

REPORT

Patient Name	: Mr. SANJIT KALITA	Reg. No.	: 00252209200342
Age and Sex	: 33 Yrs / Male	PCC Code	: PCL-AS-035
Referring Doctor	: Dr. JIN BHATTACHARJYA	Sample Drawn Date	: 20-Sep-2022 04:14 PM
Referring Customer	: PATHCARE COLLECTION CENTRE	Registration Date	: 21-Sep-2022 03:06 PM
Vial ID	: M1277095	Report Date	: 28-Sep-2022 08:25 PM
Sample Type	: WB-EDTA	Report Status	: Final Report
Client Address	: Guwhati, Main Road , Assam.		

MOLECULAR BIOLOGY

Test Name	Obtained Value	Units	Bio. Ref. Intervals (Age/Gender specific)	Method
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BCR - ABL Gene Rearrangement - Quantitative

BCR ABL RT-PCR-INTERNATIONAL SCALE

Observed copies of ABL1	12830.00
Observed copies of BCR-ABL1	0.00
BCR-ABL1/ABL1 Ratio	0.00
BCR-ABL1/ABL1 % Ratio	0.00
Conversion factor for IS	0.70
BCR-ABL1/ABL1 IS % Ratio	0.00
Log10 BCR-ABL1/ABL1 IS Ratio	Not applicable
TRANSCRIPT DETECTED	NOT DETECTED

Suggested clinical correlation.

Methodology:

Reverse transcription real-time PCR is performed for the BCR-ABL1 fusion transcript with normalization of transcript levels to the ABL1 transcript.

Comments:

Calculations: This report uses the international Scale (IS) to report BCR-ABL transcript levels.

- Minimum amplification of ABL control gene must be 10,000 copies /RT for reporting.
- Percentage ratio between quantities of BCR-ABL and the ABL transcript is generated.
- Results are normalized to the IS scale by multiplying the IS conversion factor
- IS conversion factor is established with the aid of certified reference material calibrated to the First WHO International Genetic Reference Panel for quantification of BCR-ABL1 translocation by RT- PCR.

Clinical Significance: The percentage reading on the IS is interpreted as follows

- <1% correlates with the level of complete cytogenetic response (CCgR).
- <0.1% equivalent to major molecular response (MMR), which is therapeutic target in CML
- <0.01% (log 4 reduction) OR <0.0032% (log 4.5 reduction) is equivalent to deep molecular response(MR).
- It is recommended that RT PCR must be performed every three months at least until MMR has been achieved, following which it can be repeated.

Correlate Clinically.

*** End Of Report ***



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