Test Name	Test Code	Technique	Specimen	TAT / Reported on
JAK 2 Mutation Analysis (Exon 14)	SMO10005	PCR	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	4th Working Day
JAK2 Exon 12 mutations	SMO10076	See Individual Assays	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	10th working day
MPL Mutation Analysis	SMO10178	PCR & Sequencing	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	10th working day
Calreticulin Mutation Analysis	SMO10179	PCR & Sequencing	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	10th working day
BCR/ABL Quantitative RT PCR with Breakpoint Analysis (MRD)	SMO10014	Real Time PCR	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	4th Working Day
CML Quest IRMA	SMO10067	See Individual Assays	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	10th working day
IS BCR-ABL Quantitation	SMO10167	Real Time PCR	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	4th Working Day
AML Characterization Panel (Flowcytometry)	SP10067	Flow Cytometry	2ml whole blood / Bone Marrow in Sod. Heparin tubes.	Next Working Day if received before 1400 Hrs.
CEBPA Mutation Detection	SMO10042	See Individual Assays	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	10th working day
FLT3 Mutations Analysis (specific to ITD & D835)	SMO10004	PCR	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	4th Working Day
NPM 1 (Exon 12) Mutation Analysis	SMO10089	See Individual Assays	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	10th working day

Test Name	Test Code	Technique	Specimen	TAT / Reported on
IHC - WT - 1	SIH10081	Immunohistochemistry	Formalin Fixed Paraffin Embedded (FFPE) tissue block/ Representative Tissue placed in Formalin sent at room temperature by courier. Polylysine coated slides are also acceptable (12-15 for FDP; For other panels depending upon the number of markers requested) with an additional H&E slide is required. Slides to be transported in proper slide mailers (plastic) with proper labeling.	4th Working day
Acute Lymphoblastic Leukemia Translocation Panel	SP10028	Multiplex RT PCR	5-6 ml whole blood /3-4 ml bone marrow in 2 EDTA Vacutainers.	5th Working Day
ALL Panel by FISH (3 translocations)	SP10102	FISH	2-3ml Bone Marrow/3-4ml Whole Blood in Heparin	4th working day
FISH - TEL/AML1	SFI10005	FISH	2-3ml Bone Marrow/3-4ml Whole Blood in Heparin	4th working day
Acute Leukemia Comprehensive Diagnosis -20 or ALCD-20	SP10065	Flow Cytometry	2-3 ml whole blood /Bone Marrow in Sod. Heparin tubes.	Next Working Day if received before 1400 Hrs.
Acute Leukemia-MRD Panel (MRD & Relapse)	SP10075	Flow Cytometry	3 - 4 ml. of heparinized bone marrow. Send immediately by courier at 20-25°C. DO NOT FREEZE. Specify date & time of sample withdrawn & Initial diagnosis, immunophenotype, time point of MRD evaluation on TRF.	3rd working day
CLL Diagnostic Panel (Comprehensive)	SP10069	Flow Cytometry	2ml whole blood /Bone Marrow in Sod. Heparin tubes.	Next Working Day if received before 1400 Hrs.
CLL prognosis by FISH	SP10099	FISH	2-3ml Bone Marrow/3-4ml Whole Blood in Heparin	4th working day
Multiple Myeloma by FISH Comprehensive	SFI10039	FISH	2-3ml Bone Marrow in Heparin	5th working day
Flowcytometry - Multiple Myeloma Panel	SP10074	Flow Cytometry	2ml Bone Marrow in Sod. Heparin tubes.	Next Working Day if received before 1400 Hrs.

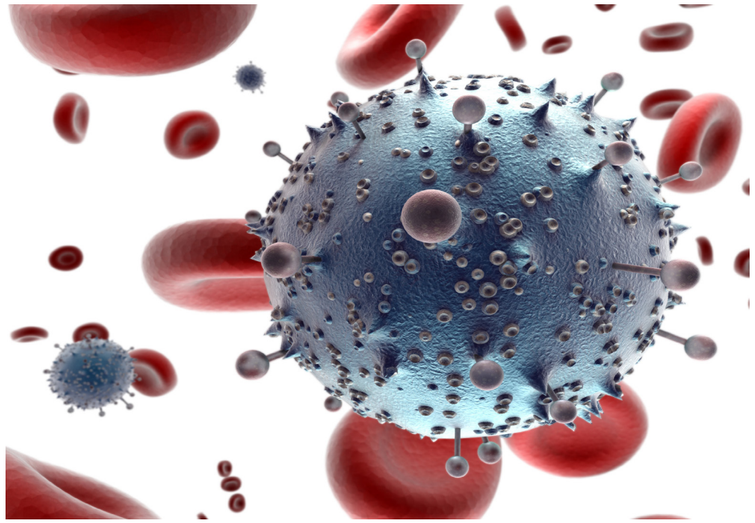
Regd. Office & Main Lab.: Oncquest Laboratories Ltd. 3 - Factory Road, Adjacent Safdarjung Hospital, New Delhi - 110029, Telephone.: 011-30611432, 011-30611467
Web: www.oncquest.net Oncquestlaboratories

DISCOVER
DIAGNOSE
DEFEND

oncquest laboratories

Clinical Testing For

LEUKEMIA



India's Leading Super Specialised Laboratory Network

Web: www.oncquest.net Oncquestlaboratories

Myelo Proliferative Neoplasms (MPN)

JAK-2 Exon 14 Mutation / JAK2 V617F

- Rapid & most accurate detection of JAK2 V617F mutation helps in diagnosis of 70-85% cases of Polycythemia Vera (PV) and 40-50% cases of Essential Thrombocythemia (ET) and Idiopathic Myelofibrosis (IMF).
- Recommended as a test if a person has an increased production of RBC and platelet leading to the clinical manifestation of thrombosis or hemorrhage.

JAK-2 Exon 12 Mutation

- Diagnose Polycythemia Vera (PV) (5-15%) or idiopathic erythrocytosis and may be used to differentiate reactive conditions from malignant erythrocytosis.
- Recommended for patients negative for JAK2 V617F to classify further or rule out PV.

Myeloproliferative Leukemia (MPL) Mutation

- Mutations at codon 505 and 515 of MPL gene have been observed in 3-5% of Essential Thrombocythemia (ET) and 8-10% cases of Primary Myelofibrosis (PMF).
- Identification of MPL mutations can aid in the diagnosis of a myeloproliferative neoplasm and is highly suggestive of either PMF or ET.

Calreticulin Mutation

- Rapid and sensitive detection of insertion/deletion-type mutations in exon 9 of CALR gene.
- Assist in the diagnosis of myeloproliferative neoplasms, and provide a marker for monitoring response to therapy and disease recurrence.
- CALR mutated ET and PMF are associated with increased overall survival and decreased incidence of thrombosis.

Chronic Myeloid Leukemia (CML)

IS BCR/ABL (BCR/ABL International scale reporting)

- Analysis of BCR-ABL1 mRNA levels during and/or after TKI therapy (Imatinib, Dasatinib, Nilotinib) or stem cell transplantation accurately helps in monitoring of response.
- Effective method for monitoring treatment efficacy.

IRMA (Imatinib Resistance Mutation Analysis)

- This test to be ordered when a Complete Cytogenetic Response is not obtained in 6-12 months of therapy or Major Molecular Response (MMR) is lost at any time during monitoring.
- Failure of TKI treatment or an increase of more than 1 log in the BCR/ABL1 transcript level due the presence of mutations.
- Identification of the exact mutation is clinically relevant so that the most effective Second generation TKI may be chosen for further treatment.

BCR/ABL Quantitative (MRD)

- Demonstration of the effectiveness of initial therapy.
- Monitoring for treatment resistance or relapse.
- Helps in selection of alternative therapies.

Acute Myeloid Leukemia (AML)

PML RaRa

- Diagnose acute promyelocytic leukemia (APL) and predict response to all-trans-retinoic acid or arsenic trioxide therapy.
- Helpful for monitoring therapeutic response and Minimal Residual Disease (MRD) and for detecting early relapse.

Nucleophosmin 1 (NPM1)

- Useful as a prognostic indicator in patients with newly diagnosed acute myelogenous leukemia with normal karyotype and no FLT3 mutation.
- NPM1 mutation is associated with better response to induction chemotherapy.

CCAAT/Enhancer-binding protein alpha (CEBPA)

- Mutations in CEBPA are found in 10-15% of cases of cytogenetically normal AML and are associated with a favorable prognosis.
- Screening for CEBPA mutations offers a means for risk stratification in AML patients with normal karyotype.

Inversion 16

- Inv(16) /CBFB - MYH11 fusion transcripts are detected in approximately 10% of de novo AML and it is most closely associated with AML-M4Eo.
- Patients with inv(16) generally have relatively good response and long-term disease-free survival rates.

FMS-like tyrosine kinase 3(FLT3)

- Identifies internal tandem duplication (ITD) and D835 mutation of the FLT3 gene.
- Presence of these mutations is shown to be associated with disease progression or relapse of AML.

Wilm's Tumor 1 (WT1)

- WT1 mutations occur in approximately 12% of acute myeloid leukemia (AML) cases and are associated with poor outcome in cytogenetically normal AML.

Acute Myeloid Leukemia (AML) Characterization Panel

- The panel is designed for subtyping of confirmed AML cases.
- Detect Myeloid & Monocytic Markers (CD13, CD14, CD33, CD36, CD64, CD11b, MPO), Others (CD10, CD16, CD34, CD117, HLADR, CD45), Erythroid Cell Marker (Glycophorin A), T- cell Markers (CD7), B-cell Markers (CD19).

Acute Leukemia-MRD Panel (MRD & Relapse)

- Recommended test for accurate analysis of MRD
- Helps to assess early response to treatment and predict relapse
- May contribute to treatment stratification Post-Induction &detects submicroscopic levels of leukemia & detect multiple markers

Acute Lymphoblastic Leukemia (ALL)

Acute Leukemia Comprehensive diagnosis

- The panel is designed to distinguish ALL from AML & CLL, and for further subtyping of confirmed ALL cases.
- Composition includes T-cell Markers: CD3, CD4, CD5, CD7, CD8, Cy CD3. ,B-cell Markers: CD19, CD20, CD22, SIgM.
- Myeloid & Monocytic Markers: CD13, CD14, CD33, CD36, CD64, CD11b, CD 16 MPO. Others: CD10, CD34, TdT, HLADR, CD45, CD117

Acute lymphoid leukemia (ALL) Panel by FISH

- The panel included 3 translocations: Mixed Lineage Leukemia, BCR-ABL, TEL-AML1.

TEL/AML 1 or t(12:21) for ALL

- The TEL/AML1 gene fusion is associated with a more favorable prognosis as evidenced by a significant lower relapse rate.
- Relapse is associated with reappearance of the TEL/AML1 fusion transcript: thus testing is useful for monitoring patients for current disease status.

Acute Lymphoblastic Leukemia (ALL) Translocation Panel by Multiplex PCR

- Detects translocations/chromosomal aberrations in patients with acute lymphoid leukemia
- Translocation study for t(9;22), t(12;21), t((1;19) and t(4;11)

Chronic Lymphocytic Leukemia (CLL)

Chronic Lymphocytic Leukemia (CLL) Prognosis by FISH

- Helps in evaluating genetic abnormalities associated with prognosis and therapeutic response.
- The panel includes genetic abnormalities such as - del (13q14.3), del (6q21), del (11q22-23), del (17p13.1), del (8q24) and del (12q13)

Chronic Lymphocytic Leukemia (CLL) Diagnostic Panel by Flowcytometry

- The panel is designed for the confirmation for chronic lymphoproliferative disorders.
- Composition includes -T- cell Markers (CD2, CD3, CD4, CD5, CD7, CD8), B-cell Markers (CD19, CD20, CD23, CD79b, CD200, SIgM, Kappa, Lambda, FMC-7),Others (CD10,CD25, CD38, CD103, CD11c, CD45, HLADR, ZAP-70).

Multiple Myeloma

Multiple Myeloma by FISH

- Assess non dividing Multiple Myeloma cells for specific abnormalities including detection of del13q, t(4;14) , t(11;14) , t(14;16) + del17p by FISH
- Helps in the risk stratification and therapeutic approach in multiple myeloma patients

Multiple Myeloma Panel by Flowcytometry

- The panel gives the confirmation for clonality and abnormal antigen expression in neoplastic plasma cells.
- Detect markers CD19, CD 20, CD38, CD45, CD56, CD138, Cy.Kappa, and Cy.Lambda.