



Flow Cytometry Section

Flow Cytometry assays covers a wide sub-specialty of testing.

One category of flow Cytometry evaluation is the enumeration of well-defined CD4-positive or CD34-positive cell populations.

The more complex leukemia/lymphoma immunophenotyping assays use the same flow cytometry instrumentation and technique; however, they involve the recognition of many different and, many times, subtle hematologic neoplasms. Such processes interpretation requires knowledge of the maturation and expression patterns of normal and abnormal populations.

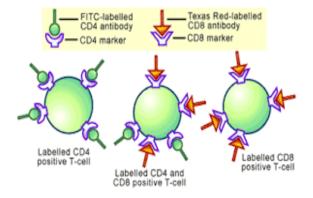
A comprehensive quality assurance/quality management program designed for these complex assays is necessary to ensure that the results obtained are accurate, consistent, and reproducible

over time, regardless of laboratory variables such as staff, reagent, sample preparation, instrumentation, acquisition, and analysis.

PRINCIPLE

To determine the types of markers and receptors on the surface of a cell. For these experiments, a fluorescent dye is attached to antibodies or receptor ligands.

These cells can then be subjected to flow cytometry and the amount of the receptor on their surface detected as a level of fluorescence.



IMMUNOFLOURESCE LABELING

These experiments can be designed to incorporate more than one fluorescent marker at a time, giving the ability to detect multiple cell-surface markers simultaneously.

B Rituximab	monitoring B cells count post Rituximab drug
CD4/CD8 RATIO	The ratio tells the healthcare provider how strong your immune system
DNA Index	B ALL Prognostic Tool

Leukemia Panel	Distinguishing acute lymphoblastic leukemia (ALL)
	from acute myeloid leukemia
	(AML) & Immunologic
	subtyping of ALL
Paroxysmal	Caroning for and confirming
Turoxysiiiui	Screening for and confirming
nocturnal	the diagnosis of paroxysmal
•	
nocturnal	the diagnosis of paroxysmal

	this assay determines
	the ability of PMNs
	togenerate an oxidative
	burst by indirectly
Oxidative Burst Test	measuring the increase
	in fluorescence
	generated by the
	oxidation by (O2) of a
	dye, dihydrorhodamine
	(DHR-123).
	Predict disease
Minimal residual	prognosis post
disease	chemotherapy

Leukocyte adhesion Molecules (LAD) Assessment of Adhesion Markers, Diagnosis of Leukocyte adhesion deficiency disease

Platelets Glycoprotein	Detects platelet glycoprotein antigens: CD61, CD41, CD42a, CD42b. Roll out Glanzmann and Bernard solier Syndrom
Leuco-count	QC tool for Blood bank
CD34 enumeration	CD34 % and Absolute, can be done on PB, BM or Cord blood





