LABORATORY REPORT

Redcliffe labs

Patient Name		Bill Date	:
DOB/Age/Gender	: 52 Y/Male	Sample Collected	:
Patient ID / UHID		Sample Received	:
Referred By		Report Date	:
Sample Type	: Whole blood EDTA	Barcode No	
Client		Report Status	: Final Report

SPECIAL ASSAY REPORT

Acute Leukemia Diagnostic Panel By Flowcytometry

Result

Marker	Intensity	Interpretation
T- Cell Markers		
CD3	N/A	Negative
CyCD3	N/A	Negative
CD5	N/A	Negative
CD7	N/A	Negative
B Cell Markers		
CD19	N/A	Negative
CD10	N/A	Negative
CD22	Dim	Positive
Myeloid & Monocytic Markers		
CD13	**Heterogeneous**	**Positive**
CD14	Dim	Positive
CD16	N/A	Negative
CD33	**Moderate**	**Positive**
CD36	Dim	Positive
CD64	Dim	Positive
CD117	Partial dim	Positive
CD11b	N/A	Negative
MPO	Partial dim	Positive
Others		
CD34	**Moderate**	**Positive**
CD38	Dim	Positive
CD45	Dim	Positive
CD56	N/A	Negative
HLADR	Dim	Positive
TdT	N/A	Negative

Specimen Type: - Peripheral blood sample showed TLC – 38,200 cells/µl.

Instrument / Software: BD FACS Canto / BD FACS DIVA

Cell Preparation Method: Stain – Lyse- Wash

SSC Vs CD19/CD20 Gating.

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Flowcytometric analysis shows a cluster in CD45 dim to moderate region with low side scatter. Gated events in blast (48.0% of Acquired Events) region show moderate expression of CD34, CD38 dim expression of CD14, CD22, CD36, CD38, CD64, HLADR, heteorgenous expression of CD13, partial dim expression of CD117, MPO and rest of the markers are negative.

Impression:

The scatter parameters and antigen expression profile as studied by flow cytometry of the sample are suggestive of **Acute Myeloid Leukemia, AML with monocytic differentation.**

Aberrancy detected- CD22

Correlation with clinical, cytogenetic and other hematological parameters is advised.

Comment: -Advised Karyotyping, AML Comboquest IX (AML ETO, inv16, PML RARa,FLT3, NPM1 and CEBPA)/NGS Myeloid panel for risk stratification.

Reference NCCN Guidelines 2023 /ELN risk stratification by Genetics in AML

RISK CATEGORY	GENETIC ABNORMALITY
FAVOURABLE	t(8;21)(q22;q22.1); RUNX1-RUNX1T1,Inv(16)(p13.1q22) or t(16;16)(p13.1;q22); CBFB-MYH11,Mutated NPM1 without FLT3-ITD or with FLT3-ITDlow , Biallelic mutated CEBPA
INTERMEDIATE	Mutated NPM1 and FLT3-ITDhigh,Wild type NPM1 without FLT3-ITD or with FLT3-ITDlow, T(9;11) (p21.3;q23.3); MLLT3-KMT2A,Cytogenetic abnormalities not classified as favourable or adverse
POOR/ADVERSE	t(6;9)(p23;q34.1); DEK-NUP214,t(v;11q23.3); KMT2A rearranged,t(9;22)(q34.2;q11.2); BCR-ABL1,inv(3) (q21.3q26.2) or t(3;3)(q21.3;q26.2); GATA2, MECOM(EVI1),-5 or del(5q); -7; -17/abn (17p),Complex karyotype, monosomal karyotype,Wild type NPM1 and FLT3-ITD,Mutated RUNX1,Mutated ASXL1,Mutated TP53

Note:

All investigations have their limitations which are imposed by the limits of sensitivity and specificity of individual assay procedures as well as the quality of the specimen received by lab. Isolated laboratory investigations never confirm the final diagnosis of the disease. They only help in arriving at a diagnosis in conjunction with clinical presentation and other related investigations.

NOTE- **This test is processed and validated at the partner lab of Redcliffe Labs.

Terms and Conditions of Reporting

1. The presented findings in the Reports are intended solely for informational and interpretational purposes by the referring physician or other qualified medical professionals possessing a comprehensive understanding of reporting units, reference ranges, and technological limitations. The laboratory shall not be held liable for any interpretation or misinterpretation of the results, nor for any consequential or incidental damages arising from such interpretation.

2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.

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