DNA Cell Cycle Analysis - Ploidy and S-Phase

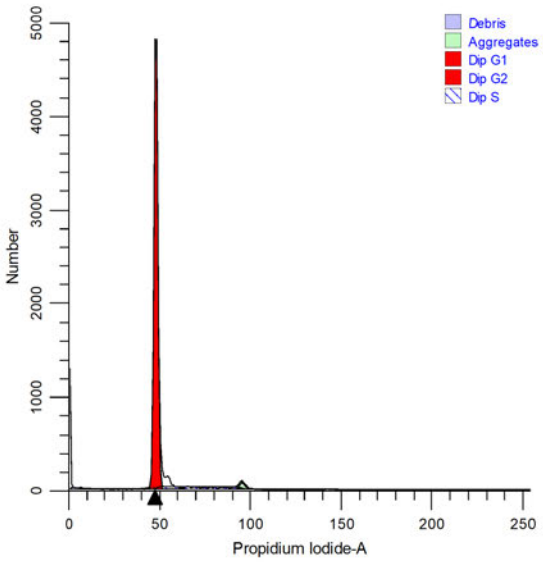
Patient: [redacted]
DOB: [redacted] Age: 16 Sex: F
Patient Identifiers: [redacted]
Visit Number (FIN): [redacted]

Client: [redacted]
Physician: [redacted]

ARUP Test Code: 0095155

Collection Date: 04/05/2024
Received in lab: 04/06/2024
Completion Date: 04/07/2024

Patient Name: [redacted] Age: 16 YRS Sex: FEMALE Sample # [redacted]
Specimen Source and Type: BONE MARROW
Laboratory Accession Number: 24-097-400444



File analyzed: [redacted]
Date analyzed: 7-Apr-2024
Model: 1DA0n_DSD
Analysis type: Automatic analysis
Auto Linearity: No

Ploidy Mode: First cycle is diploid

Diploid: 100.00 %
Dip G1: 90.69 % at 47.55
Dip G2: 0.29 % at 95.09
Dip S: 9.02 % G2/G1: 2.00
%CV: 1.92

Total S-Phase: 9.02 %
Total B.A.D.: 1.56 %

Debris: 3.52 %
Aggregates: 2.35 %
Modeled events: 15089
All cycle events: 14204
Cycle events per channel: 293
RCS: 4.096

Interpretation: DIPLOID

Prognostic Data:
In 750 patients with acute lymphoblastic leukemia (ALL), 36-40 percent of children and 18-38 percent of adults were aneuploid. Aneuploid ALL (DNA Index >1.16) in pediatric patients correlates with longer remission and disease-free survival, likely explained by increased sensitivity to antimetabolites. S-phase was not prognostic for treatment response or duration in ALL. [Blood 1995, 85:751-6; Cytometry, 1993, 14:492-496; Leuk Lymphoma, 1998, 31:507-19].

ModFit LT V5.0.9(Win)

These results have been reviewed and approved by [redacted] MD, PhD.

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Jonathan R. Genzen, MD, PhD, Laboratory Director

Chart continues on following page(s)

Patient: [redacted] | **Date of Birth:** [redacted] | **Sex:** F | **Physician:** [redacted]
Patient Identifiers: [redacted] | **Visit Number (FIN):** [redacted]

Interpretive Data

INTERPRETIVE DATA: DNA Analysis - Ploidy and S-Phase
The diagnostic and prognostic importance of tumor DNA content depends on the tumor type and source of tissue. Interpretative information, if available for the tumor type, is included with the DNA histogram.
This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

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