



CentoNIPT[®]
Expertise You Can Trust



CentoNIPT

Illumina VeriSeq™
NIPT Solution v2*

CentoNIPT® offers genetic, non-invasive prenatal testing (NIPT) to screen for the most common fetal chromosomal abnormalities (Trisomy 21, Trisomy 18, Trisomy 13 and sex chromosomes). Our test combines the latest next generation sequencing technology with expert medical reporting.

- Unmatched safety for mother and developing fetus compared to current invasive testing methods
- Highly accurate results
- Comprehensive reporting by our expert medical team
- Test from as early as 10 gestational weeks
- Only 9 ml of blood from the mother required
- CAP and CLIA accreditation with fully validated workflows for sample analysis
- Results within 5 business days
- Analysis of twins (monozygotic and dizygotic) is also possible **

* Sample preparation and analysis software are CE-IVD marked.

** Gonosomal aneuploidies cannot be detected for twin pregnancies.



Expertise You Can Trust

Conventional prenatal testing for fetal chromosomal abnormality involves either chorionic villus sampling or amniocentesis. These procedures are highly invasive and carry an elevated risk of miscarriage. Despite this risk they are standard practice in most of the world because of their high levels of accuracy and the range of abnormalities they can detect.

With CentoNIPT, CENTOGENE now offers **non-invasive prenatal testing** that provides **fast** and **accurate screening** for the most common **prenatal chromosomal abnormalities**.

CentoNIPT is performed on a single maternal blood sample and combines the latest next generation sequencing technology with the highest quality medical reporting. It provides unparalleled accuracy and detection compared to other non-invasive testing methods – ultrasonography or nuchal translucency testing.

Our medical expertise is ideally suited to provide you and your patients with reliable, well supported interpretations of results.

Fetal Chromosomal Abnormalities

Approximately 1% of all babies will be born with a chromosomal abnormality which can cause physical disability and/or mental retardation. Roughly 70% of syndromic chromosomal abnormalities are due to Trisomy T21, T18 or T13 and 10% by Turner syndrome (Monosomy X). The risk of Trisomy increases significantly with maternal age.

Fast & Accurate Results

Our optimized workflows enable comprehensive, high-quality medical reports with validated results within 5 business days.

High Sensitivity & Specificity

CentonIPT combines next generation sequencing with integrated measurement of fetal fraction, even for fetal fractions less than 4%. This results in the lowest technical failure rate and eliminates unnecessary invasive testing as follow-up of NIPT.

The CENTOGENE Advantage

CENTOGENE offers a comprehensive package starting with NIPT for most common chromosome aneuploidies to prenatal whole exome/whole genome sequencing. After birth, we offer biomarker testing and our whole genetic test portfolio including specialized genetic analysis for critically ill newborns on ICU.

Fetal Chromosomal Abnormalities



Do you already have a CentoNIPT box?
– just contact us –

Prepare the maternal sample using your individual CentoNIPT box

Select your test at CentoPortal® by using the NI code of your CentoNIPT blood collection tube

Package and ship the sample in your CentoNIPT box – for free

TRISOMIES	SENSITIVITY	SPECIFICITY
Trisomy 21 (Down syndrome)	> 99.9%	99.9%
Trisomy 18 (Edwards syndrome)	> 99.9%	99.9%
Trisomy 13 (Patau syndrome)	> 99.9%	99.9%

SEX CHROMOSOME ANEUPLOIDIES & FETAL GENDER	CONCORDANCE WITH CYTOGENETIC RESULTS
XX	100.0%
XY	100.0%
X0 (Turner syndrome)	90.5%
XXX (Triple X syndrome)	100.0%
XXY (Klinefelter syndrome)	100.0%
XYY (Jacobs syndrome)	91.7%

Results and Limitations of the Test

CentoNIPT screens for chromosome aneuploidies (chromosomes 21, 18, and 13, X and Y) in single and twin pregnancies from the 10th gestational week. Fetal gender can be determined by the test for singleton pregnancies, for twin gestations only the presence of Y chromosomes can be determined. Although CentoNIPT is highly effective for detecting the aforementioned fetal chromosomal abnormalities, a pregnancy may still be associated with other chromosomal abnormalities, birth defects or complications.



Sample processing
and results within 5
business days



Download
your report

Any Questions?
Please Contact Us.

FOR ORDERING

www.centoport.com

FOR MORE INFORMATION

www.centogene.com

CENTOGENE GmbH

Am Strande 7
18055 Rostock
Germany

CENTOGENE GmbH is a subsidiary of CENTOGENE N.V.

PARTNER SUPPORT

✉ customer.support@centogene.com

☎ +49 (0) 381 80 113-416

FOR US PARTNERS

✉ customer.support-us@centogene.com

☎ +1 (617) 580-2102

Note: CentoNIPT is unavailable in the U.S.

The information and views set out in this brochure are those of the author to the best of its knowledge and belief, using professional diligence. Neither the author nor CENTOGENE nor any person acting on their behalf may be held responsible for the use, interpretation, deductions, inferences, generalizations or further communication which may be made of, in connection with or as a result of the information, data and/or facts contained in this brochure. No warranty, neither expressed nor implied, is given and no legal liability or responsibility shall evolve for the accuracy, completeness or usefulness of any information, data and/or facts disclosed and shown in this brochure.

Noninvasive prenatal testing (NIPT) based on cell-free DNA analysis from maternal blood is a screening test; it is not diagnostic. Test results must not be used as the sole basis for diagnosis. Further confirmatory testing is necessary prior to making any irreversible pregnancy decision. CentoNIPT® and CENTOGENE®, any associated logos, and all associated CENTOGENE® registered or unregistered trademarks are the property of CENTOGENE GmbH. All third-party marks –® and ™ – are the property of their respective owners. Illumina® and the Powered by Illumina™ logo are trademarks of Illumina, Inc. in the U.S. and other countries.



Rostock - CLIA #99D2049715



Cambridge - CLIA #22D2154474

