

MLabs Flow Cytometry Panels

Panel 1: Stem Cell Neoplasm / Acute Leukemia	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Phenotypic profiling of aberrant blast forms as adjunct to client's morphologic evaluation. 2. Surveillance for residual Acute Leukemia during/after treatment. NOT RECOMMENDED FOR THE FOLLOWING: <ol style="list-style-type: none"> 1. Blast quantitation (see WHO guidelines). 2. Exclusion of chronic myeloproliferative or low-grade myelodysplastic disorders. 3. Final classification of stem cell neoplasms (requires Hematopathology consultation, contact MLabs).
Panel 2: Mature Lymphoid Leukemia / Non-Hodgkin Lymphoma (without plasma cells)	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Phenotypic profiling of aberrant mature B-cells and T-cells as adjunct to client's morphologic evaluation. 2. Evaluation of large granular lymphocytes (T-cell and NK type: please specify if required). 3. Surveillance for residual neoplasm during/after treatment. NOT RECOMMENDED FOR THE FOLLOWING: <ol style="list-style-type: none"> 1. Detection of Hodgkin's disease. 2. Final classification of non-Hodgkin's lymphomas (requires Hematopathology consultation, contact MLabs).
Panel 3: Plasma Cell / Multiple Myeloma	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Phenotypic profiling of plasma cells as adjunct to client's morphologic evaluation. 2. Surveillance for residual plasma cell neoplasm during/after treatment. NOT RECOMMENDED FOR THE FOLLOWING: <ol style="list-style-type: none"> 1. Quantitation of bone marrow involvement by plasma cell neoplasm. 2. Final classification of plasma cell neoplasms (requires Hematopathology consultation, contact MLabs).
Panel 4: Comprehensive: (combined panels 1, 2 without plasma cells)	RECOMMENDED USE: <p style="text-align: center;">SEE RECOMMENDATIONS FOR INDIVIDUAL PANELS</p>
Panel 5: Cutaneous T-cell Lymphoma (T-cell subsets and pan T-cell epitopes only)	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Phenotypic profiling of circulating T-cells in patients with known or suspected Cutaneous T-cell lymphoma. 2. Quantitation and monitoring of aberrant T-cell populations in peripheral blood during/after treatment. NOT RECOMMENDED FOR THE FOLLOWING: <ol style="list-style-type: none"> 1. Phenotypic profiling of other known or suspected T-cell lymphomas.
Panel 6: Mastocytosis	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Phenotypic profiling of mast cells in bone marrow as adjunct to client's morphologic evaluation.
Panel 7: Rituximab	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Monitoring of CD20 surface expression during therapy with Rituximab.
Panel 8: Paroxysmal Nocturnal Hemoglobinuria (PNH)	RECOMMENDED USE: <ol style="list-style-type: none"> 1. Detection and quantitation of "PNH-clone" (glycophosphatidylinositol-linked protein deficiency) when Paroxysmal nocturnal hemoglobinuria (PNH) is suspected. 2. Monitoring therapy for PNH.
HOLD: Hold until notified by client	RECOMMENDED USE: <ol style="list-style-type: none"> 1. When medical need for flow cytometry is uncertain and morphologic review will be complete by 12 noon the following day. 2. Please contact the MLabs office at (800) 862-7284 by 12 noon the day after submission to ensure optimal specimen viability for flow cytometry analysis.