



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

Physician: Doctor, Example

Patient: Patient, Example

DOB 5/3/1977 **Gender:** Female

Patient Identifiers: 01234567890ABCD, 012345

Visit Number (FIN): 01234567890ABCD **Collection Date:** 00/00/0000 00:00

Acute Myelogenous Leukemia (AML) with Myelodysplastic Syndrome (MDS) or Therapy-Related AML, by FISH

ARUP test code 2002653

AML with MDS, Therapy-Related AML, FISH

See Note (Ref Interval: Normal)

Specimen Received

Specimen Type:
Reason for Referral:
Pancytopenia
Test Performed:
F TAML MDS

NORMAL FISH RESULTS

5q31 (EGR1): deletion not detected 7cen (D7Z1), 7q31 (D7S486): deletion / monosomy not detected

11q23 (KMT2A; also known as MLL): rearrangement / deletion not

detected

DIAGNOSTIC IMPRESSION:

Fluorescence in situ hybridization (FISH) analysis was performed with the Therapy-Related AML/MDS Panel probes: EGR1, D7Z1, D7S486 and KMT2A(MLL) (Abbott Molecular). 200 interphase cells were scored for each probe combination.

This analysis showed normal results with no evidence of deletion 5q31, monosomy 7, deletion 7q31, or 11q23 rearrangement or deletion involving the KMT2A (MLL) locus.

ISCN:

nuc ish(EGR1,D7Z1,D7S486,KMT2A)x2[200]

This result has been reviewed and approved by ■

INTERPRETIVE INFORMATION: AML with MDS, Therapy-Related AML, FISH

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement A: aruplab.com/CS

EER AML with MDS, Therapy-Rltd AML, FISH See Note

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

4848



Access ARUP Enhanced Report using either link below:

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
AML with MDS, Therapy-Related AML, FISH	20-191-106038	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
EER AML with MDS, Therapy-Rltd AML, FISH	20-191-106038	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

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