

# ACTREC

## -:TEST DIRECTORY REPORT :-

### LOCATION DETAILS

Department Name : HAEMATOPATHOLOGY  
Location : 2<sup>nd</sup>FLOOR, KHANOLKAR SHODHIKA, ROOM NO. 231 (KS231)

### COST DETAILS IN RUPEES

Category A : 5000.00  
Category B : 4000.00  
Category C : 800.00  
Category D : 6300.00  
Category F : 6300.00

### FUNCTIONAL DETAILS

Test Name : Chronic lymphocytic leukemia IGVH Mutation Detection  
Test Code : U119  
Test Status :  
Modality : MOLECULAR DIAGNOSTICS  
Qty Required : 10 ml  
Collection Instructions : Primary sample collection manual  
Nature of Specimen : Blood/ Bone marrow  
Method Used : PCR and Sanger Sequencing  
Type of Container : EDTA vials  
Transport Instruction : Primary sample collection manual  
Time for add. Exam on stored sample if applicable :  
Resource Person for Report Status : CLINICIAN SCIENTIST & ASSTT PROF /OIC  
Resource Person for Test query : LAB MANAGER  
Patient Instruction :  
Dept. Acceptance Time : 10 AM to 5.30 PM  
Turn Around Time : 14 days  
Sample Storage after reporting : Two backups  
Telephone :  
Test Schedule : Daily  
Extn : 5424  
Use :