**(Abstracts must be 200 words or less)**

**Model 1:**

**Abstract Title: Identification of at-risk reproductive couples via expanded carrier testing at a commercial laboratory**

Authors List

Affiliation

**Introduction:** One of the purposes of genetic carrier testing is to identify individuals and reproductive couples who are at increased risk for having offspring with a heritable genetic disease.

**Objective:** This research aims to quantify the number of at-risk reproductive couples identified via carrier testing at a commercial laboratory. In addition, this study will report the most commonly identified at-risk diseases.

**Materials & Methods:** This is a retrospective database review which identified 1,877 know reproductive couples referred for carrier testing at a commercial laboratory. Test results were reviewed, and at-risk couples were quantified. A subset of the cohort was referred from a single practice utilizing a routine expanded carrier testing approach.

**Results:** Of the 1,877 confirmed reproductive couples, 208 (11.1%) were classified as at-risk based on their carrier testing results. Of the 387 reproductive couples referred from a single practice 75 (19.4%) were at-risk.

**Conclusion:** The number of genes tested when pursuing carrier testing affects the chance of identifying at-risk reproductive couples. A routine expanded carrier testing protocol may yield a 19.4% rate of at-risk reproductive couples. Routinely applying expanded carrier testing and partner testing is a best practice for maximizing the identification of at-risk reproductive couples.

**Biography**

**(Less than 200 words)**

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**Model 2:**

**Abstract Title: Refractory Thyroid Storm in a Pediatric Patient**

Authors List

Affiliation

Thyroid storm (TS) is a rare but life-threatening multisystem endocrine emergency complicating hyperthyroidism. Clinical manifestations are non-specific; therefore, a high index of suspicion is needed to ensure prompt recognition and timely intervention to prevent significant end-organ damage and mortality. While supportive care and specific antithyroid therapy remain the cornerstone of treatment, it is also important to concurrently search for and treat precipitating factors of TS.

Refractory TS with homeostatic decompensation not responsive to conventional therapy requires interdisciplinary and aggressive multifaceted treatment measures in its management. Facilities or centers that are not equipped with resources to adequately care for these critically ill patients should consider immediate transfer to tertiary centers having the required expertise and resources. A collaborative approach is needed to survive this storm. Do not face the storm all by yourself!

**Keywords:** Thyroid Storm, Refractory, Pediatric, Endocrine, Emergency

**Biography**

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