

**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b>	: Master ABRAZ WAHED SAYYAD	<b>Lab No</b>	: 202505270316
<b>UHID</b>	: 1000219075	<b>Order Date</b>	: 27/05/2025 2:08PM
<b>Age/Gender</b>	: 3 Yrs 1 Days/Male	<b>Collection Date</b>	: 27/05/2025 4:46PM
<b>Mobile No</b>	: 8329209506	<b>Receiving Date</b>	: 27/05/2025 4:48PM
<b>Referred By</b>	: Dr. Vibha Sanjay Bafna	<b>Reporting Date</b>	: 27/05/2025 5:08PM
<b>Category</b>	: BHRC Regular	<b>Approval Dates</b>	: 28/05/2025 11:39AM
<b>Specimen</b>	:	<b>Bill No</b>	: OPCA/26/93106
<b>OPD</b>	:	<b>Current Bed No.</b>	:
		<b>Report Status</b>	: Final

**Test Name**

CLINICAL DETAILS

PBS

Bone Marrow Aspiration

**SPECIMEN.**

CD 45

CD 34

HLA DR

CD 10

CD 19

CD 20

CD 38

CD 79a ( Cytoplasmic)

CD 3

CD 3 ( Cytoplasmic)

CD 7

CD 56

CD 13

CD 33

MPO ( Cytoplasmic)

CD 117

CD 14

**HEMATOLOGY**

**Result**

**Unit**

**Biological Ref. Interval**

C/o on and off fever since 2 months. USG: Hepatosplenomegaly,

Hb- 5.6 g/dl, TLC: 20100/cumm, Platelet count- 104000/cumm,

DLC: Blasts- 83%, N- 03%, L- 12%, M-02%, E- 00%, B- 00%,

PBS: Microcytic hypochromic blood picture with anisocytosis,

Leucocytosis with 80-85% blasts. Platelets are mildly reduced.

Peripheral smear findings are suggestive of acute leukaemia,

Bone marrow findings are suggestive of acute lymphoblastic leukaemia - L1 subtype (ALL-L1).

Bone marrow aspirate

91% negative-weak positive events gated

Weak Positive (60%)

Negative

Strong positive (95%)

Strong positive (100%)

Negative

Moderate Positive (73%)

Weak positive (36%)

Negative

Negative

Negative

Negative

Negative

Negative

Negative

Negative

Negative



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**HEMATOLOGY**

Interpretation

Interpretation of observation SSC versus CD45 gating:  
Gated leucocytes in blasts (91% of acquired events) region are positive for CD10, CD19, CD38 and weak positive for CD34 and CD79a. There is co-expression of CD10 and CD19 on these cells. CD20, HLADR, rest of the T-cell and myeloid markers are negative.

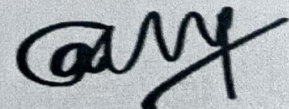
IMPRESSION

The scatter parameters and antigen expression profile are studied by the flow cytometry of the sample are suggestive of precursor B-cell acute lymphoblastic leukaemia.

ADVICE

Correlation with clinical, cytogenetic and other haematological parameters is advised.

--End Of Report--



**Dr. Amit Ravindra Nisal**  
MD (Pathology) DCP