

Client: Example Client ABC123
123 Test Drive
Salt Lake City, UT 84108
UNITED STATES

Physician: Doctor, Example

Patient: Patient, Example

DOB: Unknown
Gender: Unknown
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

KIT Mutations in AML by Fragment Analysis and Sequencing

ARUP test code 2002437

Kit Mutations in AML

Positive *

A mutation in KIT exon 17 was detected: p._

This result has been reviewed and approved by [REDACTED]

BACKGROUND INFORMATION: KIT Mutations in AML by Fragment Analysis and Sequencing

Total DNA is extracted and fragments containing KIT exons 8 and 17 are PCR amplified. Exon 8 fragments are analyzed by capillary electrophoresis to detect insertion/deletion mutations. Exon 17 fragments are sequenced. Mutations in the KIT gene at exons 8 or 17 are seen in a subset of cases of acute myeloid leukemia. In the context of acute myeloid leukemia with t(8;21)(q22;q22) or inv(16)(p13.1q22), the presence of KIT exon 8/17 mutations has been associated with a less favorable outcome. This test can detect mutations in exon 8 in samples with as little as 5% AML cells and mutations in exon 17 in samples with as little as 30% AML cells. Greater than 90% of known exon 8 mutation and all possible exon 17 mutations can be detected by this test.

Results of this test must always be interpreted in the context of morphologic and other relevant data, and should not be used alone for a diagnosis of malignancy. A negative result does not preclude the presence of KIT mutations below the detection limit of this test or the presence of novel rare mutations not detected by this test. This test is not intended to detect minimal residual disease or to assess response to treatment.

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.

H=High, L=Low, *=Abnormal, C=Critical

Unless otherwise indicated, testing performed at:

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Kit Mutations in AML	23-025-119191	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

END OF CHART

H=High, L=Low, *=Abnormal, C=Critical

Unless otherwise indicated, testing performed at:

ARUP LABORATORIES | 800-522-2787 | aruplab.com
500 Chipeta Way, Salt Lake City, UT 84108-1221
Jonathan R. Genzen, MD, PhD, Laboratory Director

Patient: Patient, Example
ARUP Accession: 23-025-119191
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
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