

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

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

**COST DETAILS IN RUPEES**

**Category A** : 6930  
**Category B** : 5545  
**Category C** : 2770  
**Category D** : 10825  
**Category FN** : 8660

**FUNCTIONAL DETAILS**

**Test Name** : Acute Lymphoblastic leukemia karyotyping  
**Test code** : T307  
**Test status** : ACTIVE  
**Modality** : CK  
**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 (Presence of more than 80% blasts in peripheral blood)  
**Method used** : Conventional Karyotyping  
**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** : 17 working days after Hematopathology report  
**Sample storage after reporting** : Fixed pellet stored in minus 20 deep freezer  
**Telephone** : 022-27405000  
**Test schedule** : Daily  
**Extension** : 5759, 5758  
**Use** : Acute Lymphoblastic leukemia