

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

Chromosome Analysis, Leukemic Blood with Reflex to Genomic Microarray

ARUP test code 2007131

Chromosome Analysis, Leukemic Blood	See Note	(Ref Interval: Normal)
	Test Performed: Chr Specimen Type: Peri Indication for Test	pheral Blood
	Number of cells cou Number of cells ana Number of cells kar ISCN band level: 40 Banding method: G-B	llyzed: 20 yotyped: 20 0
	RESULT Abnormal Karyotype	(Female)
	53,XX,+X,+4,+6,+14,	+17,+18,+21[8]/46,XX[12]
		ed a hyperdiploid karyotype with gain of one somes X, 4, 6, 14, 17, 18, and 21 in 8/20
	The remaining cells	showed a normal chromosome complement.
	lymphoblastic leuke	istent with a diagnosis of B-cell mia. In the context of B-ALL, hyperdiploidy a favorable prognosis.
	Please correlate th findings.	is result with clinical and other laboratory
	and reported under	d F PHLK ALL were performed on this sample ARUP accessions and and and and and and a second
	microarray analysis not be performed un	revealed an abnormal result, genomic , which was ordered as a reflex study, will less we are notified otherwise. To proceed please contact ARUP Genetics Processing at 3301.
	This result has bee	n reviewed and approved by

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



INTERPRETIVE INFORMATION: Chromosome Analysis, Leukemic Blood 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.

EER Chrom Analysis LKB w/Rflx to Array

See Note Authorized individuals can access the ARUP Enhanced Report using the following link:

VERIFIED/REPORTED DATES					
Procedure	Accession	Collected	Received	Verified/Reported	
Chromosome Analysis, Leukemic Blood	23-159-122968	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00	
EER Chrom Analysis LKB w/Rflx to Array	23-159-122968	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 | aruptab.com 500 Chipeta Way, Salt Lake City, UT 84108-1221 Jonathan R. Genzen, MD, PhD, Laboratory Director Patient: Patient, Example ARUP Accession: 23-159-122968 Patient Identifiers: 01234567890ABCD, 012345 Visit Number (FIN): 01234567890ABCD Page 2 of 2 | Printed: 6/30/2023 2:47:37 PM 4848