

**ACTREC**  
**TEST DIRECTORY REPORT**  
**LOCATION DETAILS**

**Department name** : CANCER CYTOGENETICS DEPARTMENT  
**Location** : Room No. 6, Ground Floor, CCE Building.

**FUNCTIONAL DETAILS**

**Test Name** : BCR::ABL (Ph) duplication, trisomy 8, trisomy 21, TP53 deletion  
**Test code** : T402  
**Test status** : ACTIVE  
**Modality** : FI  
**Quantity required** : Bone Marrow: 1-4 ml, Peripheral blood: 4-5 ml  
**Collection Instructions** : Refer Primary sample collection manual  
**Nature of specimen** : Bone marrow, Peripheral blood  
**Method used** : Fluorescence in situ hybridization (FISH)  
**Type of container** : Sterile sodium heparin Green top vacutainer  
**Transport instructions** : Refer Primary sample collection manual  
**Time for additional exam on stored sample, if applicable** : NA  
**Resource person for report status** : Officer-in-charge  
**Resource person for test query** : Officer-in-charge  
**Patient instruction** : Refer Primary sample collection manual  
**Dept. acceptance time** : Monday to Friday-9:30 a.m. till 5:00 p.m.  
Saturday- 9:30 a.m. till 12:00 p.m.  
**Turn around time** : 2-4 working days  
**Sample storage after reporting** : Fixed pellet stored in minus 20 deep freezer  
**Telephone** : 022-27405000  
**Test schedule** : Daily  
**Extension** : 5758, 5759  
**Use** : Chronic myeloid leukemia in blast crisis