

CYTOGENETICS LABORATORY REPORT

Name: BJN HEM 20BRY GFP Age: -- Yrs Sex: --

Ref: INSTEM

Lab No: **50635907406**

Clinical Data: --

Date of Sample collection: 09/06/2025

Date of sample receipt: 09/06/2025

Date of sample analysis: 20/06/2025

Details of Laboratory Procedure and results:

Impression: Thrice prepared slide yielded 5 metaphases with poor morphology. Regret no opinion possible.

NOTE: Requesting for repeat sample



Dr. Nidhi R
Cytogeneticist
KMC-83496

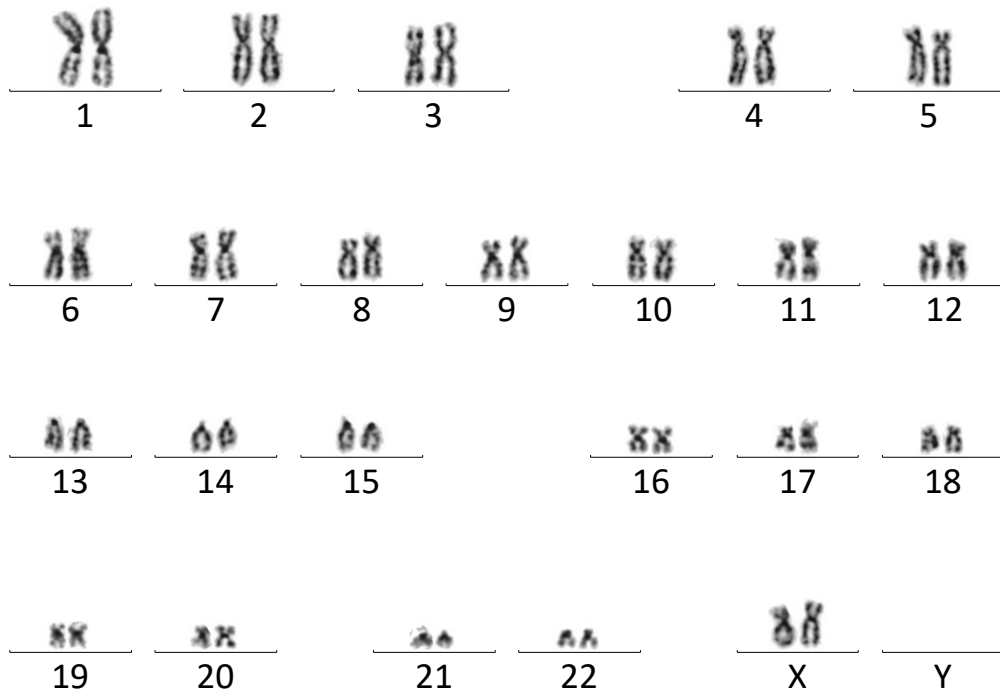
Reporting: 20/06/2025

(End of Report)

Page 1 of 2

CHROMOSOME ANALYSIS REPORT

Patient ID: 50635907406 **Patient Name:** BJN HEM 20BRY GFP **Age:** -- **Gender:** --
Physician Name / Hospital: INSTEM
Specimen: Stem cells(R) **Method:** Direct Harvest
Collected on: 21/07/2025 **Received on:** 21/07/2025 **Reported on:** 02/08/2025
Referral Reason: Karyotyping



Banding: GTG **Band Resolution:** 400 **Screened:** 20 **Karyotyped:** 20
Modal Number: 46 **Autosomes:** Normal **Sex Chromosomes:** XX
Karyotype: 46,XX[20]

Impression:
 Normal Karyotype
 NOTE: Repeat sample received on 21/7/25

Note: Analysis is based on the sample received in the laboratory.



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