

Client
Gurugram
 Pathkind Diagnostics Pvt. Ltd.
 Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Processed By
Pathkind Diagnostics Pvt. Ltd.
 Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Name : Mr. FC33	Billing Date : 07/07/2023 12:23:56
Age : 35 Yrs	Sample Collected on : 10/07/2023 10:01:31
Sex : Male	Sample Received on : 10/07/2023 11:02:13
P. ID No. : P1000100012773	Report Released on : 20/07/2023 16:32:19
Accession No : 10002304829	Barcode No. : 10002304829-01
Referring Doctor : Self	
Referred By :	Ref no. :

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
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HAEMATOLOGY

Flowcytometry T-ALL MRD

Sample: B. Marrow Heparinized

Immunophenotyping findings:

Flowcytometric immunophenotyping of Peripheral Blood sample shows ~61% CD45 dim+ blasts which are CD13+(Heterogenous), CD7+, cyCD3+(Partial), CD5+, CD38, CD34+, SrCD3+, and negative for CD1a, CD8, CD19, CD10, CD20, CD79a, cyMPO, CD2, CD33, HLA-DR, CD4, CD TdT, CD64, CD16, CD56, CD1a And CD117.

Impression: T- Acute Lymphoblastic Leukemia With Aberrant CD13+ (Heterogenous).

Advice: Cytogenetics and Molecular Studies.

Markers used: CD45, CD19, CD34, CD38, CD13, CD33, CD19, CD64, CD117, HLA DR, CD7, CD4, CD5, CD8, CD2, CD1a, cyMPO, cyCD79a, cyCD3, CD10, CD20, CD1a, CDTdT, Sr CD3, CD56, CD16.

Marker	
CD45	Dim Positive
CD34	Positive
CD7	Positive
cyCD3	Positive(Partial)
CD2	Negative
CD4	Negative
CD8	Negative
CD5	Positive
CD1a	Negative

10002304829 Mr. FC33



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Test Name	Result	Biological Ref. Interval	Unit
cyMPO	Negative		
cyCD79a	Negative		
CD10	Negative		
CD19	Negative		
CD20	Negative		
CD13	Positive(Heterogenous)		
CD33	Negative		
Sr CD3	Positive		
CD64	Negative		
CD38	Positive		
CD117	Negative		
HLA DR	Negative		
CD TdT	Negative		
CD 56 PC5	Negative		

Comment: The samples was run on BC Navios 10 color flow cytometer as per the standardized international protocol. FSC vs SSC was used to gate viable cells. CD45vs SSC gating strategy is used. Software used for analysis is Kaluza 2.1.3

Note: Investigation should be interpreted understanding the limitation of the sample quality and various statistical parameters. An isolated laboratory report never forms a basis of any treatment decision. It should always be interpreted with the clinical course by the primary physician.

** End of Report**

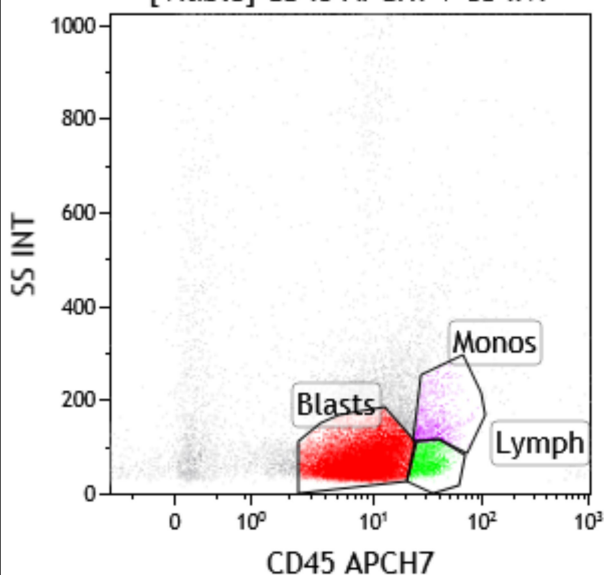


Dr. Aarti Khanna Nagpal
 DNB (Pathology)
 Senior Consultant



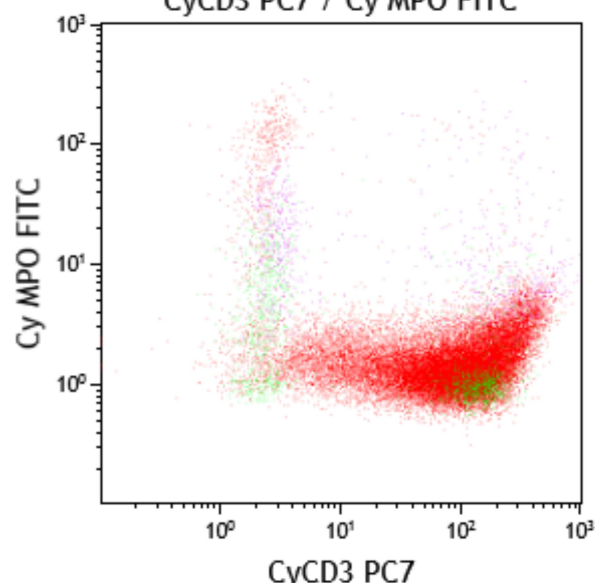
Name-DUMMY

[Viable] CD45 APCH7 / SS INT

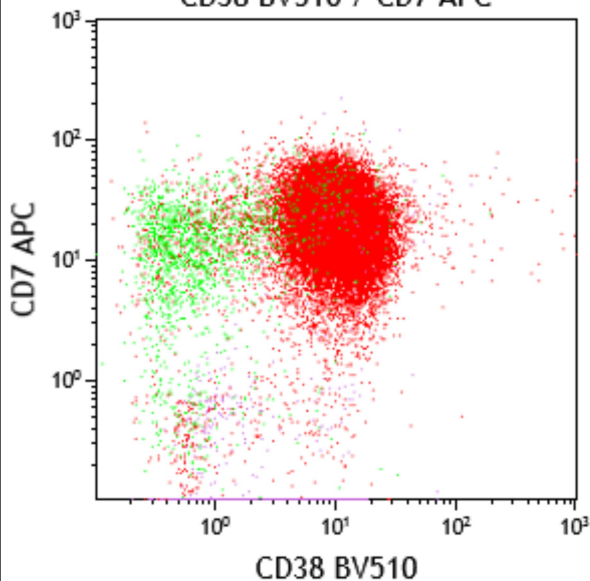


Barcode-

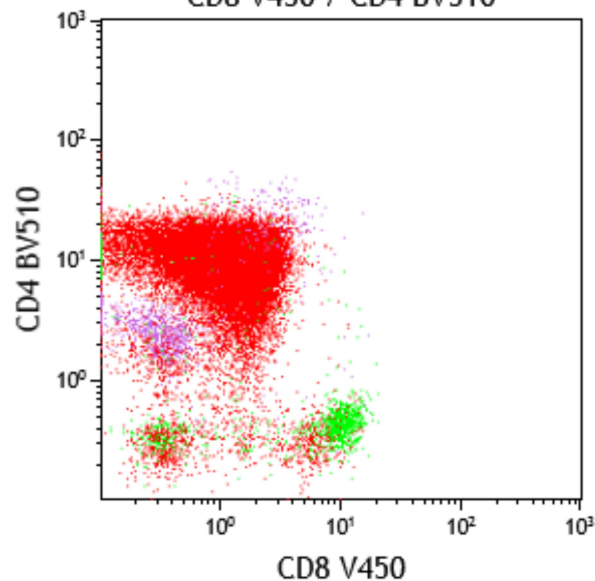
[All Population]
CyCD3 PC7 / Cy MPO FITC



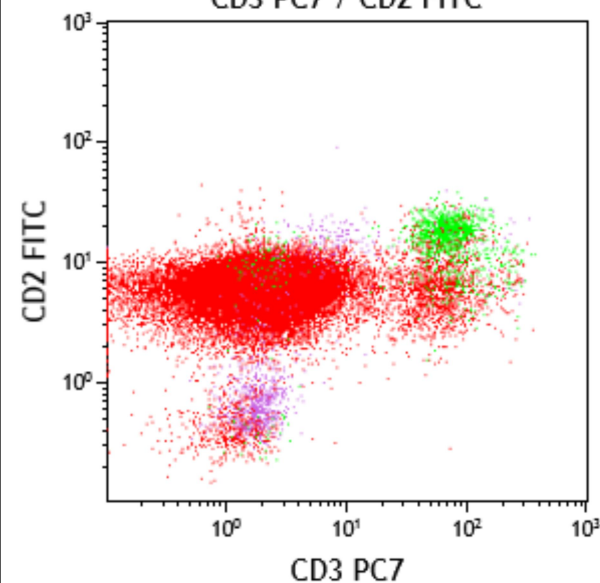
[All Population]
CD38 BV510 / CD7 APC



[All Population]
CD8 V450 / CD4 BV510



[All Population]
CD3 PC7 / CD2 FITC



[All Population]
CD5 PC5 / CD1a APC

