



ISO 9001 : 2008 CERTIFIED LAB

KOS Diagnostic Lab
(A Unit of KOS Healthcare)



Dr. Vinay Chopra
MD (Pathology & Microbiology)
Chairman & Consultant Pathologist

Dr. Yugam Chopra
MD (Pathology)
CEO & Consultant Pathologist

NAME: Master. SAHIB	Accession No.:	112668
Age/Gender: 9 M/Male	Specimen ID:	BC2401094
Lab NO: 012411170009	Specimen:	Whole Blood HEPARIN
Referred BY: Self	Collected:	17/Nov/2024 03:00PM
Remark:	Registered:	17/Nov/2024 02:49PM
	Reported:	02/Dec/2024 04:17PM

www.itdoseinfo.com

CYTOGENETICS REPORT

Test Name:Karyotype - Blood

RESULT :

Method:	G-banding
Metaphases counted:	20
Metaphases analyzed:	20
Metaphases karyotyped:	14
Banding Resolution:	400
Karyotype (ISCN 2016):	46,XY

INTERPRETATION:

Normal male chromosome complement. There is no evidence of aneuploidy or structural rearrangement at the resolution of banding analysis.

RECOMMENDATIONS:

Chromosome microarray analysis is recommended for this patient because this test will be able to detect submicroscopic deletions and duplications in the genome, which cannot be detected by chromosome analysis. CMA is now considered the first-tier cytogenetic diagnostic test (Miller et al., 2010; Manning, Hudgins and the ACMG Professional Practice and Guidelines Committee, 2010). This testing is now available in our Laboratory, contact us for more information. In addition, a complete genetic evaluation should be considered to rule out other genetic etiologies associated with the clinical finding(s) in this patient. Genetic counseling is recommended.

Tara Nath
Quality Manager

Mr. Brijesh
Authorised Signatory
PhD(P)

DR. S. KUMAR
MBBS, MD
Consultant Pathologist





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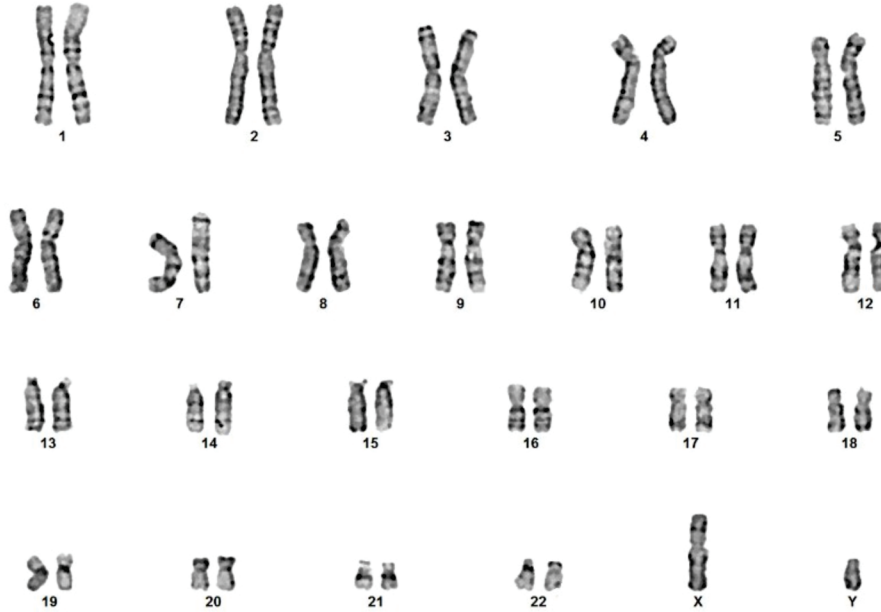
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KARYOTYPE:



Disclaimer: Although the methodology used in this analysis and interpretation is highly accurate, it does not detect small rearrangements and very low-level mosaicism, which are detectable only by molecular methods. Failure to detect an alteration at any locus does not exclude the diagnosis of any of the disorders. LABASSURE can assist the physician in determining the appropriate test in the context of clinical indications.

*** End Of Report ***

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