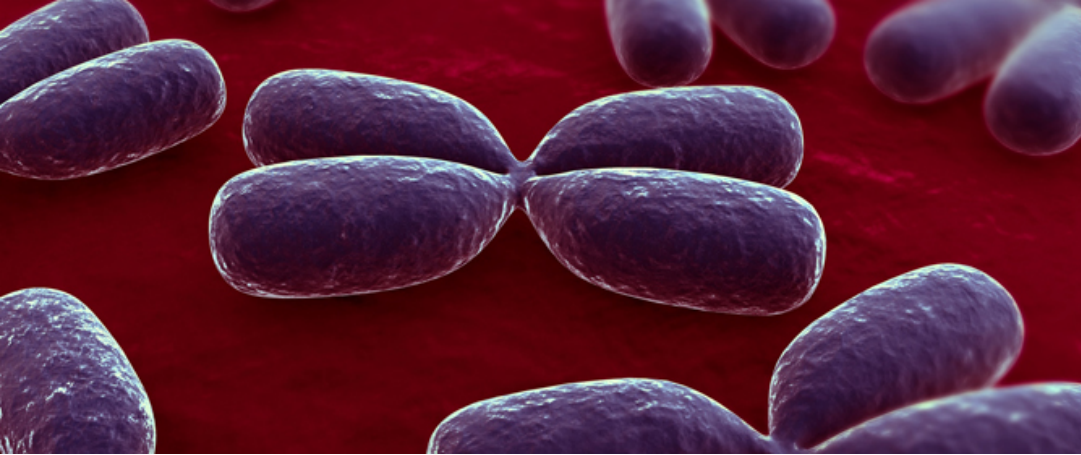
# Breast Health Sensor

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Personal analysis results for:  
**Jane Doe | Date of birth: 01/01/1990**

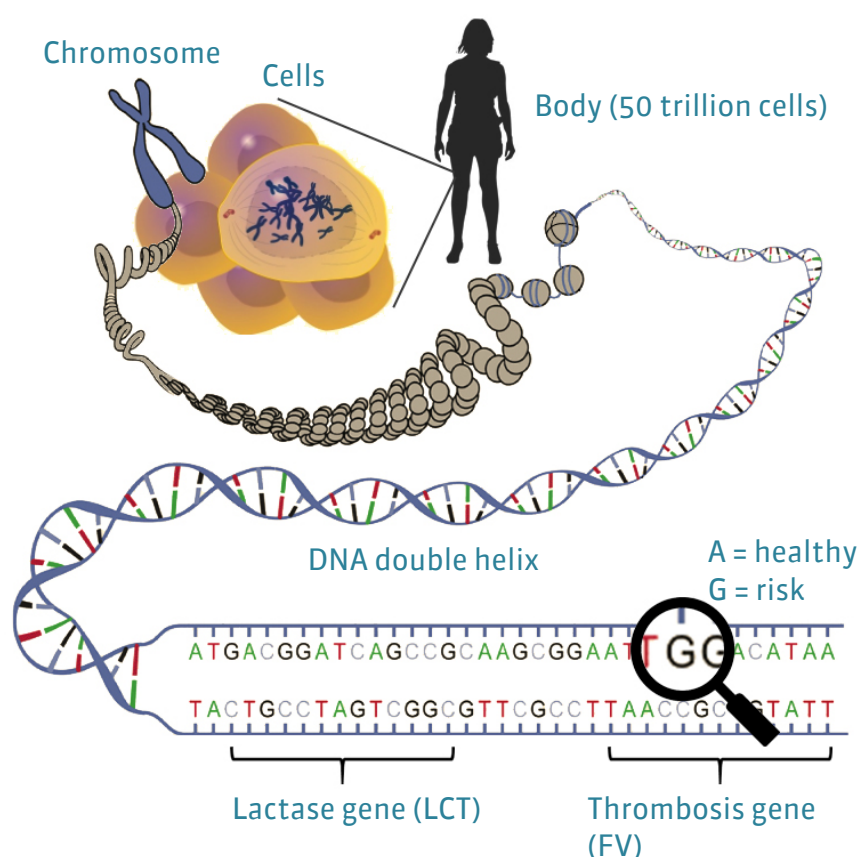
Order number:  
**DEMO\_DS**

**This report contains personal medical information that is highly confidential. Data protection must be ensured.**



## How genes influence our health

The human body consists of about 50 trillion individual cells. Most of these cells have a nucleus, which contains 46 chromosomes. A chromosome consists of a very closely wound thread, the DNA "double helix."



DNA, the genetic code, is the blueprint of the human body. This genetic code consists of approximately 3.1 billion molecules, which are each represented by a letter. About 1% of this code makes up the genes. Each gene is an instruction for the body, usually with a single function. For example, some genes tell the body how to colour the iris and differences in these genes produce different eye colors. Every function of the body is controlled by one or more genes, including the way we break down food or medication.

Our genes are not completely error-free. The genes of each person are altered slightly by environmental effects. Most of these changes have no effect but a small number have a harmful effect. An even tinier number can produce a beneficial effect. Parents pass these changes, including defects, to their children. Thus most of our genetic defects are inherited from our parents.

In addition, our genes evolved to help us live in a completely different world, and some of our genetic traits can interact with our modern environment to create negative effects on the body. For example, the genetic predisposition to store dietary fat quickly and lose it slowly is beneficial for people who go through times when food is scarce: they have a better chance of surviving because their bodies use fat efficiently and store it for later. However, in the modern world, this trait is harmful because it programs the body to gain weight quickly and lose weight

slowly. Genes increase our risk of heart attacks, trigger asthma and allergies, cause lactose intolerance, and many other disorders.

Genetic traits can affect our health. While some genetic defects cause disease in all cases, most genetic traits just increase our risk of developing a disease. For example, a person may have genes that increase their risk for diabetes. However, not everyone at risk for diabetes actually develops the disease. Furthermore, even people with a high risk of diabetes can lower their risk with the right diet and exercise plan. Other genetic traits only cause illness when they are triggered by a specific environmental feature. For example, lactose intolerance is a genetic condition that causes a person who drinks milk to have digestive issues. A lactose-intolerant person who never drinks milk will not have any symptoms.

Thanks to the latest technologies, it is now possible to test specific genes to determine if you have genetic traits that are linked to various diseases. Based on the results of the analysis, we can develop a prevention program that significantly reduces your personal disease risk and helps you stay healthy.

A healthy lifestyle will decrease your risk of many diseases whether or not you have specific information about your genetic traits. However, we provide you with additional information that may point out other changes to your lifestyle that are not part of the standard medical advice. There are many examples, but one of the traits we test for is a gene that increases your body's ability to absorb iron. If you have this trait, you must not take iron supplements as the iron would accumulate and cause a life-threatening disease called haemochromatosis.

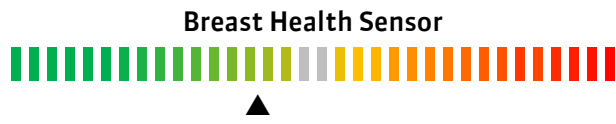
Experts estimate that every person carries about 2,000 genetic defects, which may affect their health, and in some cases, cause illnesses. A variety of factors can cause changes in our genes (also called mutations). In a few cases, these mutations can benefit us. However, the vast majority either have no effect or have a negative impact on our health. The best-known cause of mutations is radioactivity. Radioactive rays and particles actually impact the DNA in our cells and physically alter our genes. They mostly go unnoticed or cause deadly diseases, such as cancer, or congenital abnormality in newborns. Mutations are also caused by substances in burned food. The substances enter the cells and damage our genes, which can lead to colon cancer, among other forms of cancer. UV radiation from the sun can also damage our genes and cause diseases, such as skin cancer.

External influences can affect individual genes and disrupt their function, but the majority of our defective genes are inherited from our parents. Each embryo receives half of its genes from the father and half from the mother, resulting in a new human being with some characteristics of each parent. Whether a genetic defect is passed on, is determined randomly, and it may be that some of the children carry the defective gene and others do not.

Each person is the unique product of generations of accumulation and combination of different genetic traits. Some of those traits have negative effects on our health. With the latest technology, it is now finally possible to examine genes and determine personal health risks and strengths. In many cases, taking advantage of this knowledge, and following some precautionary measures, the diseases may be prevented. This is the next step in preventive medicine and a new generation of health care.

# Action index

Discuss risks marked in orange or red with your doctor. All other results do not require any further attention assuming there are no current medical conditions.







**PHARMACO GENETICS**

*Not ordered*

**ONCOLOGY**

**CARDIOVASCULAR SYSTEM**

*Not ordered*

**NEUROLOGY**

*Not ordered*

**METABOLISM**

*Not ordered*

**MOVEMENT**

*Not ordered*

**DIGESTION**

*Not ordered*

**OPHTHALMOLOGY**

*Not ordered*

**ODONTOLOGY**

*Not ordered*

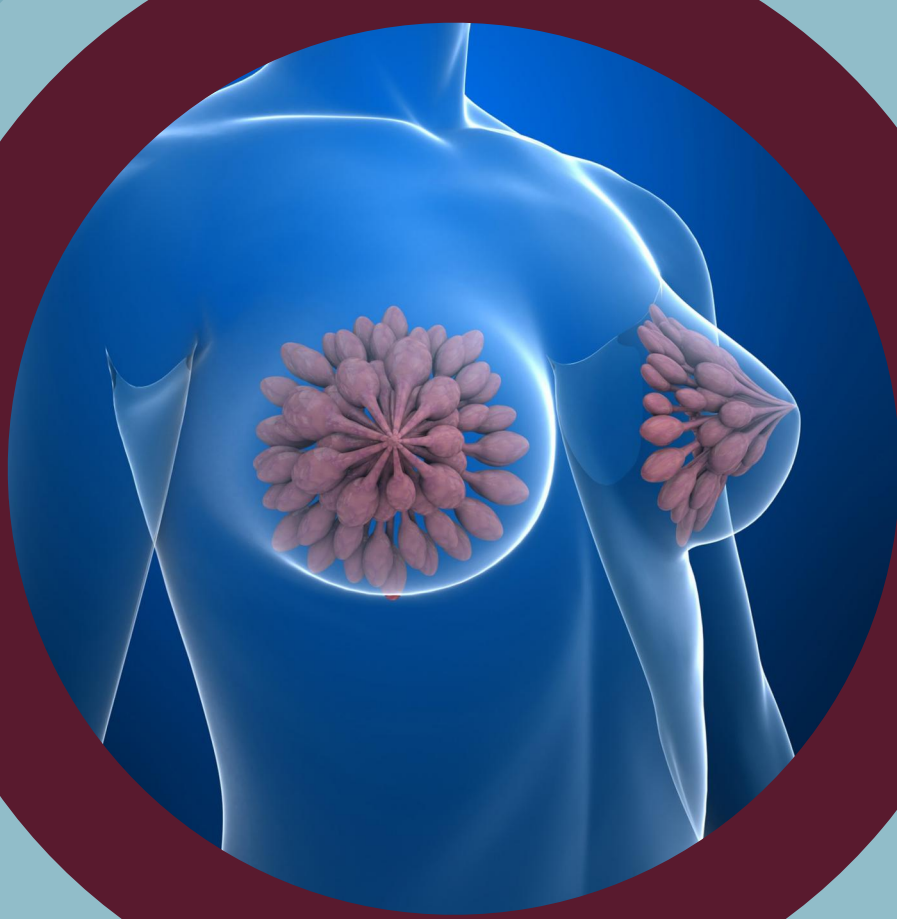
**OTHERS**

*Not ordered*

**SCIENCE**

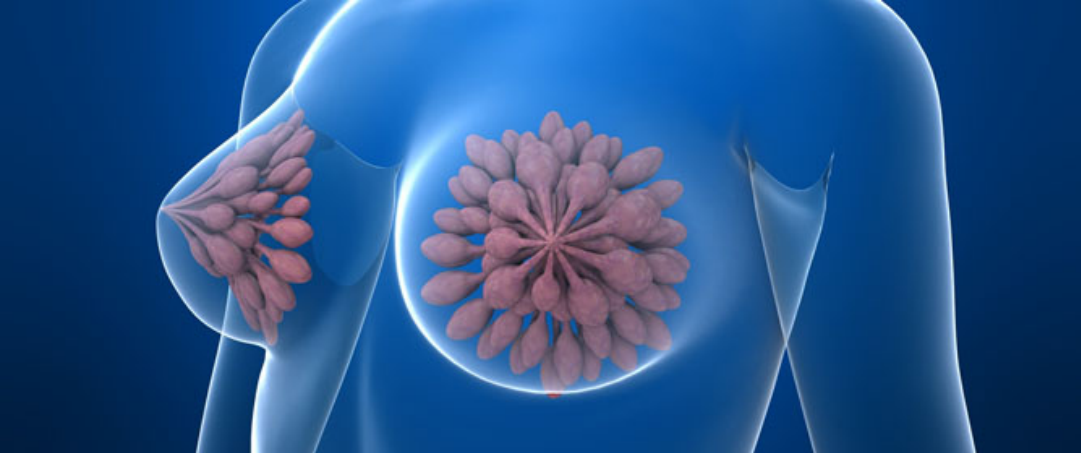
**ADDITIONAL INFORMATION**





# Breast Health Sensor

Effective prevention and treatment of breast cancer

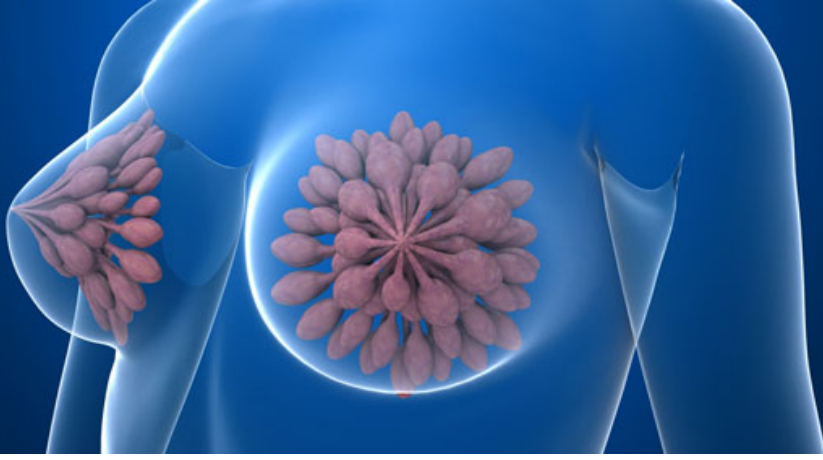


## Breast cancer

The number of breast cancer cases has almost doubled since 1970, but the treatment and observation measures have been so effective that the death rate is steadily decreasing. It is however, very important to reduce risk factors so that fewer cancers develop; today's modern genetic diagnostics provide opportunities to do this. Even people who have already been diagnosed with breast cancer will benefit from knowing the various risk factors that they are subject to, in order to eliminate as many risks as possible. Therefore, it is important to know your own genetic predispositions and to make specific lifestyle changes that will maximize the opportunity for a healthy life.

Most cases of breast cancer are caused by an unfortunate interaction of genetic predisposition and environmental triggers. Women who have a high risk of breast cancer are at an even higher risk if they follow an unhealthy lifestyle. It is important for women to know their genetic risk, and if necessary, to take preventive measures and/or make lifestyle changes.

Although some cases of breast cancer occur sporadically with age, it is estimated that genetic predisposition is responsible for about 58% of breast cancer cases. Ten genes associated with breast cancer can now be tested for traits that affect an individual's risk of disease. A person with a strong genetic predisposition to cancer can reduce their overall risk by adopting a balanced diet and avoiding other risk factors. Also, regular checkups will allow the early detection of the disease, and the timely treatment.



## Relevant genes for breast cancer

Several genetic variations have been identified, which when taken individually slightly increase or decrease the risk of breast cancer. Taken together, however, they have a significant impact on the risk probability. The analysis of relevant genetic variations came to the following conclusion:

Genetic traits			
SYMBOL	rs NCBI	POLYMORPH	GENOTYPE
FGFR2	rs2981582	G>A	C/C
VDR	rs2228570	VDR FokI T/C	T/C
8q24	rs13281615	T>C	G/A
TNRC9	rs3803662	C>T	C/C
MAP3K1	rs889312	A>C	A/C
LSP1	rs3817198	T>C	T/C
CASP8	rs1045485	D302H (G/C)	G/G
2q35	rs13387042	G>A	A/A
XRCC2	rs3218536	A>G	G/G
CYP1A2	rs762551	A>C	C/C

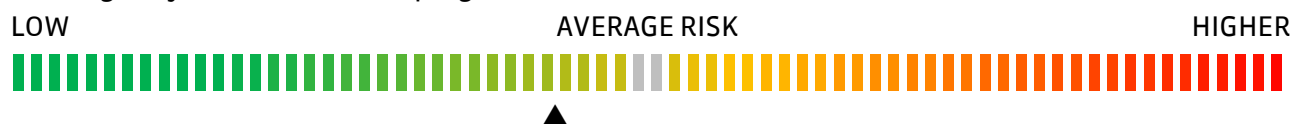
LEGEND: rsNCBI = description of examined genetic variation, POLYMORPHISM = form of the genetic variation, GENOTYPE = personal analysis result

# Summary of effects

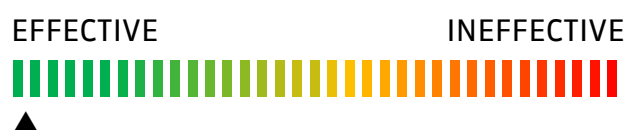
Here you can see a summary of the impact your genetic variations have on your health:

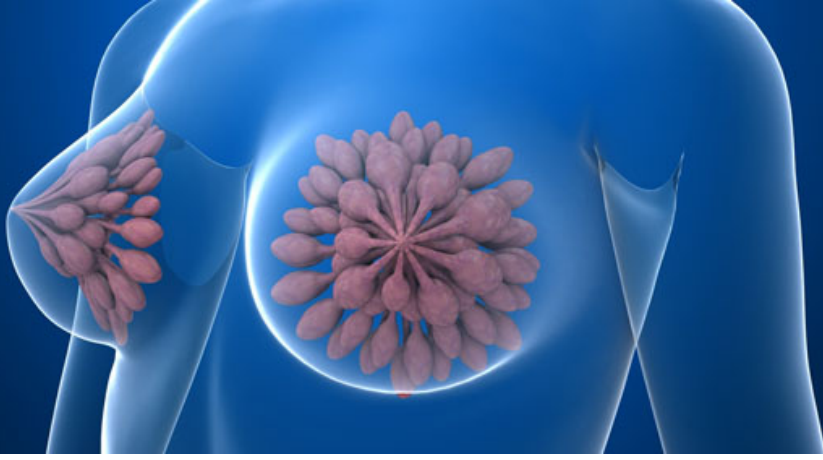
- Your risk of developing breast cancer is lower than the population average.
- 2-5 cups of coffee per day could delay the development of breast cancer by approximately 7 years

How high is your risk of developing breast cancer?



The effect of coffee on breast cancer





## Prevention

Based on your genetic profile, you have no higher risk for breast cancer than the average person.

While you do not have a high risk of developing breast cancer, some people with no genetic risk do develop cancer. Therefore, you should follow the usual preventive measures and self-examination. Every person should take the following steps to reduce their risk of breast cancer:

### Prevention

Lifestyle plays an important role in the development of breast cancer, and a significant amount of the risk of cancer is based on specific behaviour choices. You can take several steps to reduce your risk of breast cancer.

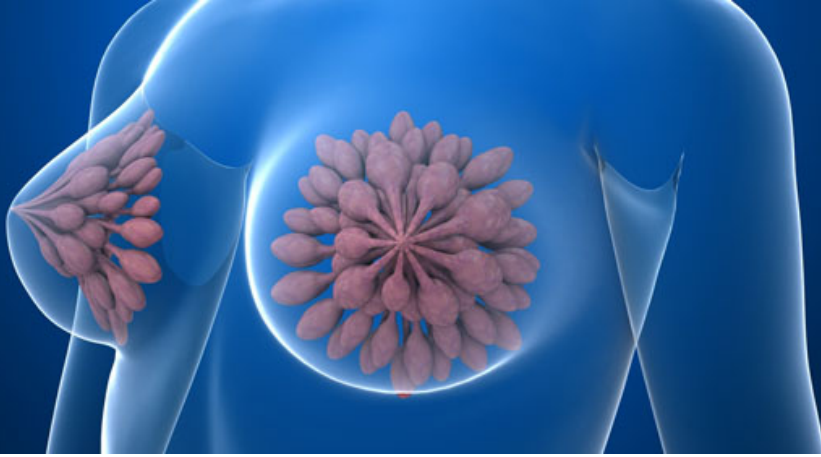
- Excess weight increases the risk of breast cancer 2.5 times. Maintaining a healthy weight is key to reducing your risk of breast cancer, along with many other diseases.
- Tobacco smoking is an equally important risk factor that increases the risk of breast cancer by about 30%, in addition to the many other health problems it causes. Consuming more than 20g of alcohol per day (about 120mL of red wine, or one glass) increases breast cancer risk by about 30% and should therefore be avoided.
- Vitamin D deficiency is a significant risk factor for breast cancer. Vitamin D is normally produced in the presence of UV-B rays from the sun, so deficiencies are more common in countries with limited sunlight or in people who are indoors most of the time. This deficiency is associated with a variety of cancer forms, and so an adequate uptake of vitamin D is highly recommended. Exercise outdoors as much as possible and make sure your diet contains sufficient quantities of vitamin D. Salmon, tuna and mackerel are some of the foods containing vitamin D. However, it is generally advisable to ensure an adequate intake with vitamin supplements.

### Early detection

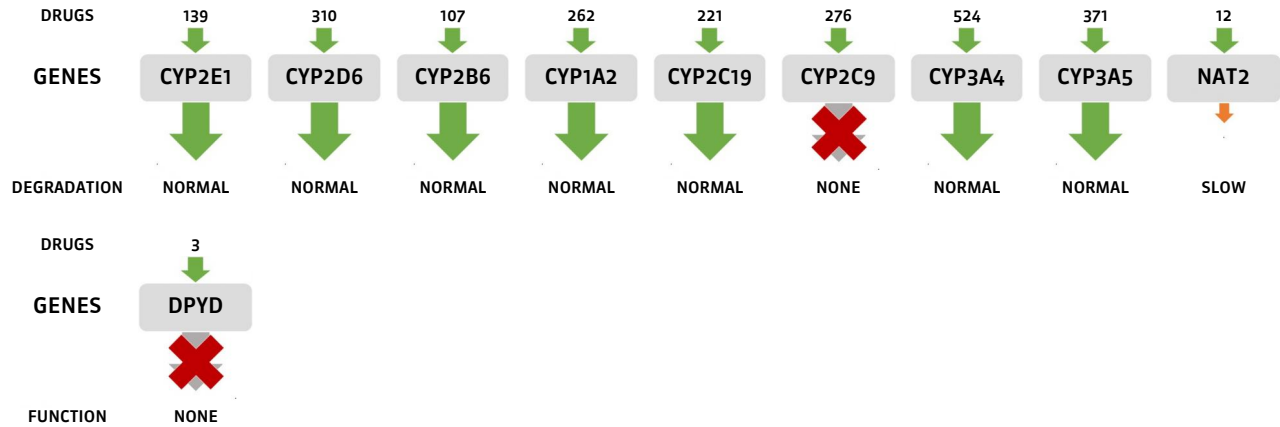
Early detection plays a significant role in every type of cancer, which is why women are encouraged to go for annual breast cancer checkups. Women with your genetic profile should follow the following routine checkups:

- From the age of 20, go for annual breast examinations.
- From the age of 20, perform regular self-examinations of the breast tissue.
- Examine the tissue of your breasts for hard inclusions.
- Should you detect a hard inclusion, talk to your doctor about it immediately.
- From the age of 40, have a mammogram performed every 1 to 2 years.

In this way, a possible cancer is detected immediately and treated in time.



## Drug compatibility






## Effect on relevant medication

	Effect	Breakdown	Dose
Alfentanil	✓	↑	↑
Buprenorphine	✓	↑	↑
Codeine	✓	✓	✓
Dolasetron	✓	✓	✓
Doxorubicin	✓	↑	↑
Erlotinib	✓	↑	↑
Exemestane	✓	↑	↑
Fulvestrant	✓	↑	↑
Goserelin	✓	✓	✓
Ifosfamide	↑	↑	↓
Ixabepilone	✓	✓	✓
Leuprorelin	✓	✓	✓
Megestrol	✓	✓	✓
Methoxyflurane	✓	✓	✓
Oxycodone	✓	↑	✓
Anastrozole	✓	✓	✓
Capecitabine	✓	✗	✗
Cyclophosphamide	✓	↑	↑
Domperidone	✓	✓	✓
Enflurane	✓	✓	✓
Etoposide	✓	↑	↑
Fentanyl	✓	↑	↑
Gefitinib	✓	↑	↑
Halothane	✓	✓	✓
Imatinib	↑	↑	↓
Lapatinib	✓	↑	↑
Levacetylmethadol	✓	↑	↑
Methadone	✓	↑	↑
Metoclopramide	✓	✓	✓
Paclitaxel	✓	✓	✓
Aprepitant	✓	↑	↑
Carboplatin	✓	✓	✓
Docetaxel	✓	↑	↑
Doxorubicin	✓	↑	↑
Epirubicin	✓	✓	✓
Everolimus	✓	↑	↑
Fluorouracil	✓	✗	✗
Gemcitabine	✓	✓	✓
Hydrocodone	✓	✓	✓
Isoflurane	✓	✓	✓
Letrozole	✓	↑	↑
Lidocain	✓	✓	✓
Methotrexate	✓	✓	✓
Nilutamide	✓	✓	✓
Paracetamol	✓	✓	✓

	Effect	Breakdown	Dose		Effect	Breakdown	Dose		Effect	Breakdown	Dose
Phenacetin	✓	✓	✓	Raloxifene	✓	✓	✓	Ropivacaine	✓	✓	✓
Sevoflurane	✓	✓	✓	Sorafenib	✓	↑	↑	Sunitinib	✓	↑	↑
Tamoxifen	✗	✗	✓	Tamoxifen	✗	✗	✓	Temsirolimus	✓	✓	✓
Teniposide	✓	↑	↑	Thiotepa	✓	✓	✓	Toremifene	✓	↑	↑
Tramadol	✓	↑	✓	Trastuzumab	✓	✓	✓	Vemurafenib	✓	✓	✓
Vinblastine	✓	↑	↑	Vinblastine	✓	↑	↑	Vincristine	✓	↑	↑
Vindesine	✓	↑	↑	Vinorelbine	✓	↑	↑	Zolmitriptan	✓	✓	✓

Please note: The right choice and dose of medication is always the responsibility of the doctor. Never make your own decision on whether to stop taking a medication or changing its dose!

### Legend:

- 
 Effect: Normal. Degradation: Normal. Recommendation: Normal dosage.
- 
 Effect: Normal. Degradation: Slower. Recommendation: Reduce the dosage.
- 
 Effect: Normal. Degradation: None. Recommendation: Alternative drug.
- 
 Effect: Lower. Degradation: Normal. Recommendation: Normal dosage.
- 
 Effect: Lower. Breakdown: Lower. Recommendation: Reduce the dosage.
- 
 Effect: Stronger. Degradation: Stronger. Recommendation: Normal dosage.



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**DIGESTION**

*Not ordered*

**OPHTHALMOLOGY**

*Not ordered*

**ODONTOLOGY**

*Not ordered*

**OTHERS**

*Not ordered*

**SCIENCE**

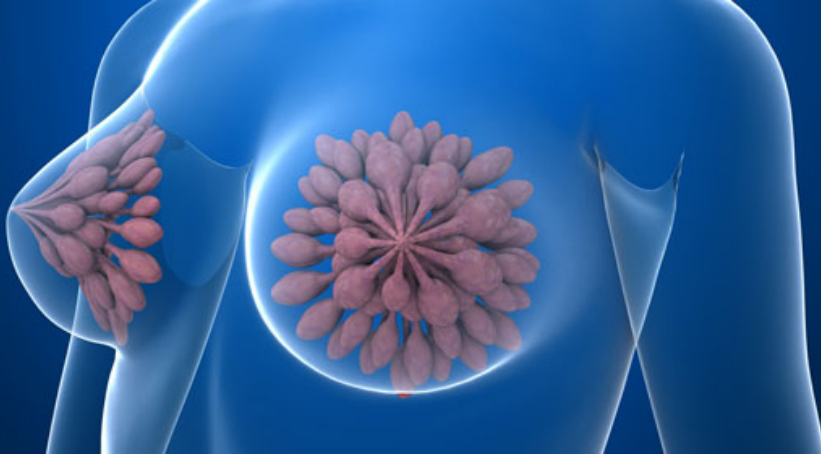
**ADDITIONAL INFORMATION**





# SCIENCE

This chapter shows the science behind the test.



## Breast Health Sensor

### FGFR2 - fibroblast growth factor receptor 2 (rs2981582)

The receptor protein FGFR2 (fibroblast growth factor receptor 2) is a member of the fibroblast growth factor receptor family, which, among other functions, plays an important role in angiogenesis, wound healing, embryonic development, and various endocrine signaling pathways. Mutations in the FGFR2 gene can affect both bone growth and the development of cancer. It has been repeatedly shown that the carriers of the T-allele have an increased risk of breast cancer.

RES	Genotype	POP	Possible results
	T/T	17%	Increased risk of breast cancer (OR: 1.63)
	C/T	48%	Increased risk of breast cancer (OR: 1.23)
X	C/C	36%	No increased risk of breast cancer

#### References

A genome-wide association study identifies alleles in FGFR2 associated with risk of sporadic postmenopausal breast cancer. Hunter DJ et al, Nat Genet. 2007 Jul,39(7):870-4. Epub 2007 May 27

Low penetrance breast cancer predisposition SNPs are site specific. Mcinerney et al. Breast Cancer Res Treat. 2009 Sep,117(1):151-9. Epub 2008 Nov 13.

Heterogeneity of breast cancer associations with five susceptibility loci by clinical and pathological characteristics. Garcia-Closas et al. PLoS Genet. 2008 Apr 25,4(4):e1000054.

Common Genetic Variants Associated with Breast Cancer and Mammographic Density Measures That Predict Disease. Cancer Res 2010,70:1449-1458. February 9, 2010.

### VDR - vitamin D (1,25- dihydroxyvitamin D3) receptor (rs2228570)

The VDR gene encodes the vitamin D receptor, which is part of the steroid receptor family. It is a transcription factor that regulates the activity of specific target genes and thus affects the metabolism. The rs2228570 polymorphism is associated with an increased risk of breast cancer.

RES	Genotype	POP	Possible results
	T/T	13%	Increased risk of breast cancer (OR: 1.57)
X	C/T	41%	Increased risk of breast cancer (OR: 1.27)
	C/C	47%	No increased risk of breast cancer

#### References

Anderson et al. Vitamin D-related genetic variants, interactions with vitamin D exposure, and breast cancer risk among Caucasian women in Ontario. Cancer Epidemiol Biomarkers Prev. 2011 Aug,20(8):1708-17.

McKay et al. Vitamin D receptor polymorphisms and breast cancer risk: results from the National Cancer Institute Breast and Prostate Cancer Cohort Consortium. Cancer Epidemiol Biomarkers Prev. 2009 Jan,18(1):297-305.

Barroso et al. Genetic analysis of the vitamin D receptor gene in two epithelial cancers: melanoma and breast cancer case-control studies. BMC Cancer. 2008 Dec 23,8:385.

## 8q24 (rs13281615)

The human chromosome segment 8q24 contains risk loci for various epithelial cancers, such as breast, prostate or colon cancer. A variety of studies have shown that the polymorphism of Rs13281615 increases the risk of breast cancer.

RES	Genotype	POP	Possible results
	A/A	27%	No increased risk of breast cancer
X	A/G	48%	No increased risk of breast cancer
	G/G	25%	Increased risk of breast cancer (OR: 1.38)

### References

Garcia-Closas et al. Heterogeneity of breast cancer associations with five susceptibility loci by clinical and pathological characteristics. PLoS Genet. 2008 Apr 25

Mcinerney et al. Low penetrance breast cancer predisposition SNPs are site specific. Breast Cancer Res Treat. 2009 Sep,117(1):151-9.

Odefrey et al. Common Genetic Variants Associated with Breast Cancer and Mammographic Density Measures That Predict Disease. Cancer Res 2010,70:1449-1458.

## TNRC9 - tenascin R (rs3803662)

The protein encoded by the TNCR9 gene (or TOX3) is a transcription factor that belongs to the family of HMG-box proteins. These proteins can bind DNA and alter the chromatin structure. The mutation of the TNCR9 gene (rs3803662) is one of the most important cancer-associated polymorphisms.

RES	Genotype	POP	Possible results
	T/T	22%	Increased risk of breast cancer (OR: 1.64)
	T/C	44%	Increased risk of breast cancer (OR: 1.23)
X	C/C	34%	No increased risk of breast cancer

### References

Stacey et al. Common variants on chromosomes 2q35 and 16q12 confer susceptibility to estrogen receptor-positive breast cancer. Nat Genet. 2007 Jul,39(7):865-9.

Mcinerney et al. Low penetrance breast cancer predisposition SNPs are site specific. Breast Cancer Res Treat. 2009 Sep,117(1):151-9.

Garcia-Closas et al. Heterogeneity of breast cancer associations with five susceptibility loci by clinical and pathological characteristics. PLoS Genet. 2008 Apr 25

## MAP3K1 - Mitogen-activated protein kinase kinase kinase 1, E3 ubiquitin protein ligase (rs889312)

The protein encoded by this gene is a serine/threonine kinase and is part of various signal transduction cascades. The polymorphism Rs889312 is located close to the MAP3K1 gene and a comprehensive genome-wide association study associated it with an increased breast cancer risk.

RES	Genotype	POP	Possible results
	A/A	39%	No increased risk of breast cancer
X	A/C	45%	Increased risk of breast cancer (OR: 1.13)
	C/C	16%	Increased risk of breast cancer (OR: 1.27)

### References

Huijts et al. Clinical correlates of low-risk variants in FGFR2, TNRC9, MAP3K1, LSP1 and 8q24 in a Dutch cohort of incident breast cancer cases. Breast Cancer Research 2007, 9:R78

Couch et al. Association of Breast Cancer Susceptibility Variants with Risk of Pancreatic Cancer. Cancer Epidemiol Biomarkers Prev. 2009 November 18(11): 3044-3048.

Easton et al. Genome-wide association study identifies novel breast cancer susceptibility loci. Nature. 2007 June 28, 447(7148): 1087-1093.

## LSP1 - Lymphocyte-specific protein 1 (rs3817198)

The protein LSP1 (Lymphocyte-specific protein 1) is expressed in lymphocytes, neutrophils, macrophages and endothelium, and it is involved in many regulatory processes. A genome-wide association study, analyzing 4000 breast cancer specimens, has shown that carriers of the rs3817198 polymorphism have an increased risk of breast cancer.

RES	Genotype	POP	Possible results
	T/T	63%	No increased risk of breast cancer
X	T/C	31%	Increased risk of breast cancer (OR: 1.06)
	C/C	6%	Increased risk of breast cancer (OR: 1.17)

### References

Odefrey et al. Common Genetic Variants Associated with Breast Cancer and Mammographic Density Measures That Predict Disease. *Cancer Res* 2010,70:1449-1458.

Long et al. Evaluation of Breast Cancer Susceptibility Loci in Chinese Women. *Cancer Epidemiol Biomarkers Prev.* 2010 September 19(9): 2357–2365.

Easton et al. Genome-wide association study identifies novel breast cancer susceptibility loci. *Nature.* 2007 June 28, 447(7148): 1087–1093.

## CASP8 - Caspase 8, apoptosis-related cysteine peptidase (rs1045485)

The caspases are a family of proteases and they are the most important enzymes in carrying out the cell death process (apoptosis). In addition to apoptosis, caspases are also involved in the development of the red blood cells and myoblasts. Mutations and the resulting defective caspases are involved in the development of tumours.

RES	Genotype	POP	Possible results
	C/C	0%	No increased risk of breast cancer
	C/G	10%	Increased risk of breast cancer (OR: 1.2)
X	G/G	90%	Increased risk of breast cancer (OR: 1.35)

### References

Cox et al. A common coding variant in CASP8 is associated with breast cancer risk. *Nat Genet.* 2007 Mar,39(3):352-8. Epub 2007 Feb 11.

Shepard et al. A breast cancer risk haplotype in the caspase-8 gene. *Cancer Res.* 2009 April 1 69(7): 2724–2728.

Couch et al. Association of Breast Cancer Susceptibility Variants with Risk of Pancreatic Cancer. *Cancer Epidemiol Biomarkers Prev.* 2009 November 18(11): 3044–3048.

## 2q35 (rs13387042)

The polymorphism rs13387042 on the 2q35 region is associated with an increased risk of breast cancer.

RES	Genotype	POP	Possible results
X	A/A	29%	Increased risk of breast cancer (OR: 1.44)
	A/G	37%	Increased risk of breast cancer (OR: 1.22)
	G/G	34%	No increased risk of breast cancer

### References

Reeves et al. Incidence of breast cancer and its subtypes in relation to individual and multiple low-penetrance genetic susceptibility loci. *JAMA.* 2010 Jul 28,304(4):426-34.

Stacey et al. Common variants on chromosomes 2q35 and 16q12 confer susceptibility to estrogen receptor-positive breast cancer. *Nat Genet.* 2007 Jul,39(7):865-9.

Odefrey et al. Common Genetic Variants Associated with Breast Cancer and Mammographic Density Measures That Predict Disease. *Cancer Res* 2010,70:1449-1458.

## XRCC2 - X-ray repair complementing defective repair in Chinese hamster cells 2 (rs3218536)

The XRCC2 protein belongs to the RecA/Rad51-related protein family, and it is involved in the homologous recombination and repair of DNA. Studies have shown that the rs3218536 polymorphism has a protective effect against the development of breast cancer.

RES	Genotype	POP	Possible results
	A/A	90%	No increased risk of breast cancer
	G/A	9%	Increased risk of breast cancer (OR: 2.67)
X	G/G	1%	Increased risk of breast cancer (OR: 3.33)

### References

Lin et al. A role for XRCC2 gene polymorphisms in breast cancer risk and survival. J Med Genet. Author manuscript, available in PMC Feb 24, 2014.

Silva et al. Breast cancer risk and common single nucleotide polymorphisms in homologous recombination DNA repair pathway genes XRCC2, XRCC3, NBS1 and RAD51. Cancer Epidemiol. 2010 Feb,34(1):85-92.

Pooley et al. Common single-nucleotide polymorphisms in DNA double-strand break repair genes and breast cancer risk. Cancer Epidemiol Biomarkers Prev. 2008 Dec,17(12):3482-9.

## CYP1A2 - cytochrome P450, family 1, subfamily A, polypeptide 2 (rs762551)

CYP1A2 (cytochrome P450 1A2) is a heme protein- enzyme involved in various metabolic processes. It metabolizes various xenobiotics such as caffeine, aflatoxin B1 and medications like paracetamol.

RES	Genotype	POP	Possible results
	A/A	41%	The consumption of 2 or more cups of coffee per day delays the appearance of breast cancer by approximately 7 years.
	A/C	43%	Coffee consumption does not delay the appearance of breast cancer
X	C/C	16%	Coffee consumption does not delay the appearance of breast cancer

### References

Bågeman et al. Coffee consumption and CYP1A2\*1F genotype modify age at breast cancer diagnosis and estrogen receptor status. Cancer Epidemiol Biomarkers Prev. 2008 Apr,17(4):895-901.

LEGEND: RES = your personal analysis result (marked with an X), GENOTYPE = different variations of the gene (called alleles),

POP = percent of the general population that have this genetic result,

POSSIBLE RESULTS = influence of the genetic variation.



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**OPHTHALMOLOGY**

*Not ordered*

**ODONTOLOGY**

*Not ordered*

**OTHERS**

*Not ordered*

**SCIENCE**

**ADDITIONAL INFORMATION**



## **ADDITIONAL INFORMATION**

In this chapter you will receive useful information



**CERTIFICATIONS**

## Certifications

Our laboratory is one of the most modern and automated laboratories in Europe and has numerous certifications and quality assurance systems that meet, and even exceed, international standards. The various areas of business are certified separately to the highest standards.

### Laboratory diagnostics, manufacturing & sales

Quality management system in accordance with ISO 9001:2015



### Licensed for medical genetics

Approved by the Federal Ministry of Health, Austria



### Cosmetic/genetic diagnostics and cosmetics manufacturing

Good manufacturing practice (GMP) in accordance with ISO 22716:2007



### Food supplement manufacturing

Management system for food safety in accordance with ISO 22000:2018







## Customer Service

### Questions or comments about our service?

Our customer service team is happy to help with any enquiries or problems. You can contact us in the following ways:

- Phone +41 (0) 41 525 100.1
- [office.ch@progenom.com](mailto:office.ch@progenom.com)

Our team is looking forward to your call. Customer satisfaction is our first priority. If you are not fully satisfied with our service, please let us know. We will do our best to help find a satisfactory solution to your problem.

**Contact | Impressum**  
ProGenom GmbH  
Riedstrasse 1  
6343 Rotkreuz  
SWITZERLAND



## Technical details

### Order number

DEMO\_DS

### Date of birth

01/01/1990

### Established analysis methods

qRT-PCR, DNA sequencing, fragment length analysis, CNV assay, GC-MS, Immunocap ISAC, Cytolisa

### Report generated

19/03/2021 17:47:49

### Product codes

M7BRE

### Current version

V538

### Ordering company

ProGenom GmbH  
Riedstrasse 1  
6343 Rotkreuz  
SWITZERLAND

### Analyzing company

DNA Plus - Zentrum für Humangenetik  
Georg Wrede Strasse 13  
83395 Freilassing  
Deutschland

### Laboratory Director

Dr. Daniel Wallerstorfer Bsc.

### Laboratory Manager

Florian Schneebauer, MSc.

**NOTES:**









**Breast Health Sensor**

Jane Doe  
DEMO\_DS