

## 2019 BALL-B PARTICIPANT SUMMARY

### Evaluation Criteria

Results for the BALL Survey are not formally evaluated; however, statistics will appear in the Participant Summary for your information.

To provide a timely evaluation of your results, statistics presented in this Participant Summary reflect participant data received by the due date.

Cell markers with less than ten reported results were not included in this Participant Summary.

In the event a result is not graded, a numeric code will appear next to your result. A definition of the code will appear on the first page of your evaluation. Please see "Actions laboratories should take when a PT result is not graded" on page 14.

**Note:** To view the discussion images in color, go to cap.org to access the Participant Summary via e-LAB Suite.

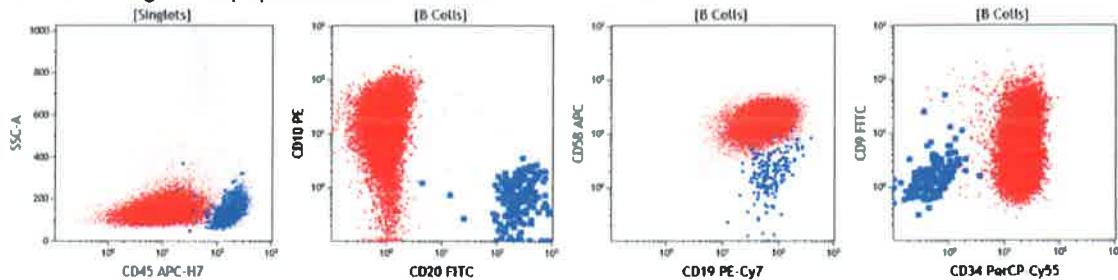
### BALL-B Discussion

#### **Case BALL-04 List Mode Case Positive for MRD at approximately 0.3% of mononuclear cells**

This case contained an abnormal population colored in red. The diagnostic sample contained a population of cells that was CD45 dim, CD10 variable and CD58 bright, CD20 negative, CD38 variable (not shown here) in Tube 1. Tube 2 of the diagnostic sample showed this population to be CD34 positive and CD9 variable and CD13/33 negative. The day 29 sample showed a shift from variable CD9 expression to negative. Antigenic shifts after treatment are not uncommon and have previously been reported. However, this population had an abnormal phenotype, as the cells in Tube 1 were CD10 positive and CD58 bright. The population was also brighter CD19 than the normal lymphocyte population. Tube 2 showed that this CD10+ population was also positive for CD34 and negative for CD13/33, consistent with the original phenotype.

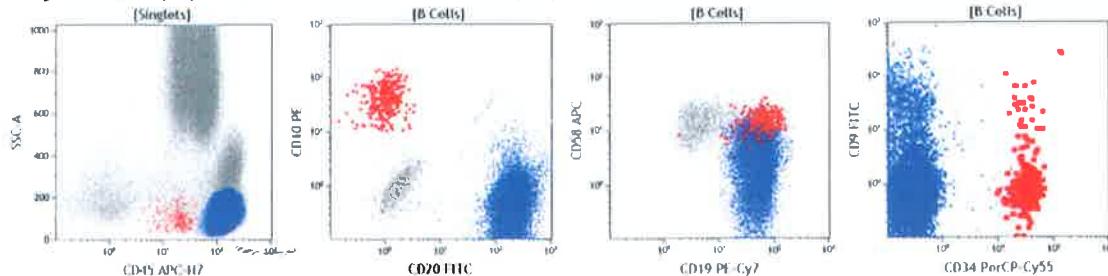
A total of 95.1% (77/81) of participants reported this case as positive, with 4.9% (4/81) calling it negative. Of those calling it positive, the majority reported 0.1 - 0.9%. Participants who reported negative results for this sample should review their analysis procedures and consult recent literature on gating strategy. While this case showed a shift in some of the original markers, the abnormal population continued to express an aberrant phenotype.

#### **Case 4. Diagnostic population shown in red**



## BALL-B Discussion (cont.)

**Day 29 Blast population shown in red and displayed as rare events**



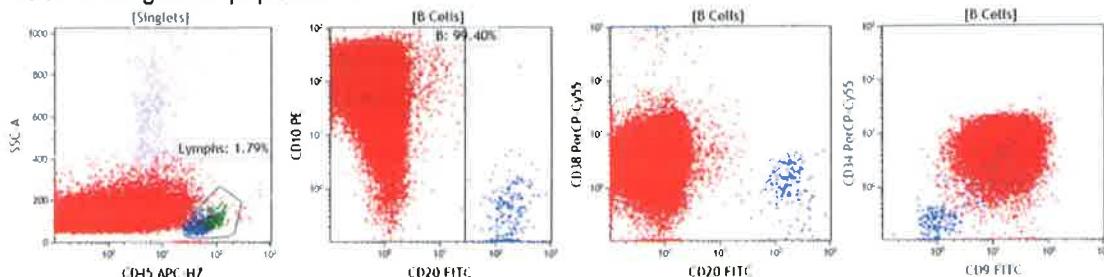
### Case BALL-05 List Mode Case Negative for MRD

This case did not contain an abnormal CD45 dim blast population or hematogones. However, normal mature B cells and a small population of plasma cells (colored in green) were also clearly visible (CD38 bright, CD10 negative, CD20 negative). The diagnostic population of cells was CD45 dim, CD10 variable and CD58 bright, CD20 negative, CD38 dim/negative in Tube 1. Tube 2 showed a diagnostic population that was CD34 positive, CD13/33 negative and positive for CD9. The day 29 sample was clearly distinct from the prior diagnostic immunophenotype with only normal mature B cells and plasma cells present. (representative dot plots shown below).

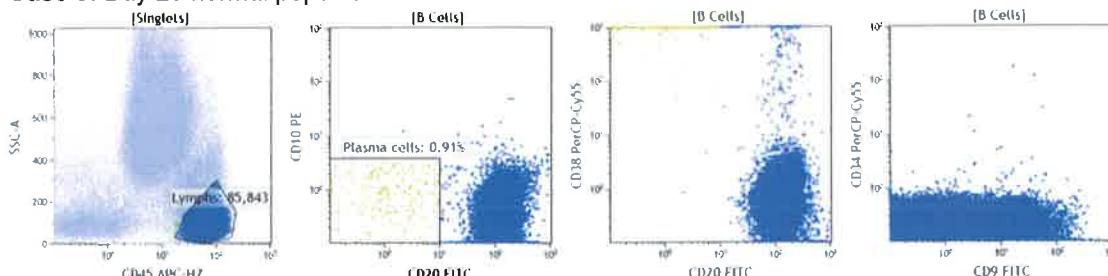
A total of 96.3% (78/81) of participants reported this case as negative, with 3.7% (3/71) calling it positive. Of those calling it positive, the majority reported 0.01 - 0.09%. Participants who reported positive results for this sample should review their analysis procedures.

**Please note that when a sample is negative, the value of abnormal cells is 0 (reported as code 46) and should not be reported as MRD positive. Do not report an immunophenotype if no abnormal population is present.**

### Case 5. Diagnostic population shown in red



### Case 5. Day 29 normal population shown in blue



## BALL-B Discussion (cont.)

### Case BALL-06 Positive for MRD at around 5%

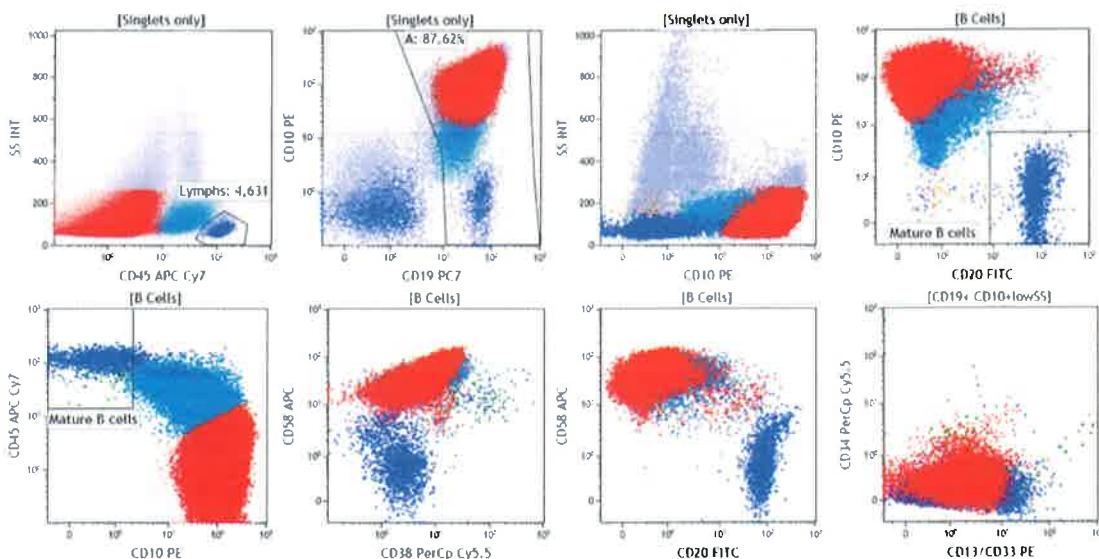
Two sets of plots were provided for this case, one representing the diagnostic immunophenotype at onset of disease, and one representing MRD assessment after the patient had received autologous chimeric antigen receptor T cells expressing anti-CD19 (CAR-T cell therapy). The diagnostic case showed the following abnormal immunophenotype: positive for CD19, CD10 bright, CD9 bright, CD34 and CD38 variable, and CD58 bright; and negative for CD20 and CD45 dim/neg. The MRD tubes did not demonstrate a similar abnormal blast population to the diagnostic sample, but rather showed a population of B-ALL cells with an abnormal immunophenotype: negative for CD19, CD10 bright, CD38 uniform bright, and CD45 dim to negative, with heterogeneous expression of CD20, partial CD34, and bright CD58. A key to identifying these as abnormal cells is to recognize differences in antigen expression intensity between these cells and hematogones which show reduced expression of CD9, CD10, CD34, and CD58 with increased expression of CD20, CD38, and CD45 compared to this CD19 negative population. Another useful feature is that there are no significant populations of CD19-negative normal precursors.

In most cases, it is important when looking at samples from patients on monoclonal or CAR-T therapy to include additional markers to identify the B cell population. CD22 and CD24 are good candidates to add to samples from patients on anti-CD19 therapy. Reference 2 is an excellent example of how to analyze these sample types.

**Of note:** In the kit instructions CD19+ cells are used in the calculation to normalize counts across the 3 tubes. In instances where there are no B cells, or in this case when many of the B cells are CD19 negative, caused confusion for some laboratories as they were unsure what "B cell" number to use in the calculation. The alternative is to use the lymphocyte gate in each of the 3 tubes, which serves the same purpose. Indeed, as a good internal quality assurance check when using either B cells or lymphocytes in the calculation, the MRD percentage should be similar, and if not may indicate a missed abnormal population. Kit instructions will be updated for the 2020 mailing to address this issue.

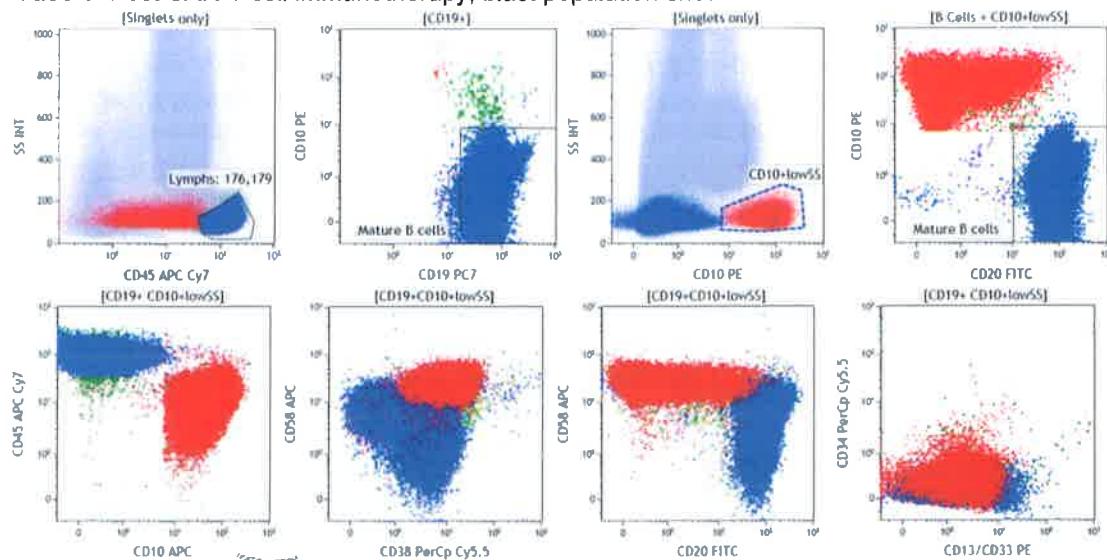
Of the 80 participants who reported a result, 74 (92.5 %) correctly reported this sample as positive, with the remaining 6 (7.5%) participants reporting negative. Of those reporting positive, 4 participants reported in the 0.01 - 0.09% range, 1 in the 0.1 - 0.9% range, 68 participants reported in the 1% - 9.9% range and 1 in the >10% range. The actual value was in the 5% range of mononuclear cells from Tube 3.

### Case 6: Diagnostic population shown in red



## BALL-B Discussion (cont.)

### Case 6. Post CAR-T cell immunotherapy; blast population shown in red

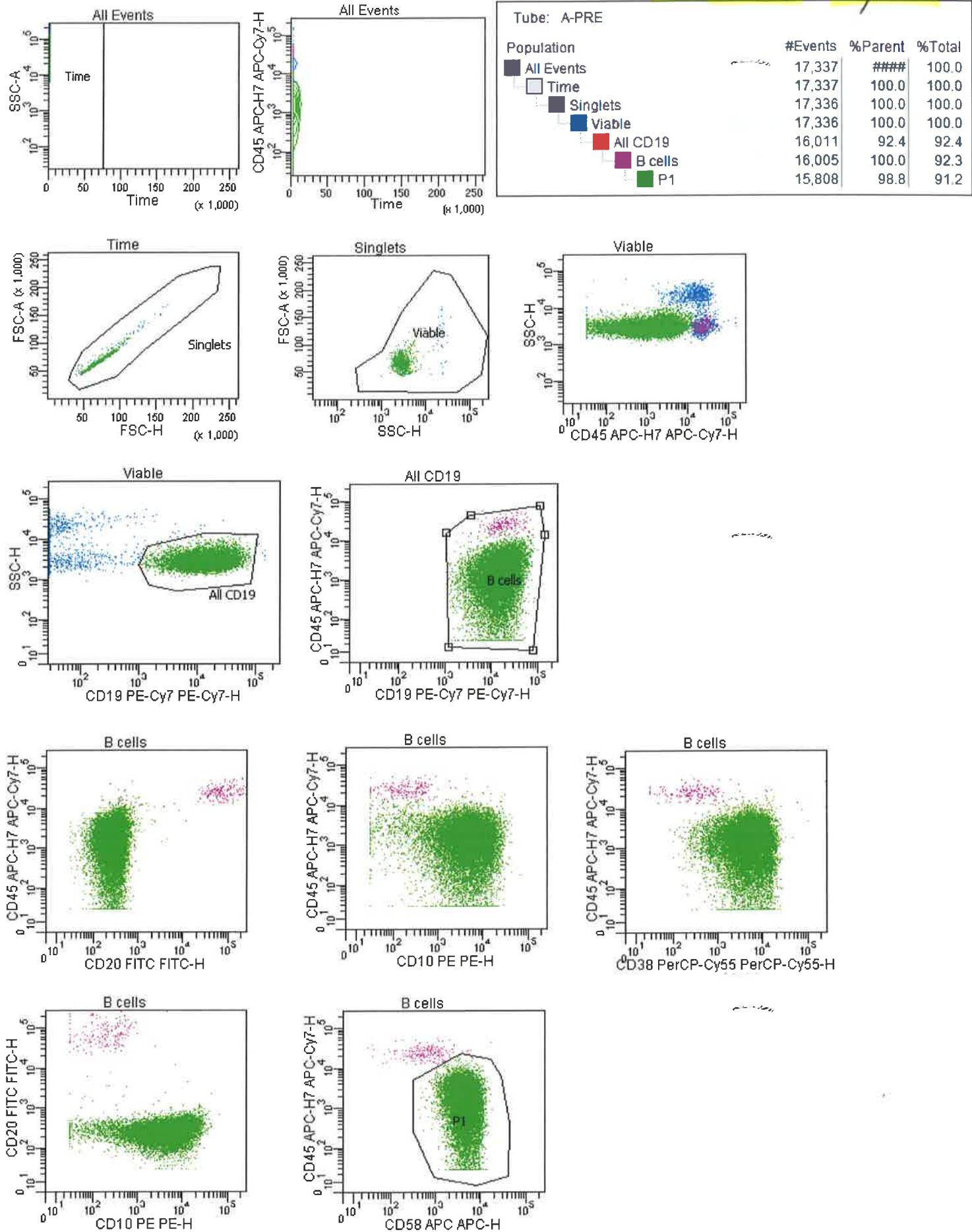


### References

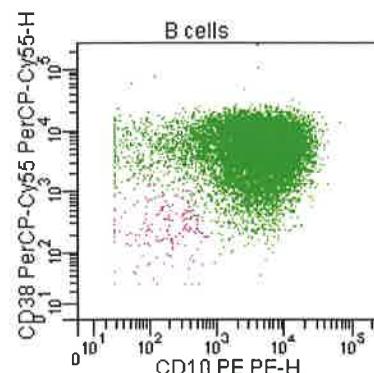
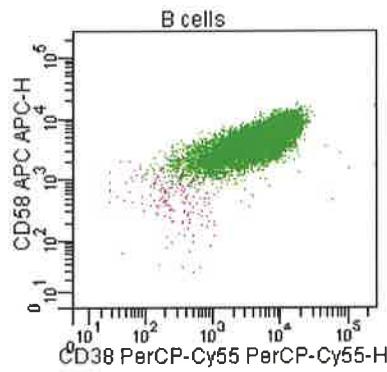
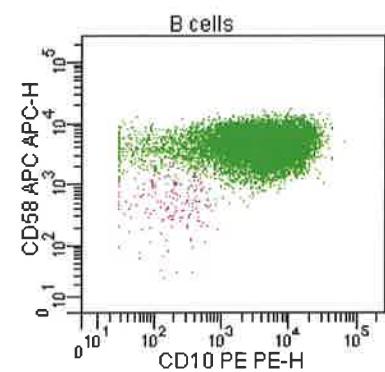
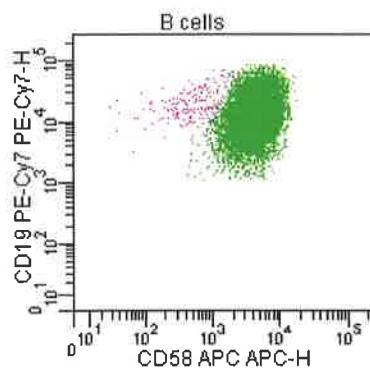
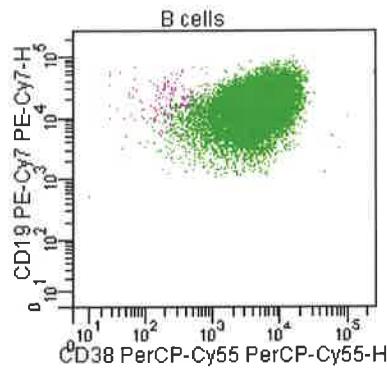
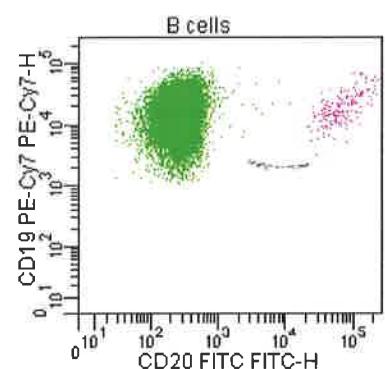
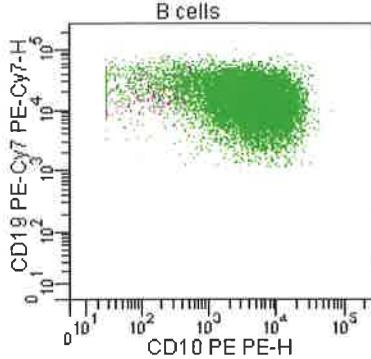
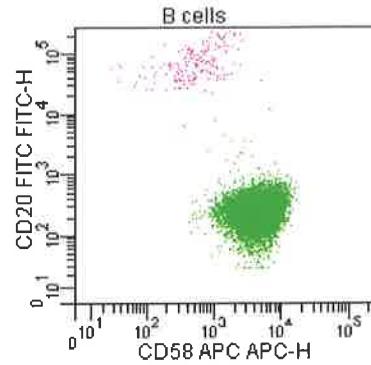
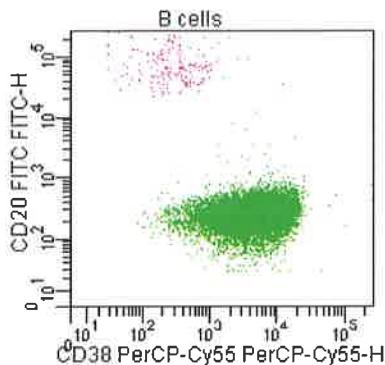
1. Borowitz MJ, Pullen DJ, Winick N, Martin PL, Bowman WP, Camitta B. Comparison of diagnostic and relapse flow cytometry phenotypes in childhood acute lymphoblastic leukemia: implications for residual disease detection: a report from the children's oncology group. *Cytometry B Clin Cytom.* 2005 Nov;68(1):18-24.
2. Cherian S, Miller V, McCullough V, Dougherty K, Fromm JR, Wood BL. A novel flow cytometric assay for detection of residual disease in patients with B-lymphoblastic leukemia/lymphoma post anti-CD19 therapy. *Cytometry B Clin Cytom.* 2018 Jan;94(1):112-120. doi: 10.1002/cyto.b.21482.
3. Keeney M, Wood BL, Hedley BD, et al. A QA program for MRD testing demonstrates that systematic education can reduce discordance among experienced interpreters. *Cytometry B Clin Cytom.* 2018 Mar;94(2):239-249. doi: 10.1002/cyto.b.21528.

**Michael Keeney, ART, FIMLS, FCSMLS(D)**

**Diagnostic Immunology and Flow Cytometry Committee**



Children's Hospitals and Clinics



Experiment Name:

CAP BALL-B 2019 CASE 4

Specimen Name:

Case 2

Tube Name:

A-PRE

Record Date:

Mar 12, 2016 3:18:58 PM

SOP:

HPDevelopmental

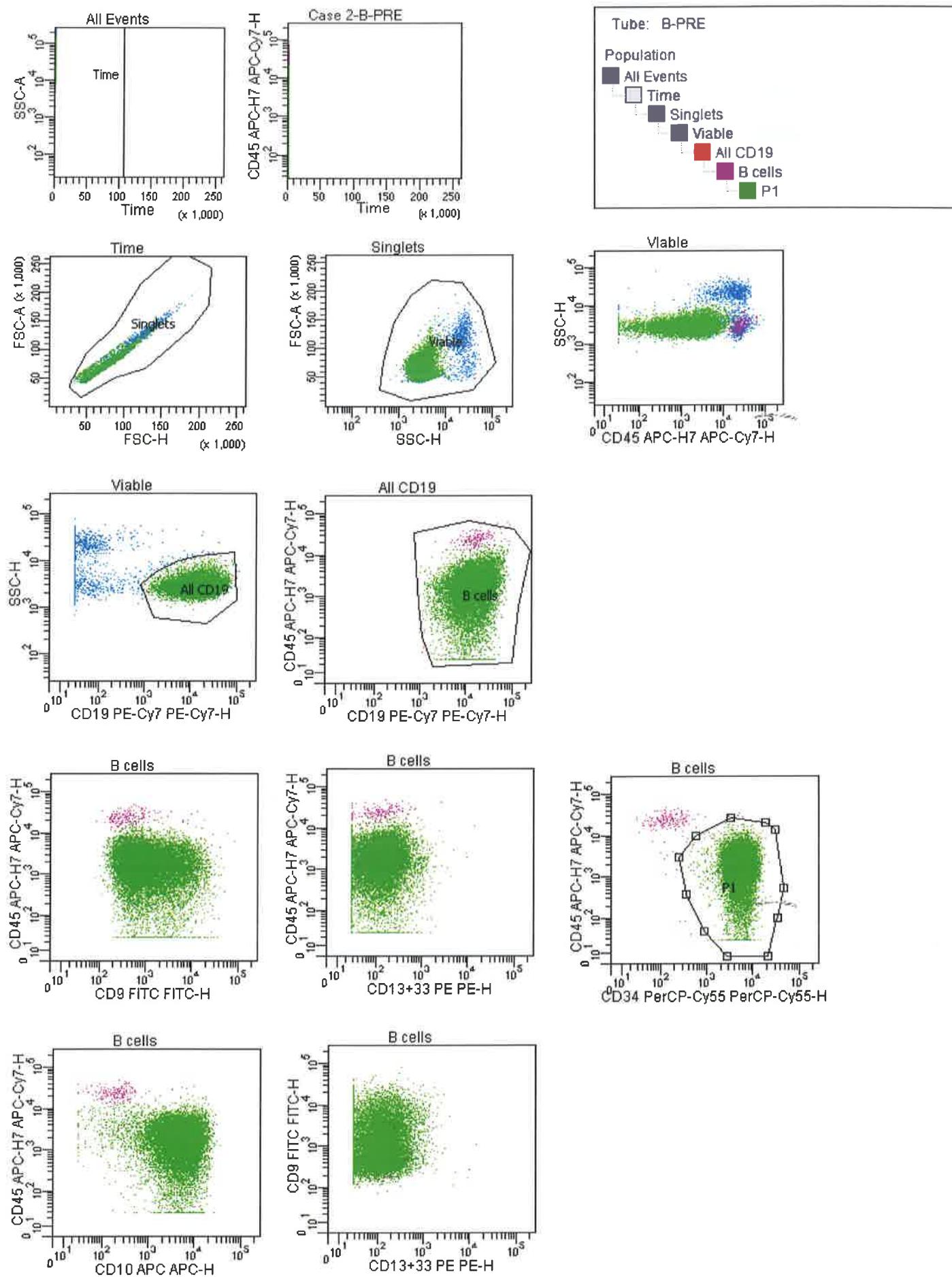
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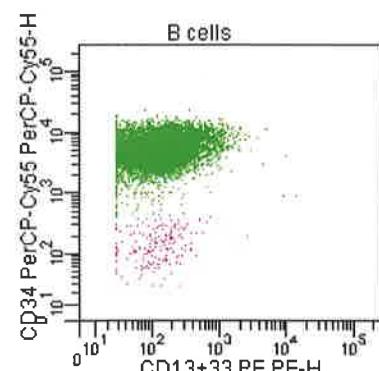
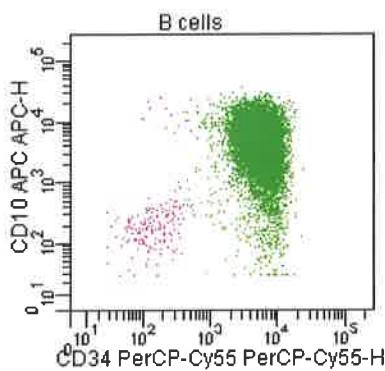
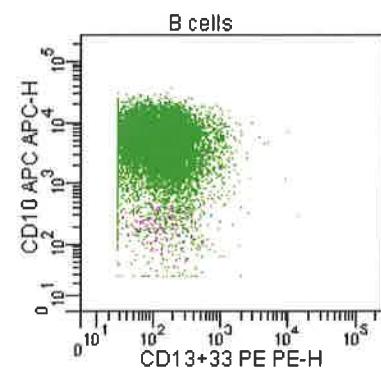
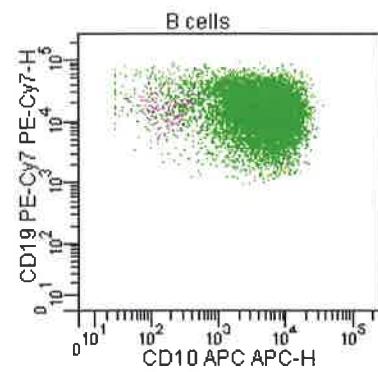
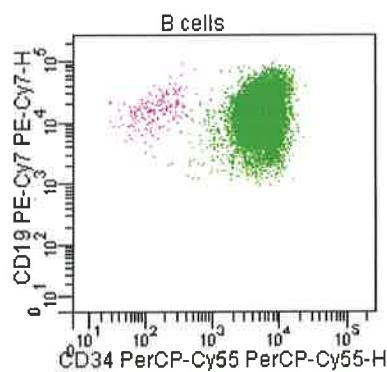
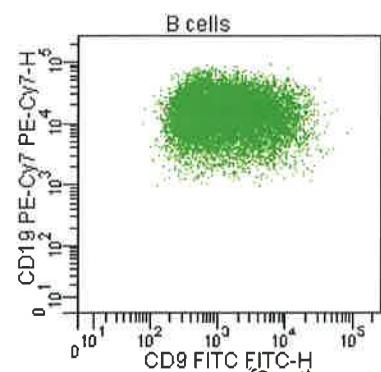
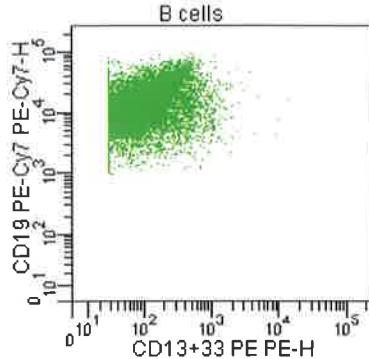
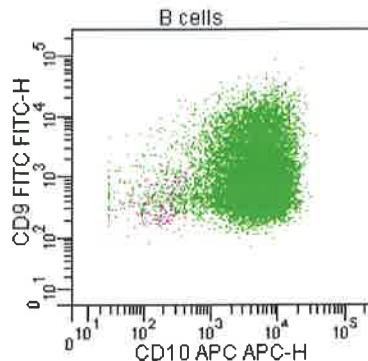
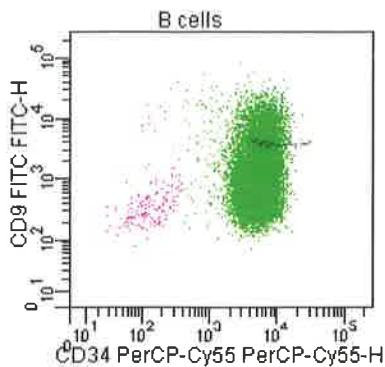
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Viable	17,336	100.0	100.0	100.0
All CD19	16,011	92.4	92.4	92.4
B cells	16,005	100.0	92.3	92.3
P1	15,808	98.8	98.7	91.2

# Children's Hospitals and Clinics



Children's Hospitals and Clinics



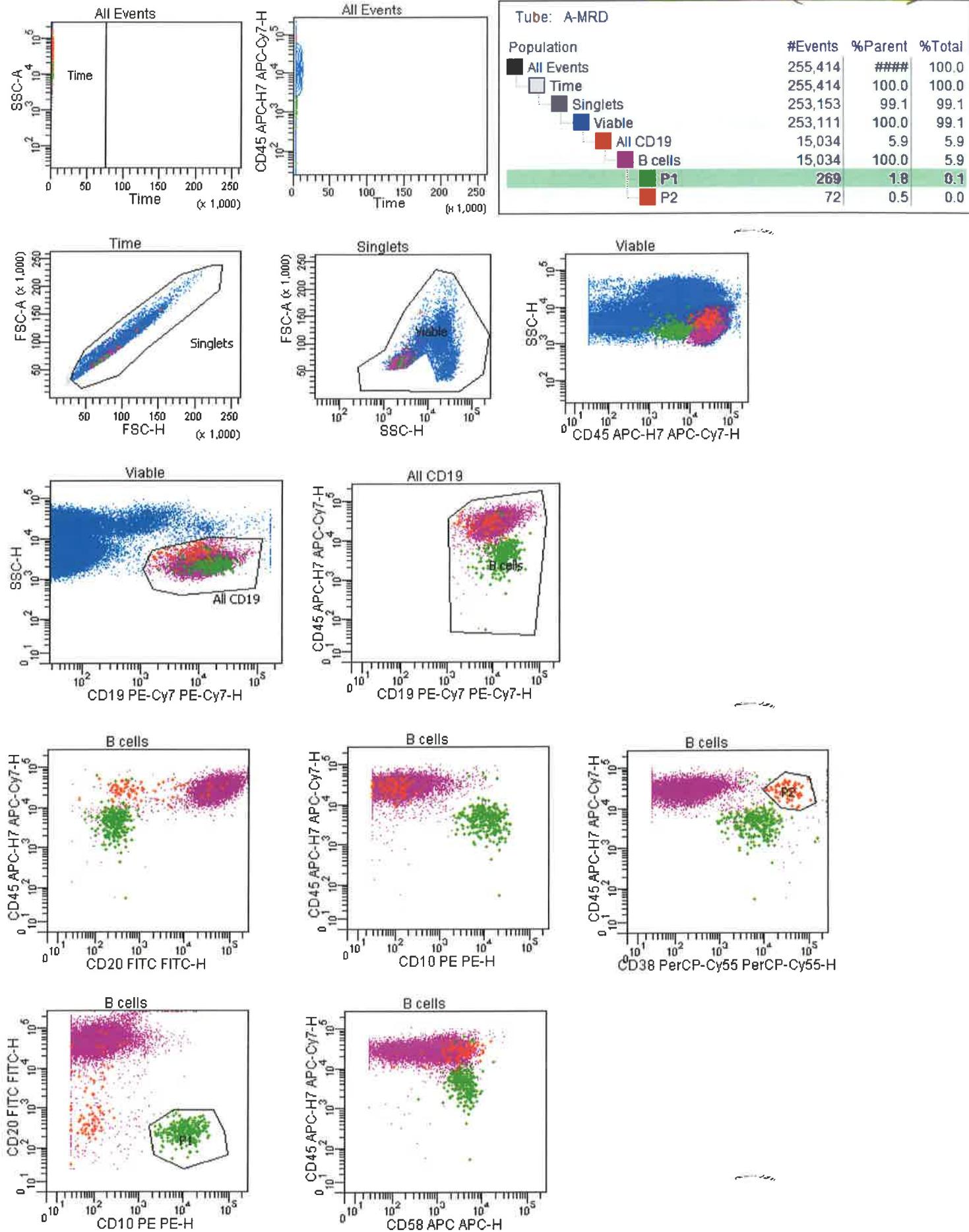
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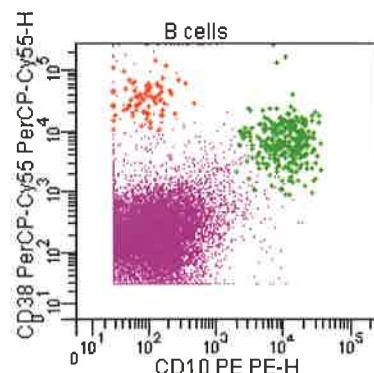
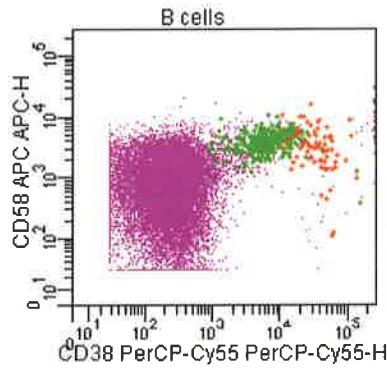
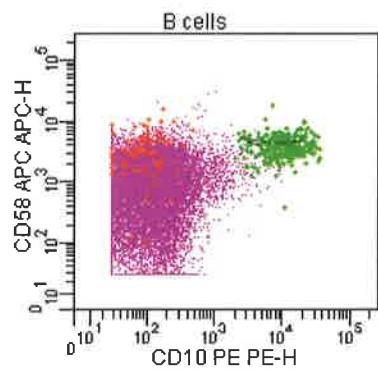
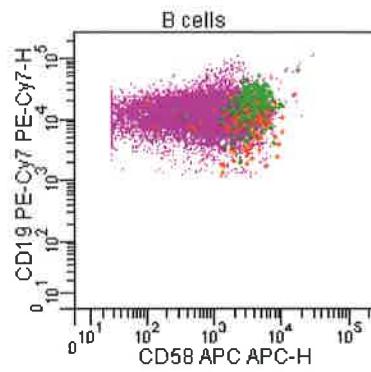
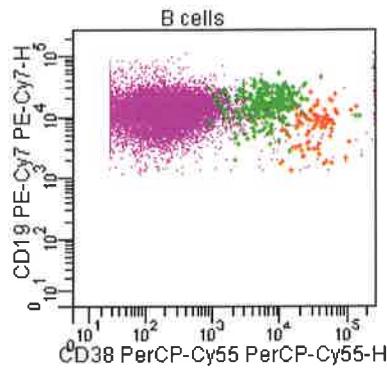
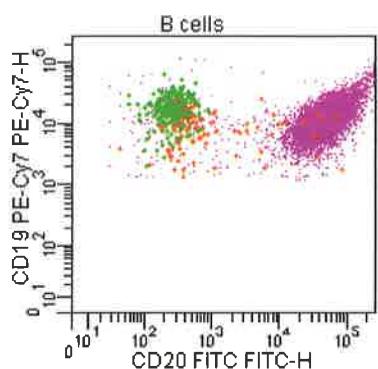
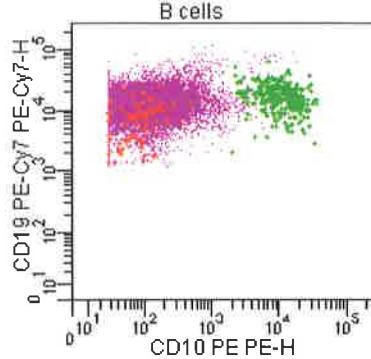
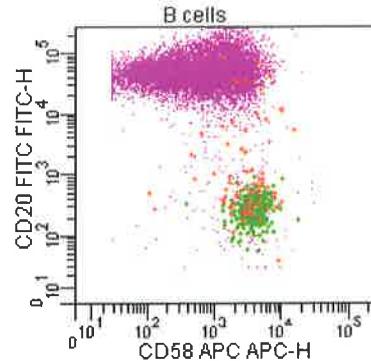
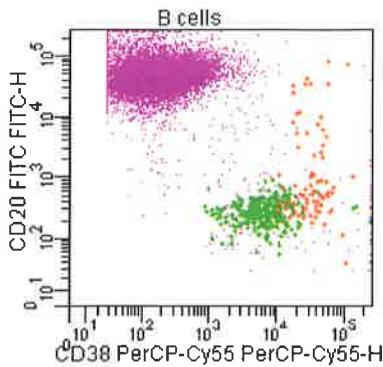
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Singlets	16,576	100.0	100.0	100.0
Viable	16,574	100.0	100.0	100.0
All CD19	15,227	91.9	91.9	91.9
B cells	15,217	99.9	91.8	91.8
P1	15,032	98.8	98.7	90.7

Children's Hospitals and Clinics

*MRD*  
BALL - v4 (Tube 1)



Children's Hospitals and Clinics



Experiment Name:

CAP BALL-B 2019 CASE 4

Specimen Name:

Case 2

Tube Name:

A-MRD

Record Date:

Apr 8, 2016 2:47:38 PM

SOP:

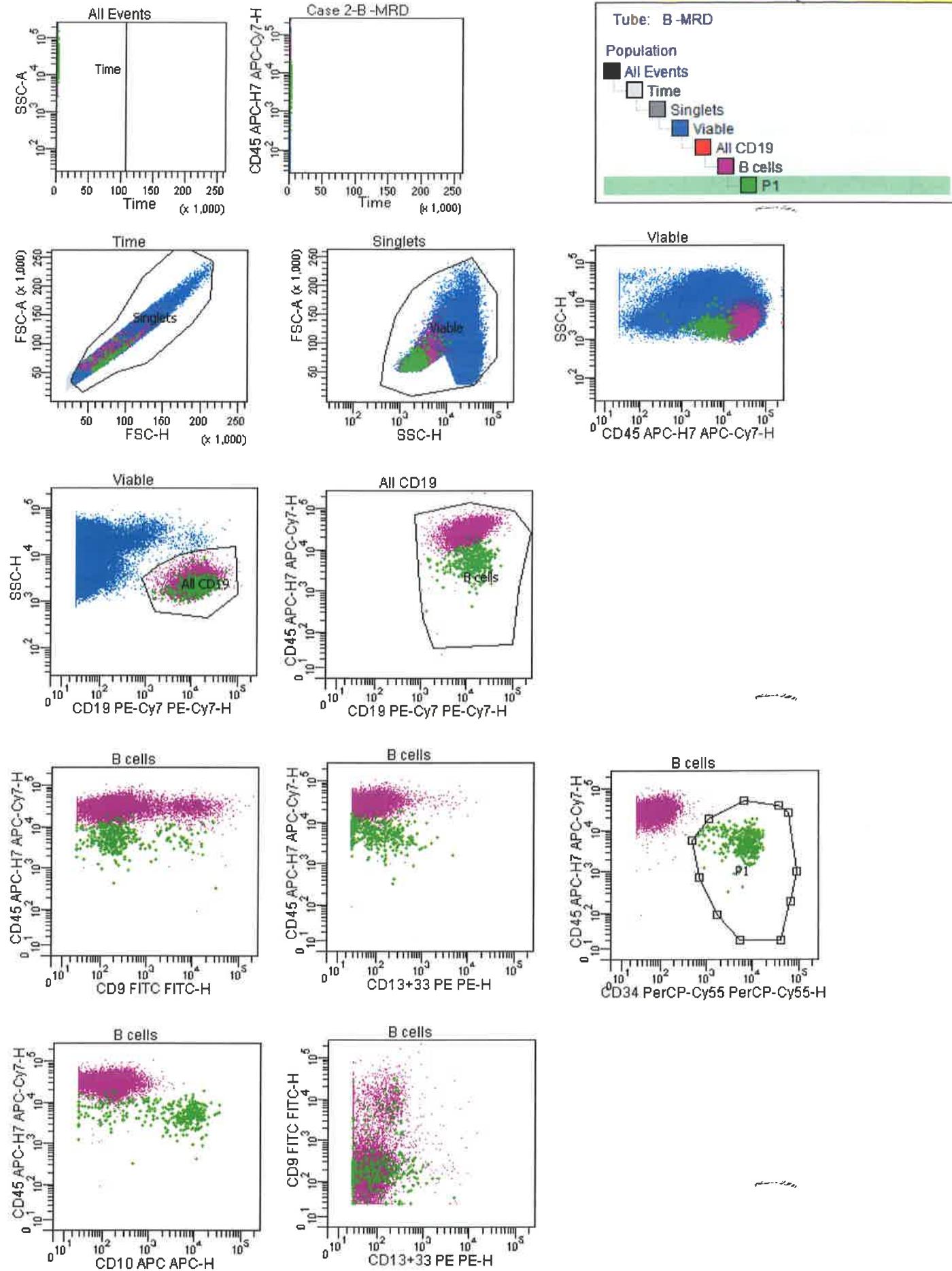
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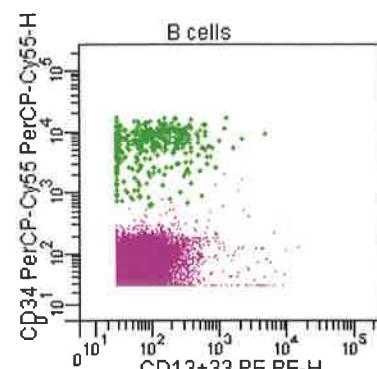
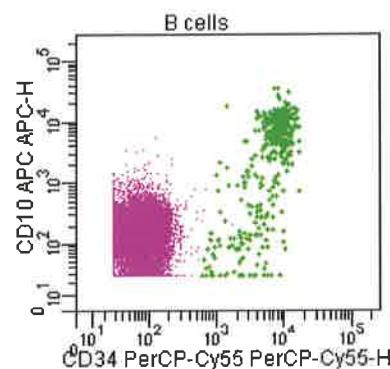
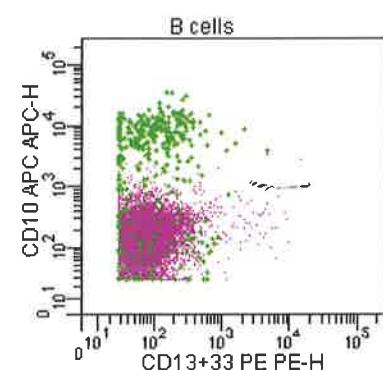
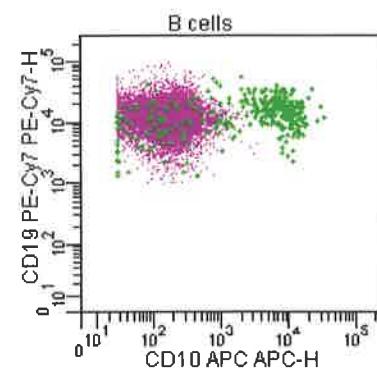
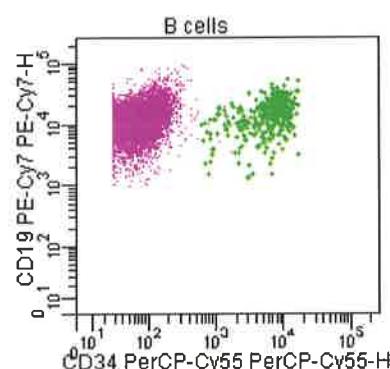
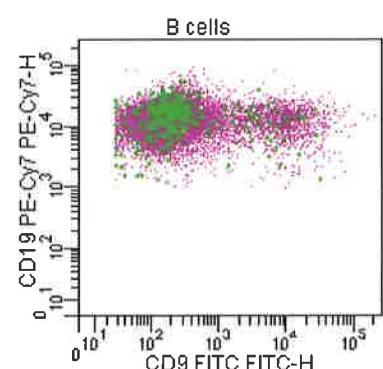
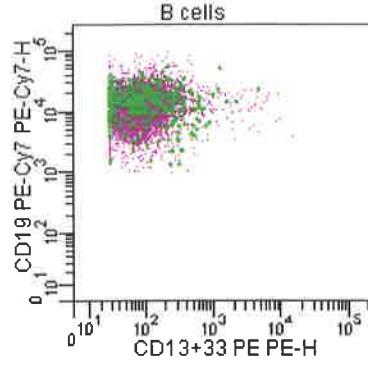
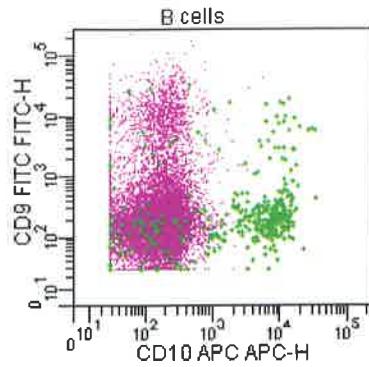
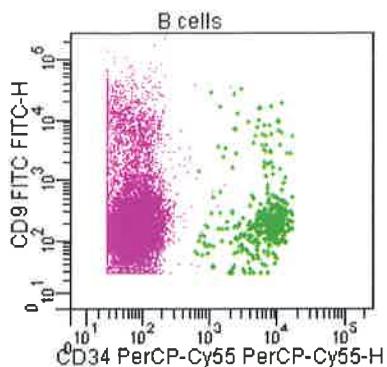
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Singlets	253,153	99.1	99.1	99.1
Viable	253,111	100.0	99.1	99.1
All CD19	15,034	5.9	5.9	5.9
B cells	15,034	100.0	5.9	5.9
P1	269	1.8	1.8	0.1
P2	72	0.5	0.5	0.0



# Children's Hospitals and Clinics



Experiment Name:

CAP BALL-B 2019 CASE 4

Specimen Name:

Case 2

Tube Name:

B-MRD

Record Date:

Apr 8, 2016 2:52:04 PM

\$OP:

HPDevelopmental

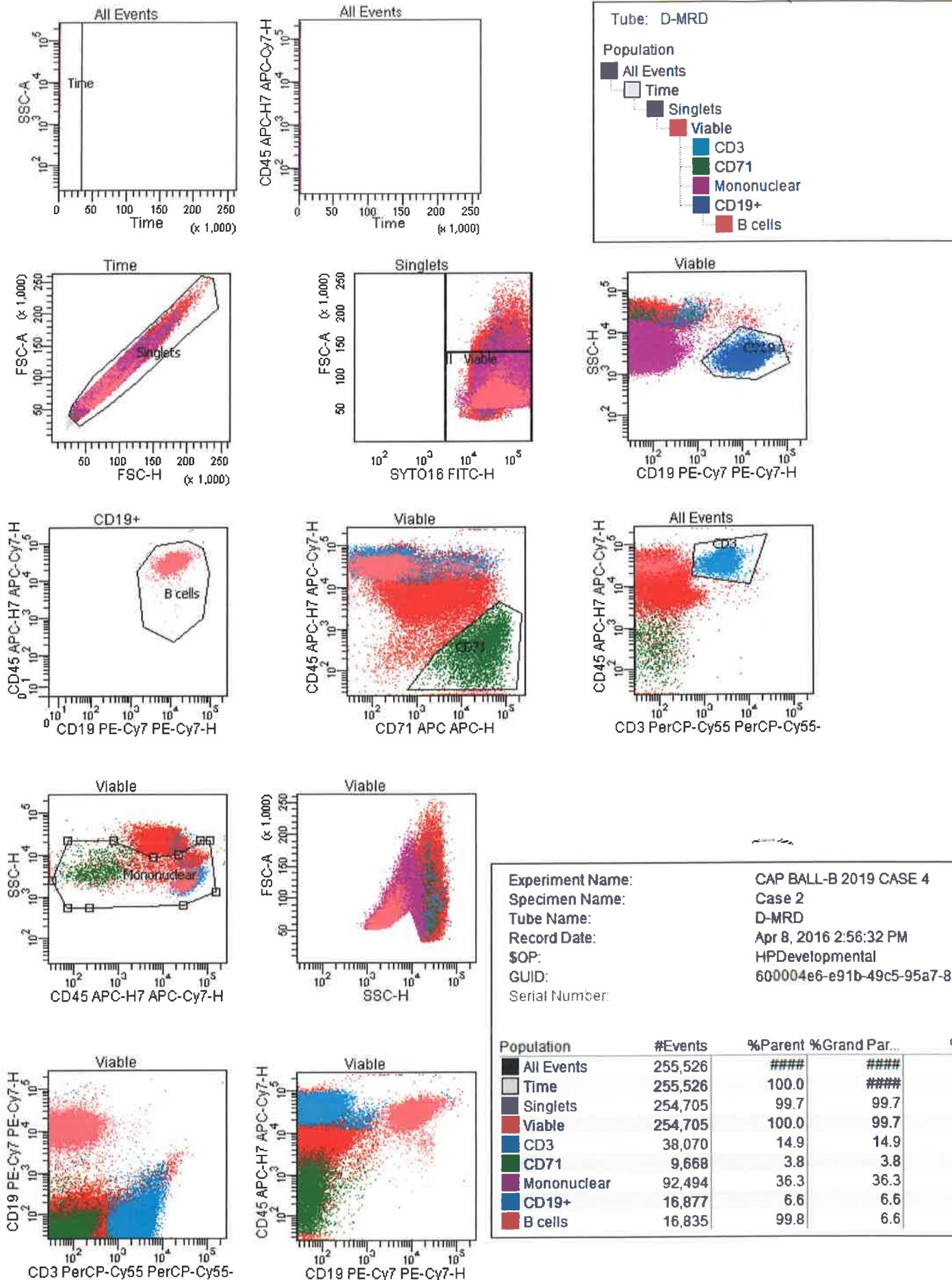
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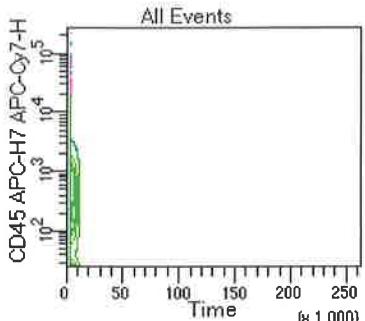
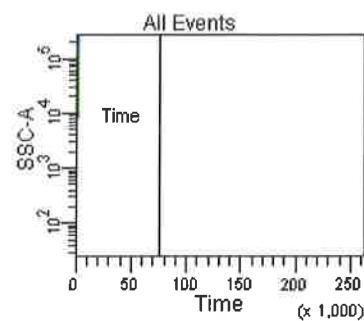
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Viable	237,729	100.0	99.4	99.4
All CD19	14,460	6.1	6.1	6.0
B cells	14,455	100.0	6.1	6.0
P1	360	2.5	2.5	0.2

Children's Hospitals and Clinics BALL-04 (mRD Tube 3)

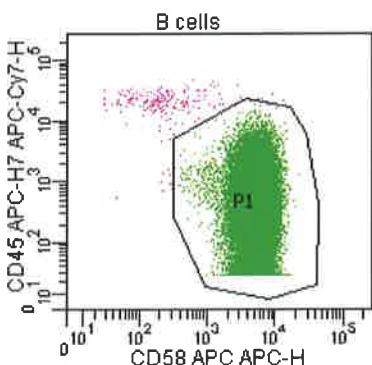
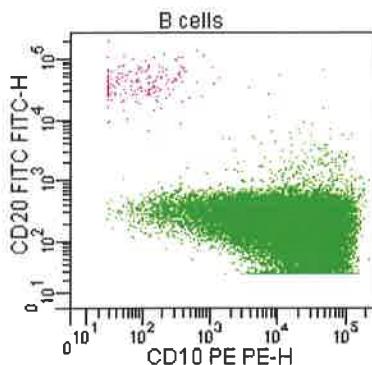
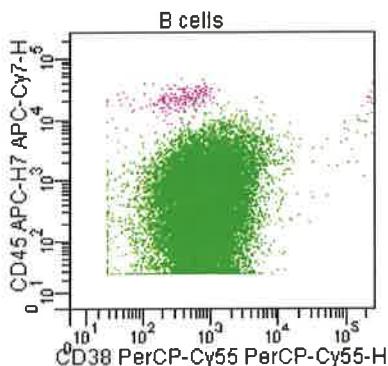
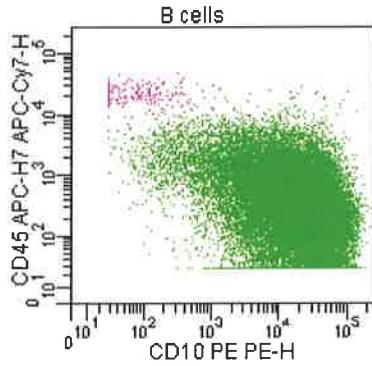
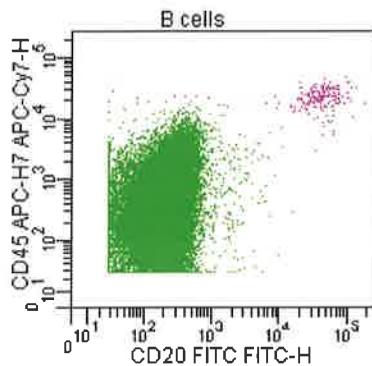
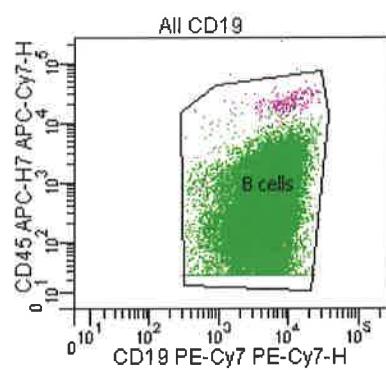
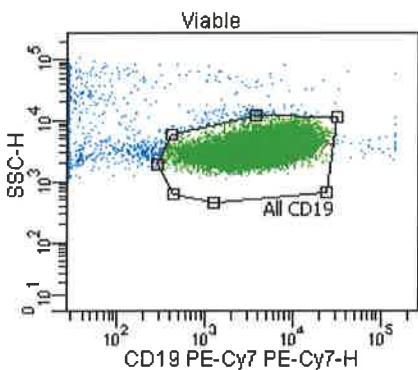
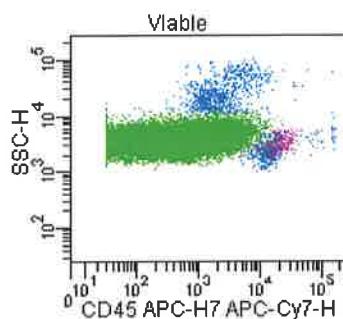
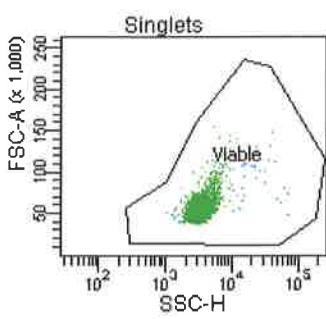
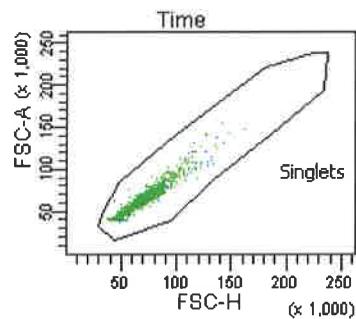




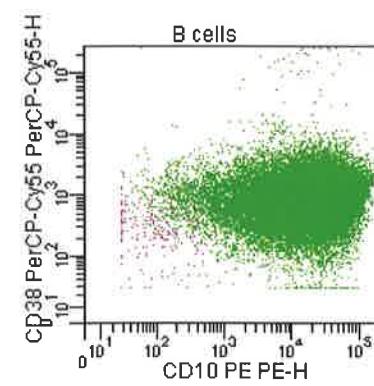
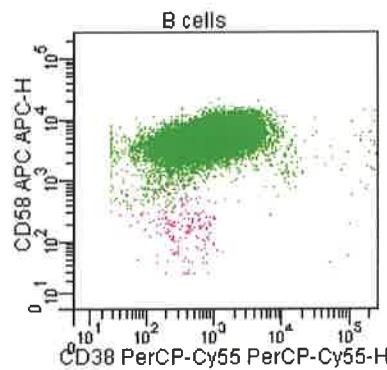
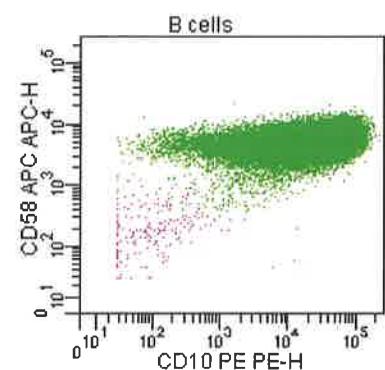
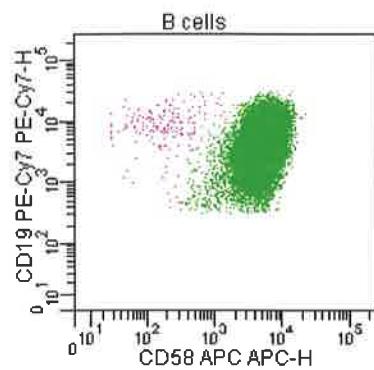
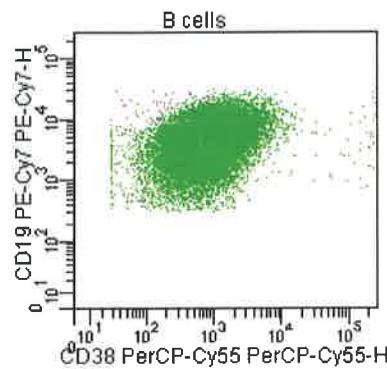
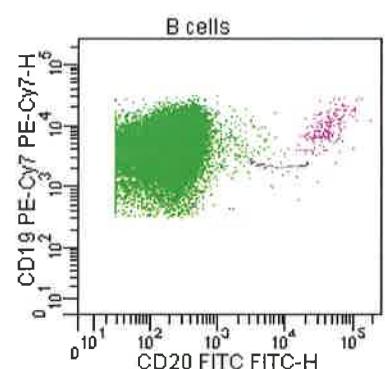
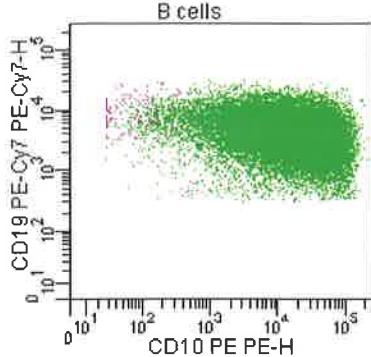
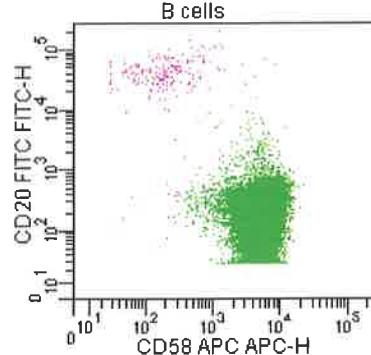
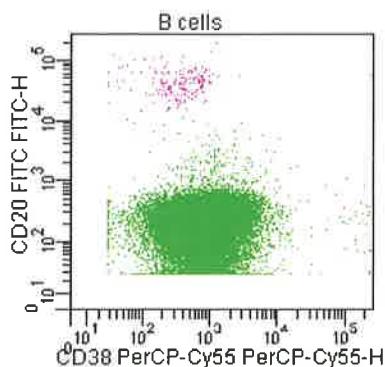


## Tube: A-PRE

Population	#Events	%Parent	%Total
All Events	34,638	####	100.0
Time	34,638	100.0	100.0
Singlets	34,637	100.0	100.0
Viable	34,637	100.0	100.0
All CD19	33,002	95.3	95.3
B cells	32,992	100.0	95.2
P1	32,778	99.4	94.6



Children's Hospitals and Clinics

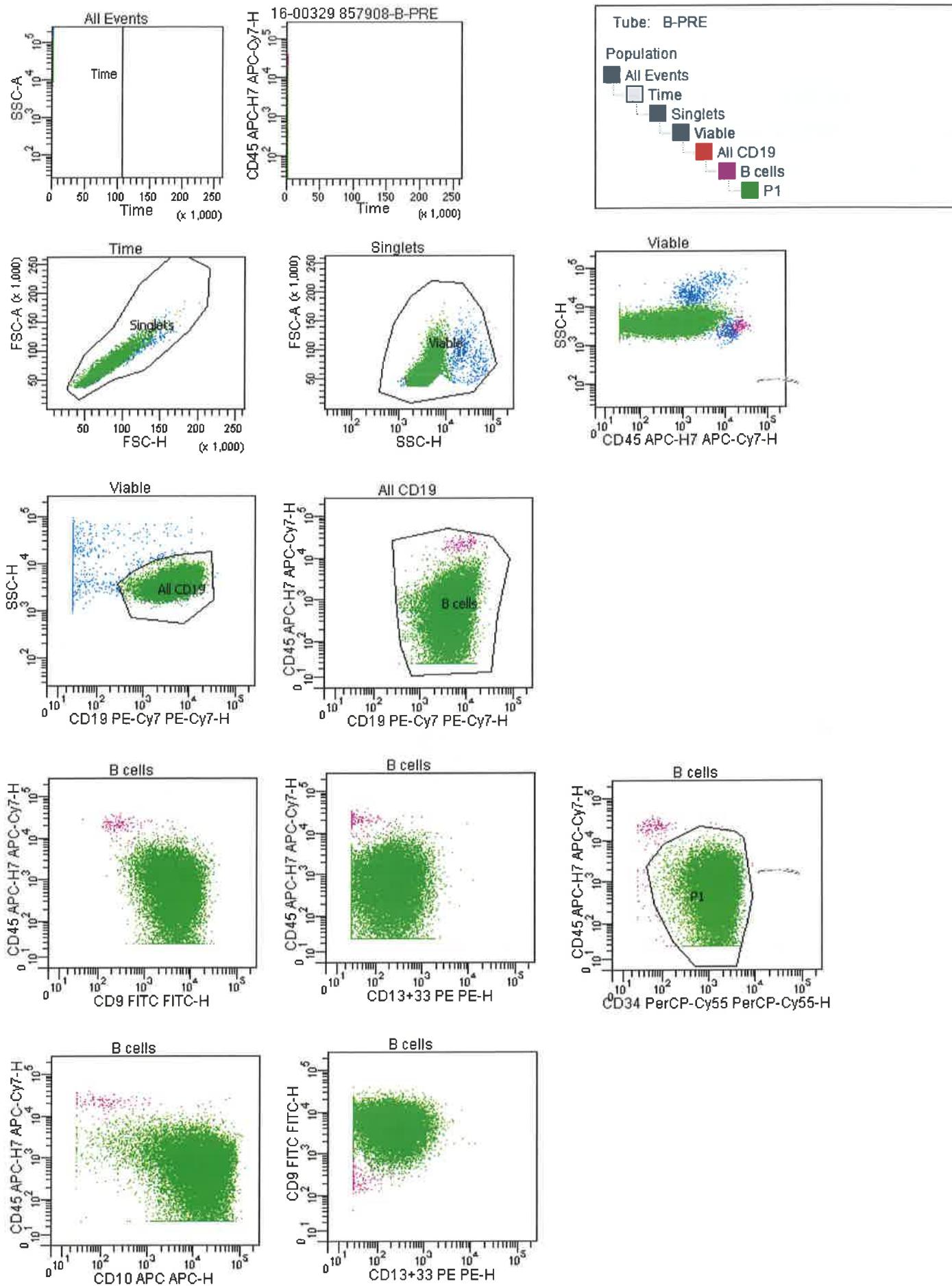


Experiment Name:  
Specimen Name:  
Tube Name:  
Record Date:  
\$OP:  
GUID:  
Serial Number:

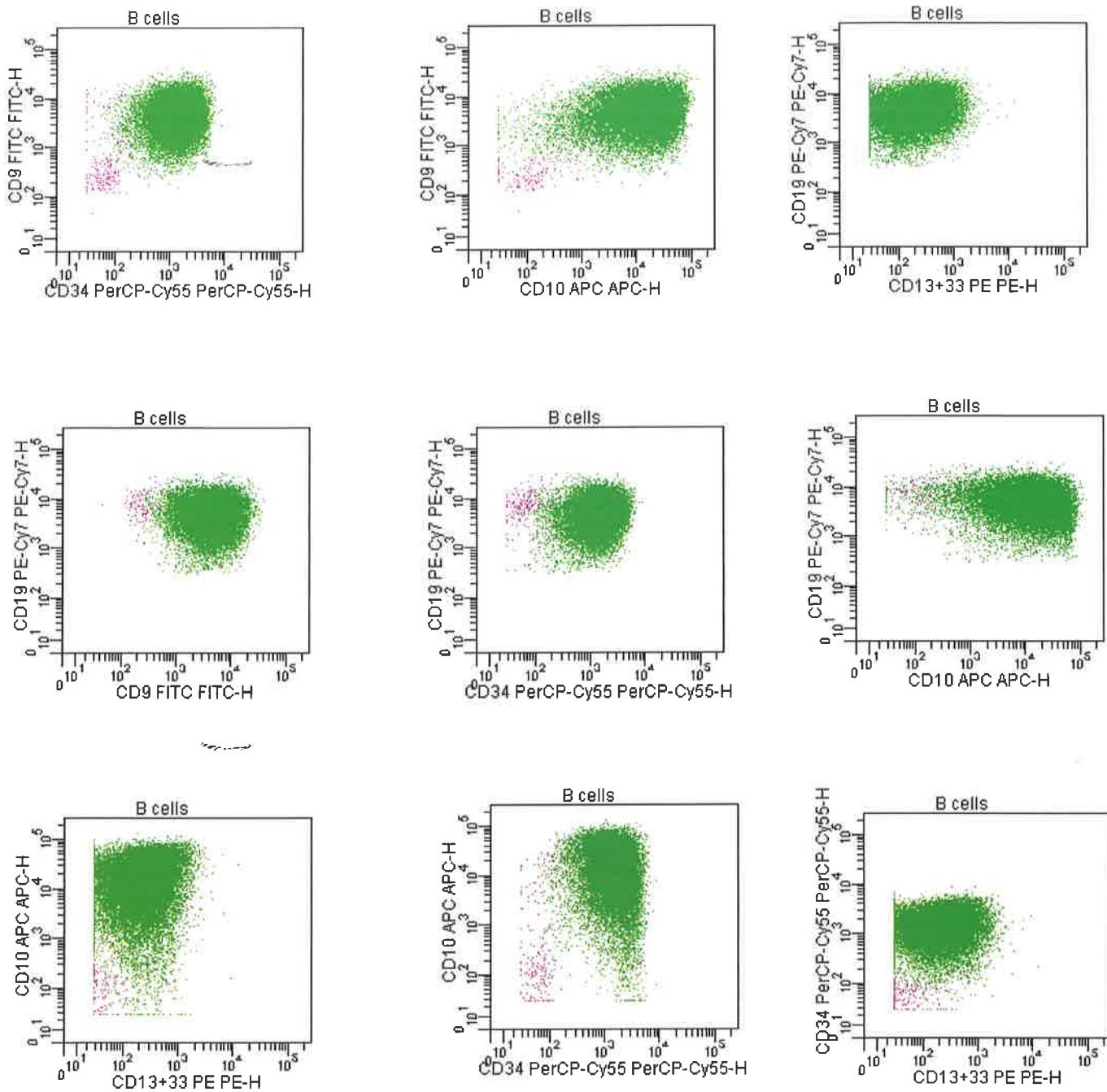
CAP BALL-B 2019 CASE 5  
16-00329 857908  
A-PRE  
Jan 7, 2016 5:13:31 PM  
HPDevelopmental  
050b23cd-64ed-470a-9c49-af13ff97cfaf

Population	#Events	%Parent	%Grand Parent	%Total
All Events	34,638	####	####	100.0
Time	34,638	100.0	####	100.0
Singlets	34,637	100.0	100.0	100.0
Viable	34,637	100.0	100.0	100.0
All CD19	33,002	95.3	95.3	95.3
B cells	32,992	100.0	95.3	95.2
P1	32,778	99.4	99.3	94.6

Children's Hospitals and Clinics

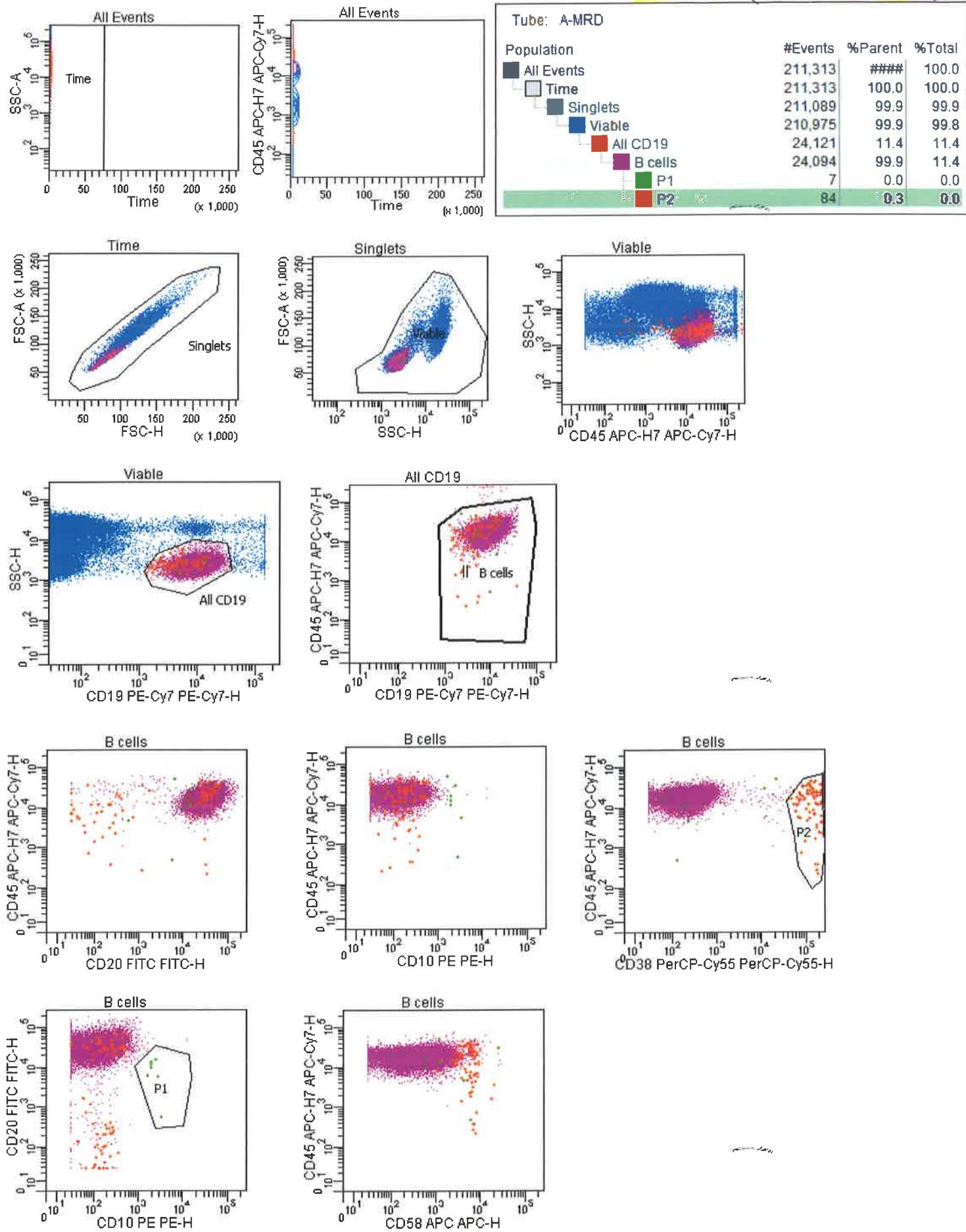


Children's Hospitals and Clinics

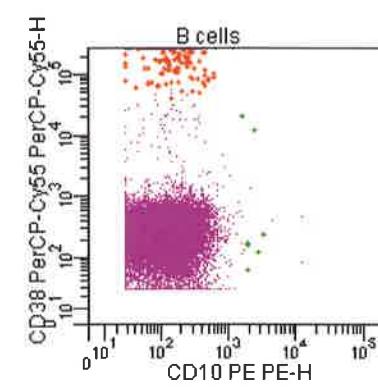
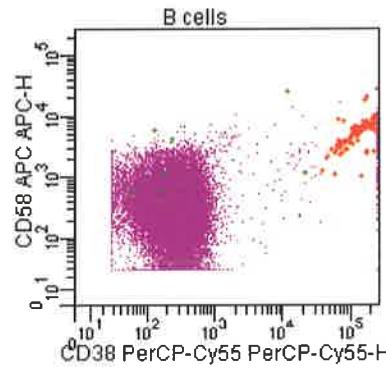
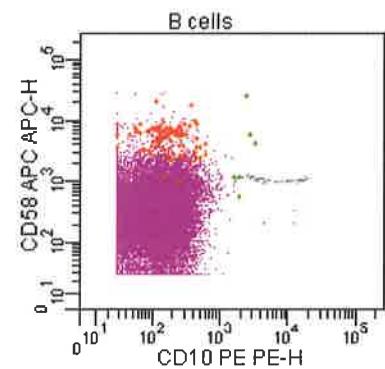
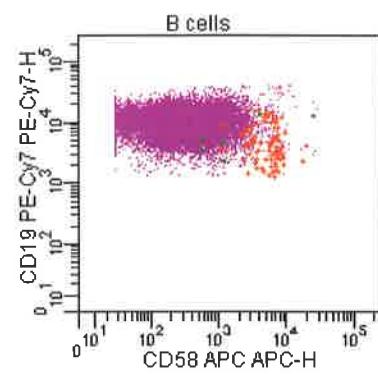
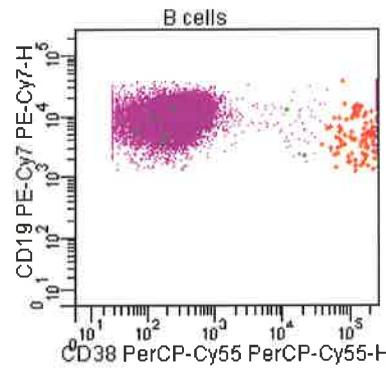
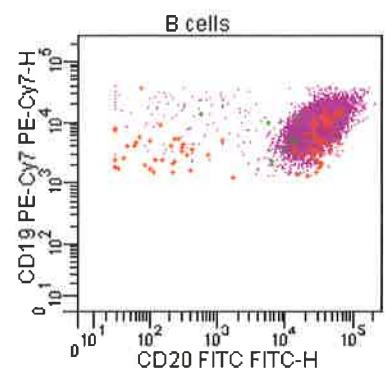
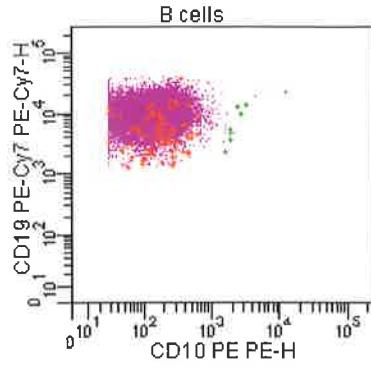
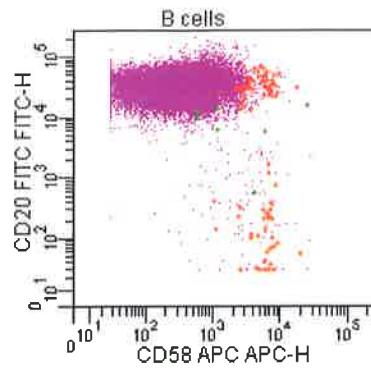
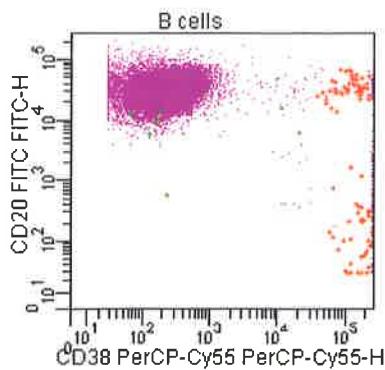


Experiment Name:	CAP BALL-B 2019 CASE 5
Specimen Name:	16-00329 857908
Tube Name:	B-PRE
Record Date:	Jan 7, 2016 5:14:20 PM
SOP:	HPDevelopmental
GUID:	22d6c374-6fb5-4b62-a838-028e5d8daa12
Serial Number:	

Population	#Events	%Parent	%Grand Parent	%Total
All Events	23,560	####	####	100.0
Time	23,560	100.0	####	100.0
Singlets	23,559	100.0	100.0	100.0
Viable	23,550	100.0	100.0	100.0
All CD19	22,497	95.5	95.5	95.5
B cells	22,491	100.0	95.5	95.5
P1	22,302	99.2	99.1	94.7



Children's Hospitals and Clinics



Experiment Name:

CAP BALL-B 2019 CASE 5

Specimen Name:

16-02321 857908

Tube Name:

A-MRD

Record Date:

Feb 3, 2016 2:12:04 PM

\$OP:

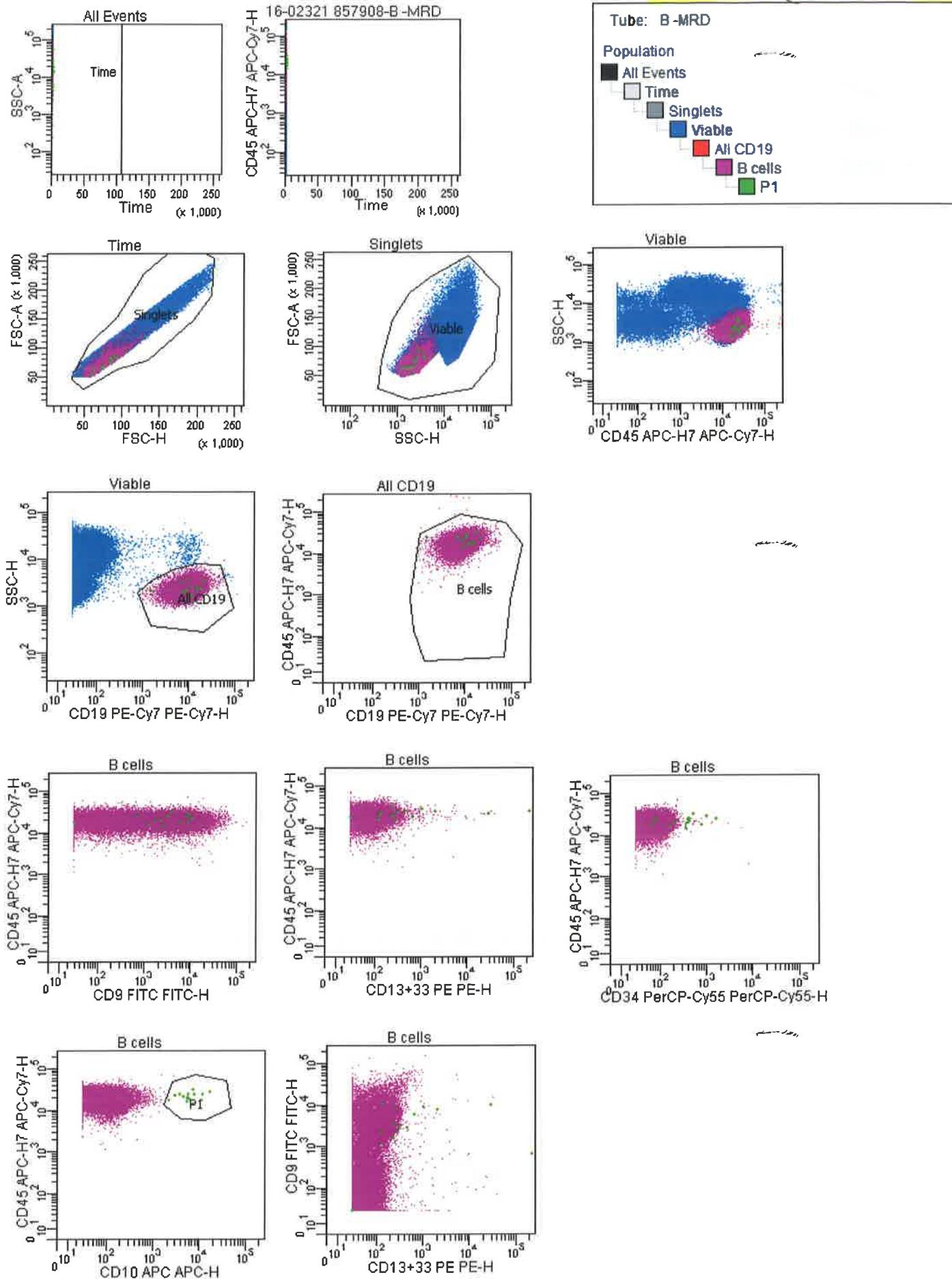
HPDevelopmental

GUID:

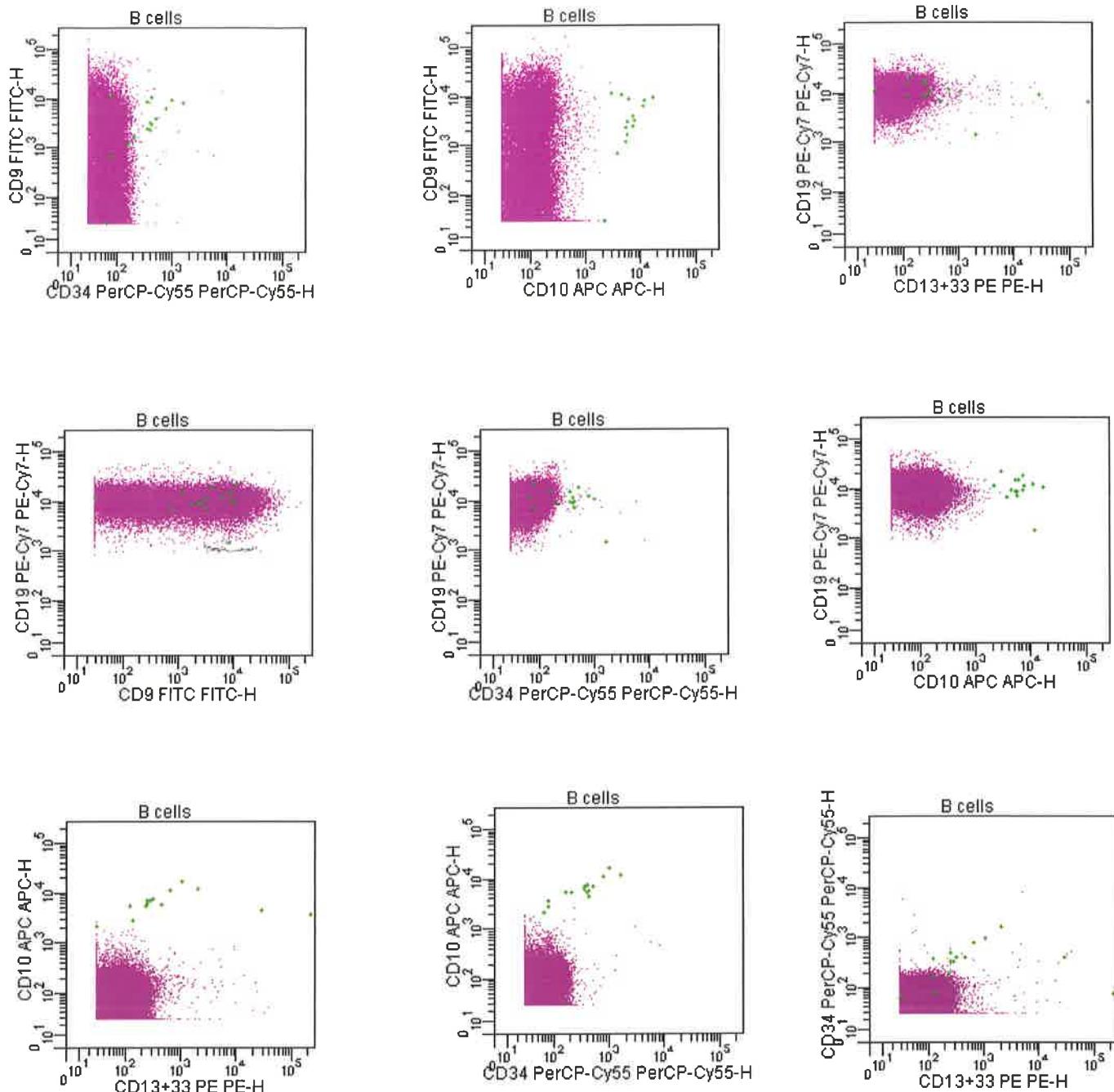
801c3f59-0c7e-44e2-b8ff-618864781a80

Serial Number:

Population	#Events	%Parent	%Grand Parent	%Total
All Events	211,313	####	####	100.0
Time	211,313	100.0	####	100.0
Singlets	211,089	99.9	99.9	99.9
Viable	210,975	99.9	99.8	99.8
All CD19	24,121	11.4	11.4	11.4
B cells	24,094	99.9	11.4	11.4
P1	7	0.0	0.0	0.0
P2	84	0.3	0.3	0.0

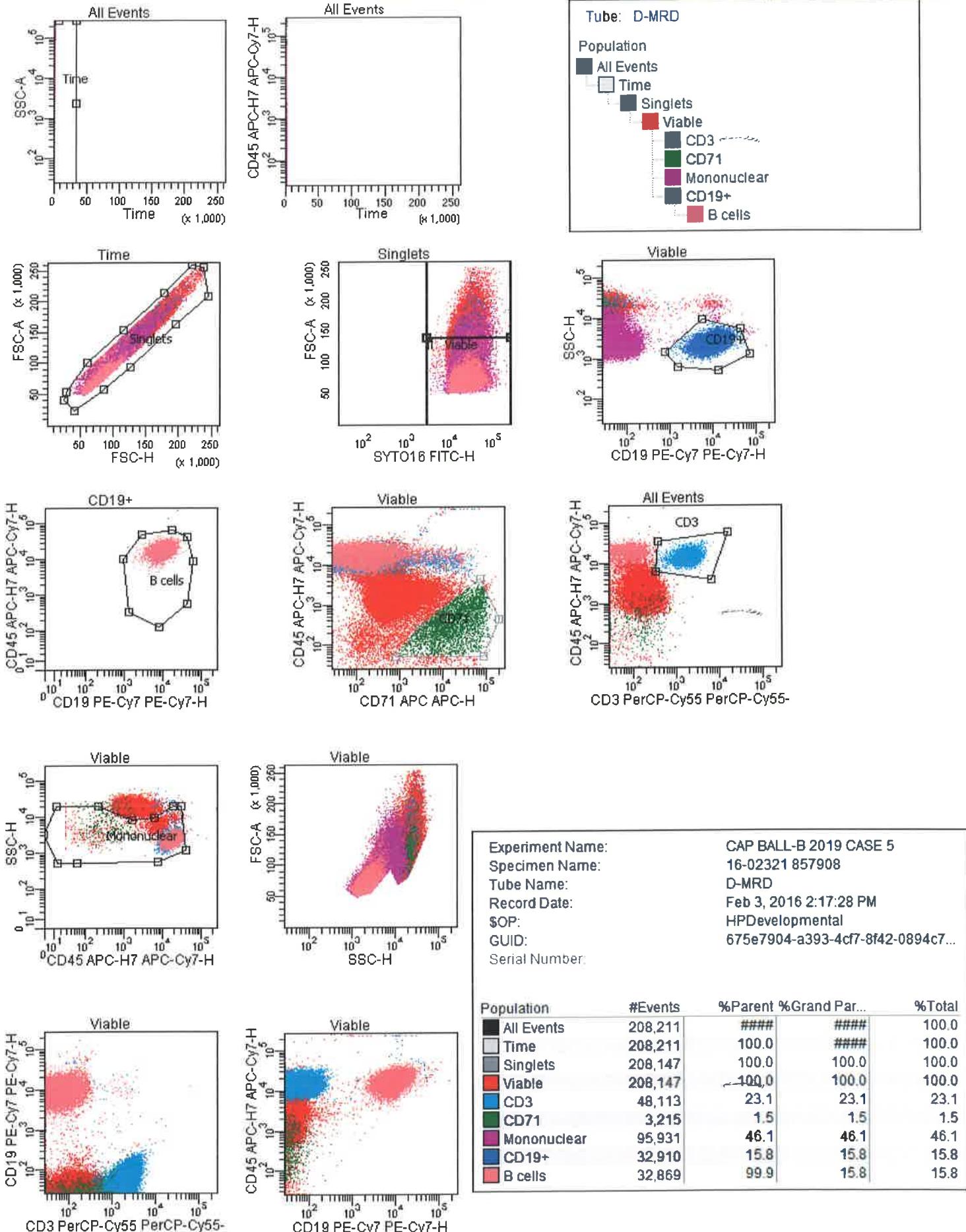


Children's Hospitals and Clinics



Experiment Name:	CAP BALL-B 2019 CASE 5
Specimen Name:	16-02321 857908
Tube Name:	B -MRD
Record Date:	Feb 3, 2016 2:15:00 PM
SOP:	HPDevelopmental
GUID:	c27cc70c-6b7c-4aa5-9b70-a2445c62d4de
Serial Number:	

Population	#Events	%Parent	%Grand Parent	%Total
All Events	202,164	####	####	100.0
Time	202,164	100.0	####	100.0
Singlets	201,965	99.9	99.9	99.9
Viable	201,964	100.0	99.9	99.9
All CD19	34,687	17.2	17.2	17.2
B cells	34,676	100.0	17.2	17.2
P1	15	0.0	0.0	0.0







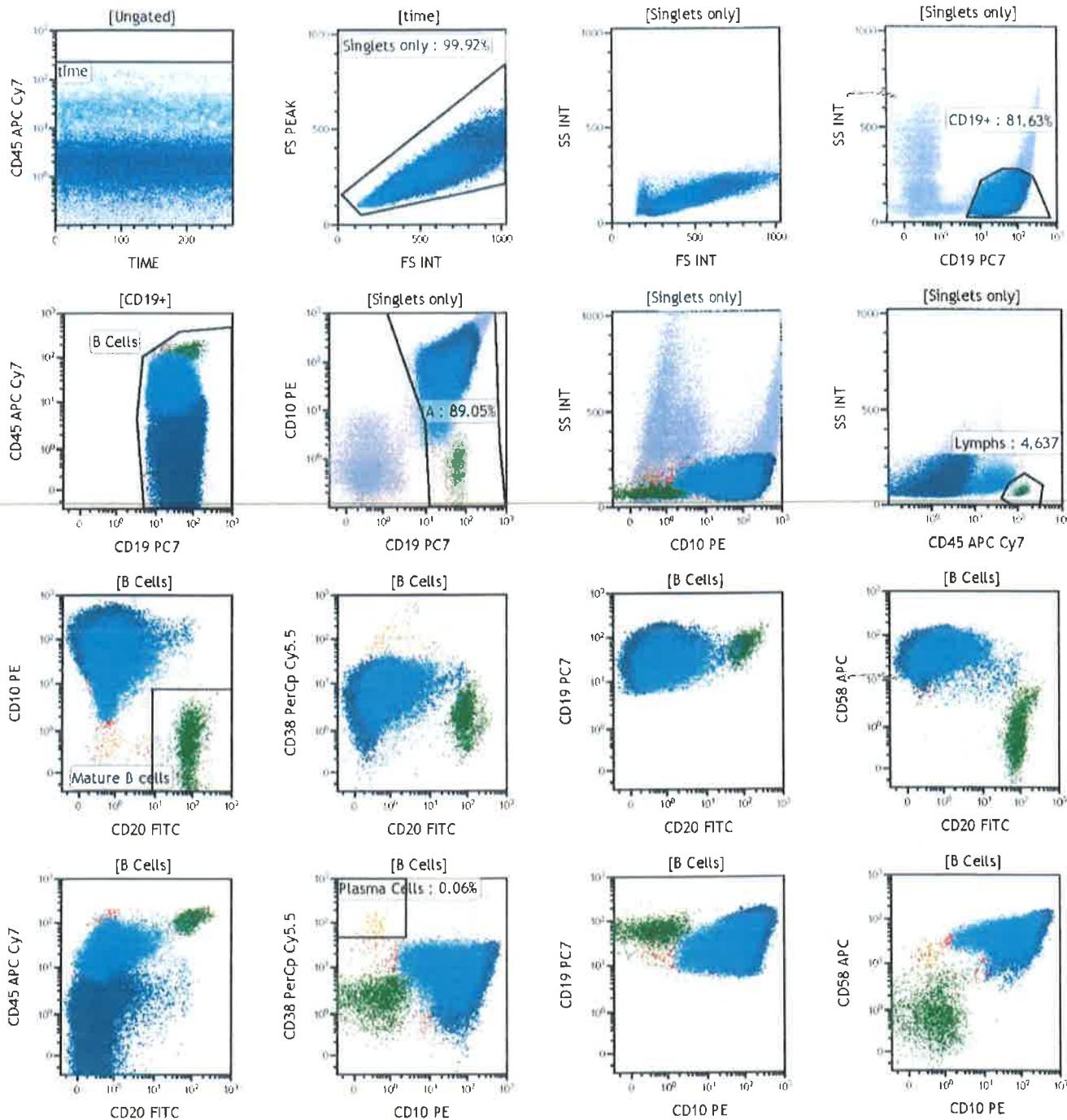
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PATHOLOGISTS

FLOW CYTOMETRY  
B-ALL MINIMAL  
RESIDUAL DISEASE  
BALL-B 2019 (BALL-06)

CAP 2019

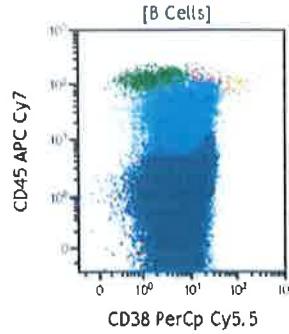
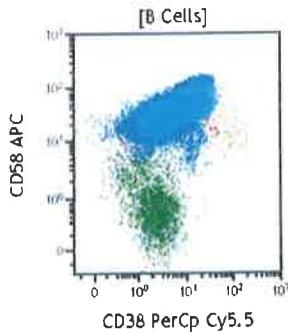
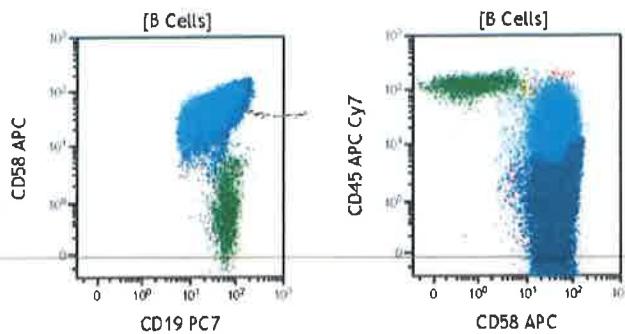
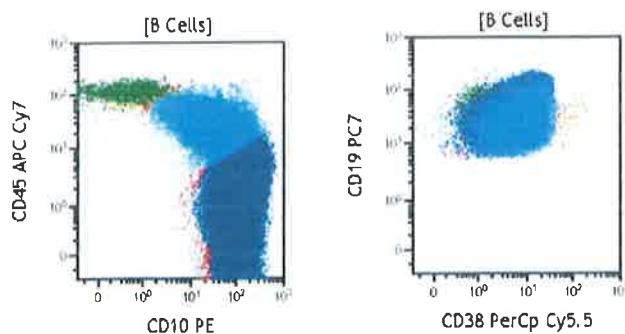
BALL-06

Diagnostic Phenotype at Onset of Disease  
Tube 1



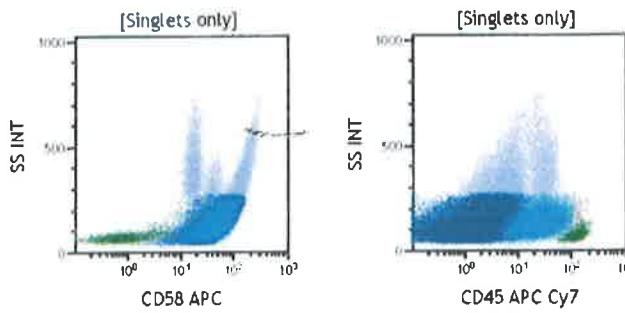
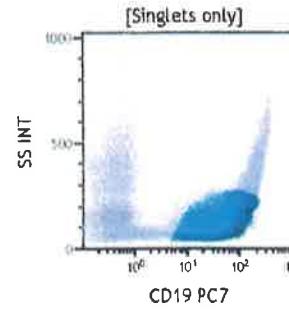
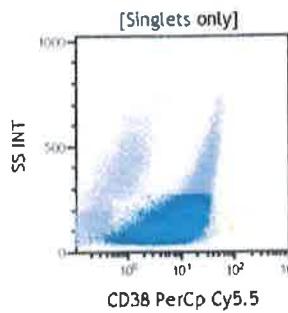
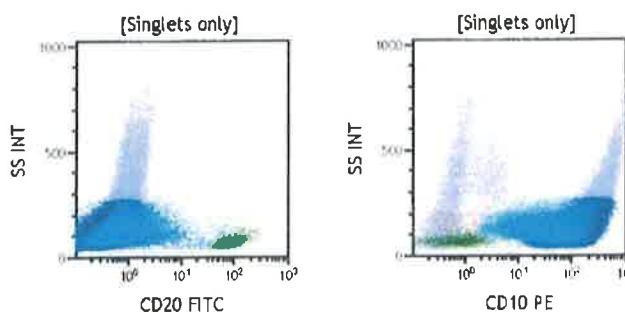


Diagnostic Phenotype at Onset of Disease  
Tube 1, cont'd



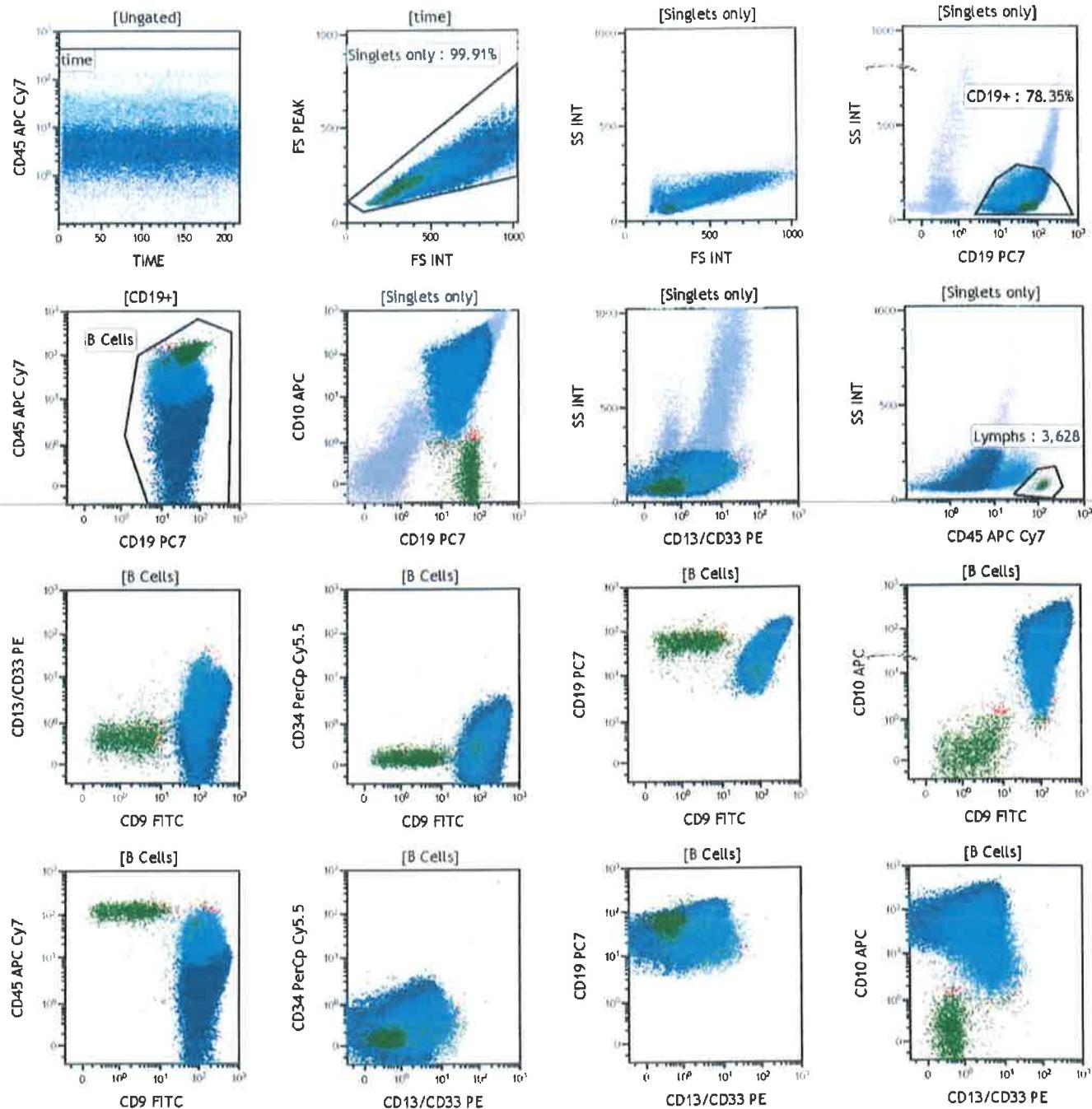
Total # 149,417  
[Abnormal] Number 99,458  
[B Cells] Number 121,676  
[Lymphs] Number 4,637

[Abnormal] of B cells 81.740%  
[Abnormal] of Lymphs 2,144.878%



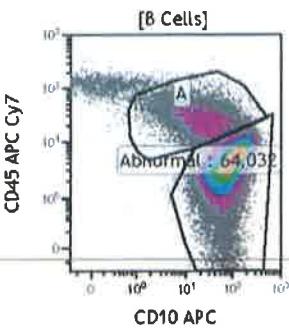
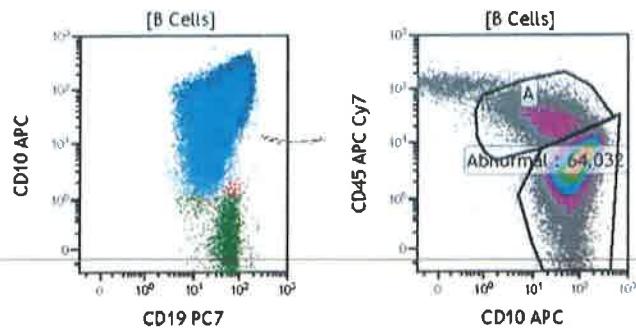
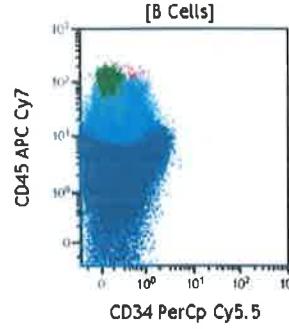
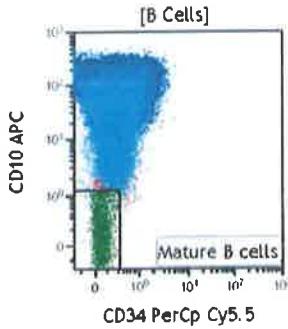
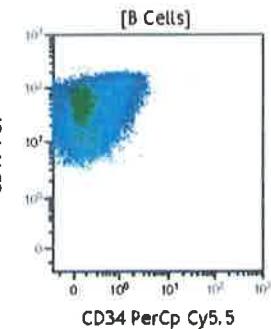
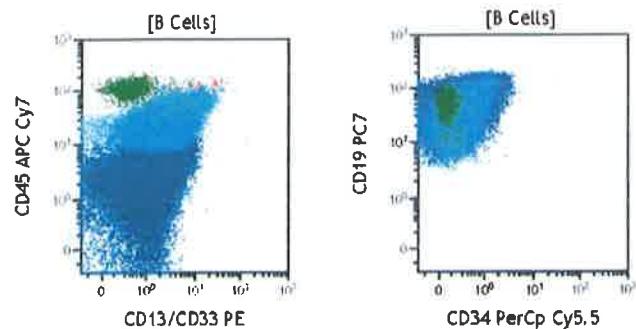


Diagnostic Phenotype at Onset of Disease  
Tube 2





Diagnostic Phenotype at Onset of Disease  
Tube 2, cont'd



Total # 102,422

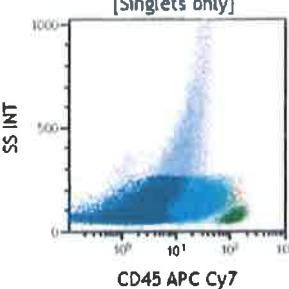
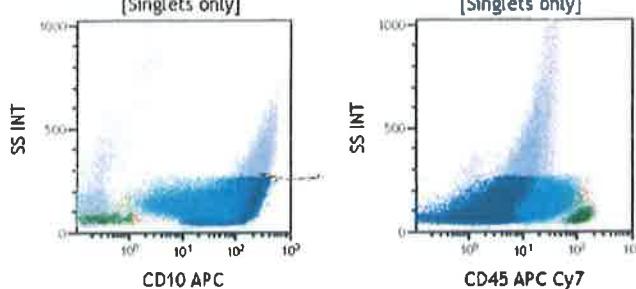
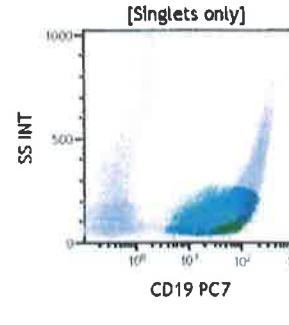
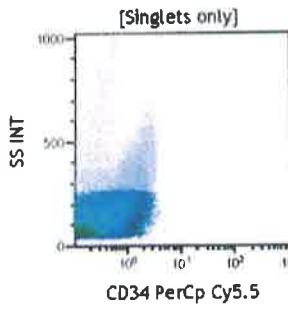
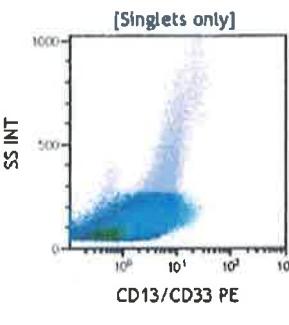
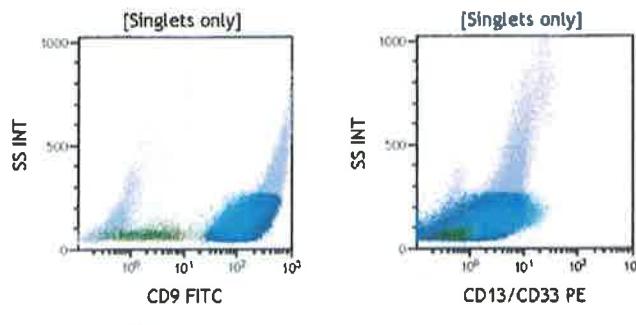
[Abnormal] Number 64,032

[B Cells] Number 80,147

[Lymphs] Number 3,628

[Abnormal] of B cells 79.893%

[Abnormal] of Lymphs 1,764.939%





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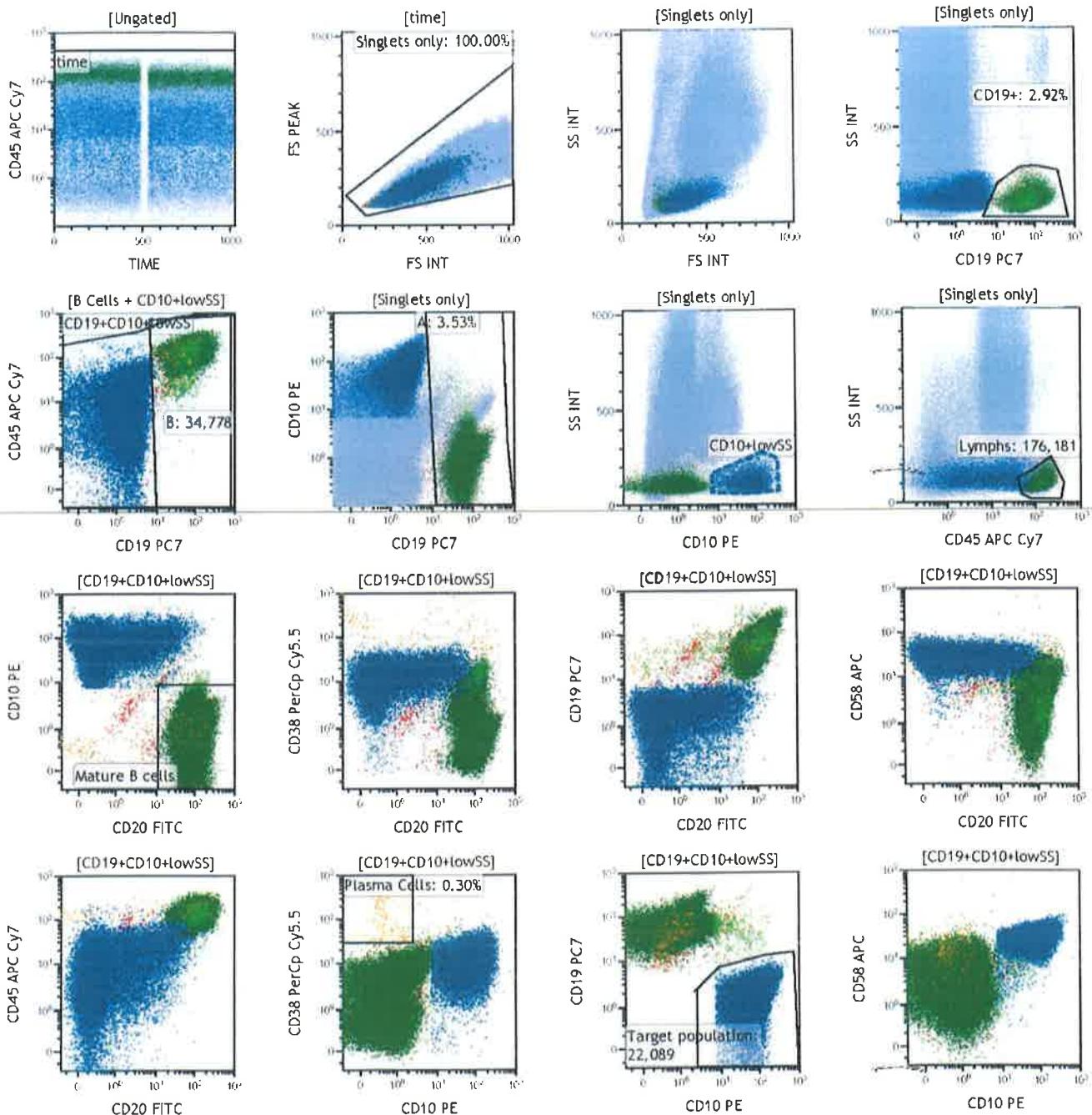
FLOW CYTOMETRY  
B-ALL MINIMAL  
RESIDUAL DISEASE  
BALL-B 2019 (BALL-06)

\*CAP 2019

BALL-06

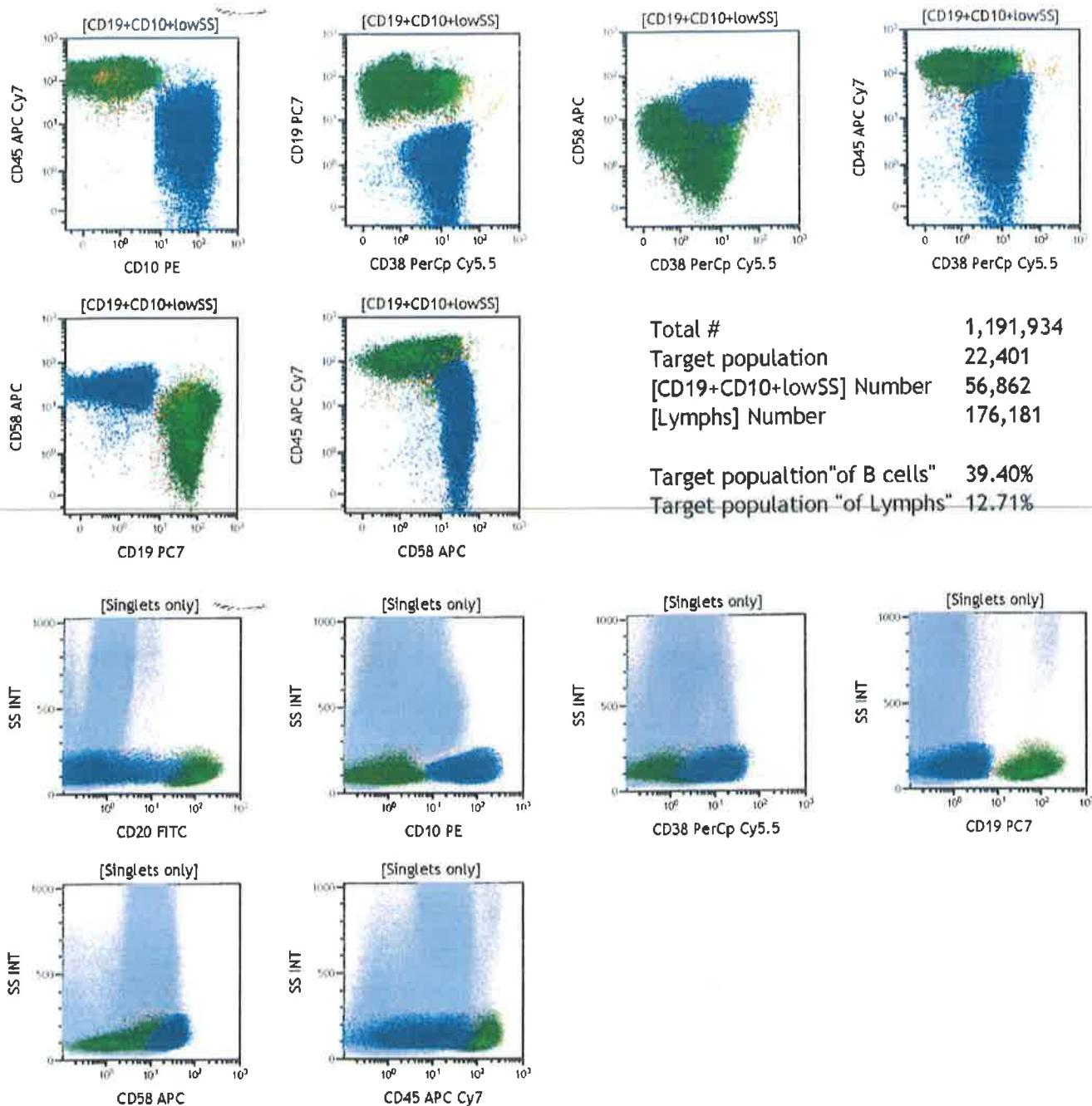
Day 29 - Tube 1

Note: Patient has received autologous chimeric antigen receptor T cells expressing anti-CD19 (CAR-T cell therapy).





Day 29 - Tube 1, cont'd





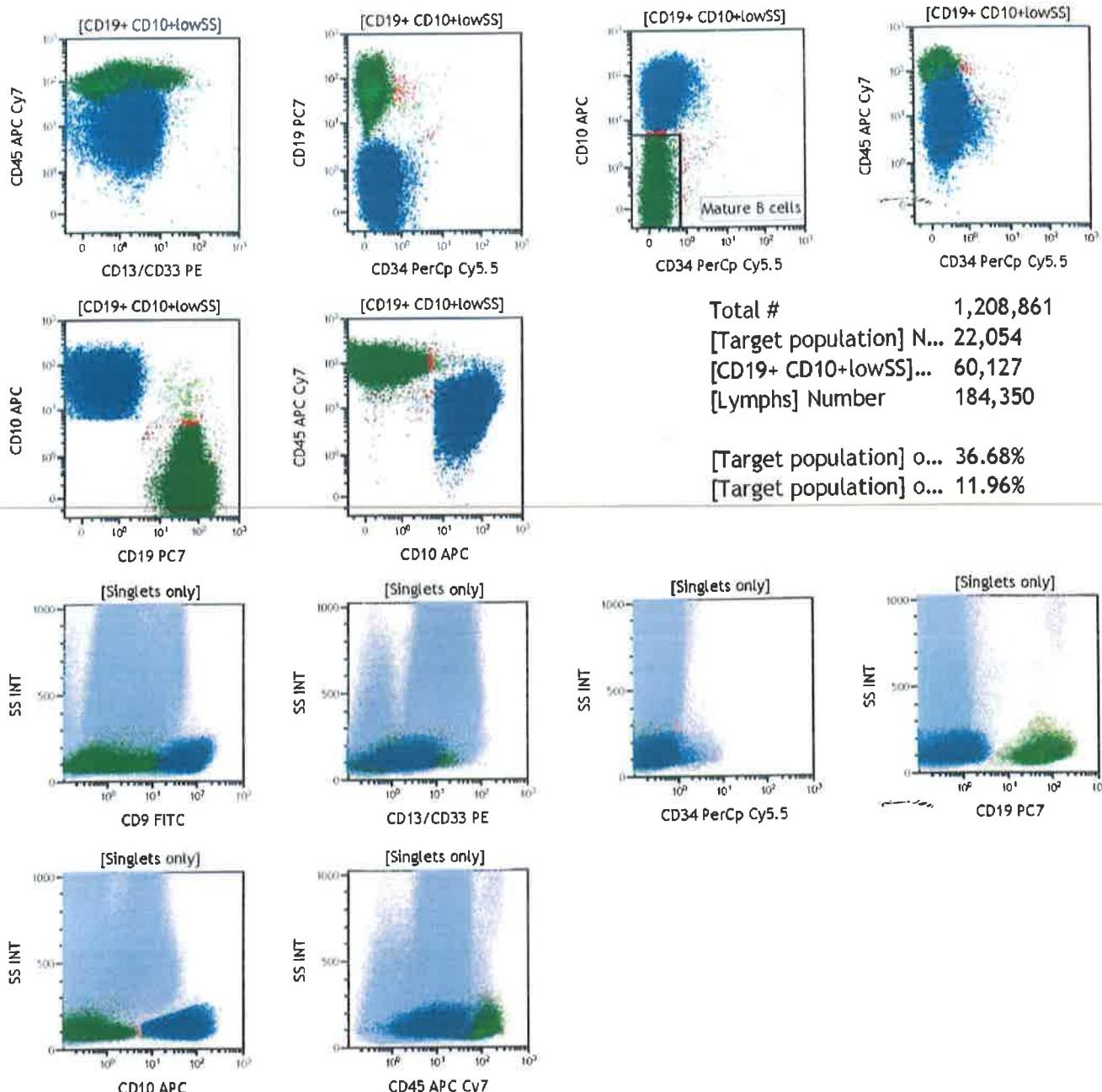
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FLOW CYTOMETRY  
B-ALL MINIMAL  
RESIDUAL DISEASE  
BALL-B 2019 (BALL-06)

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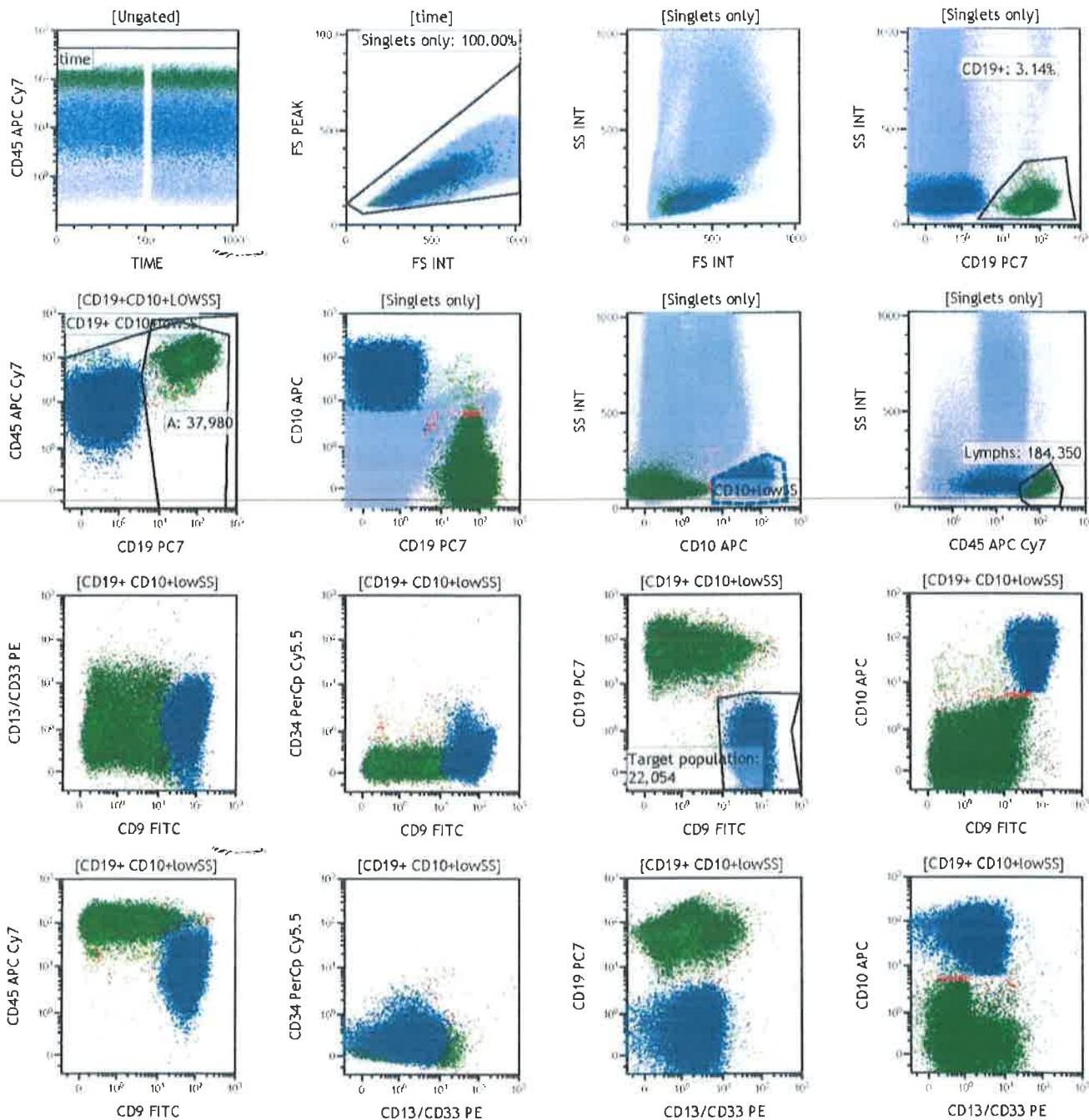
BALL-06

Day 29 - Tube 2, cont'd





Day 29 - Tube 2





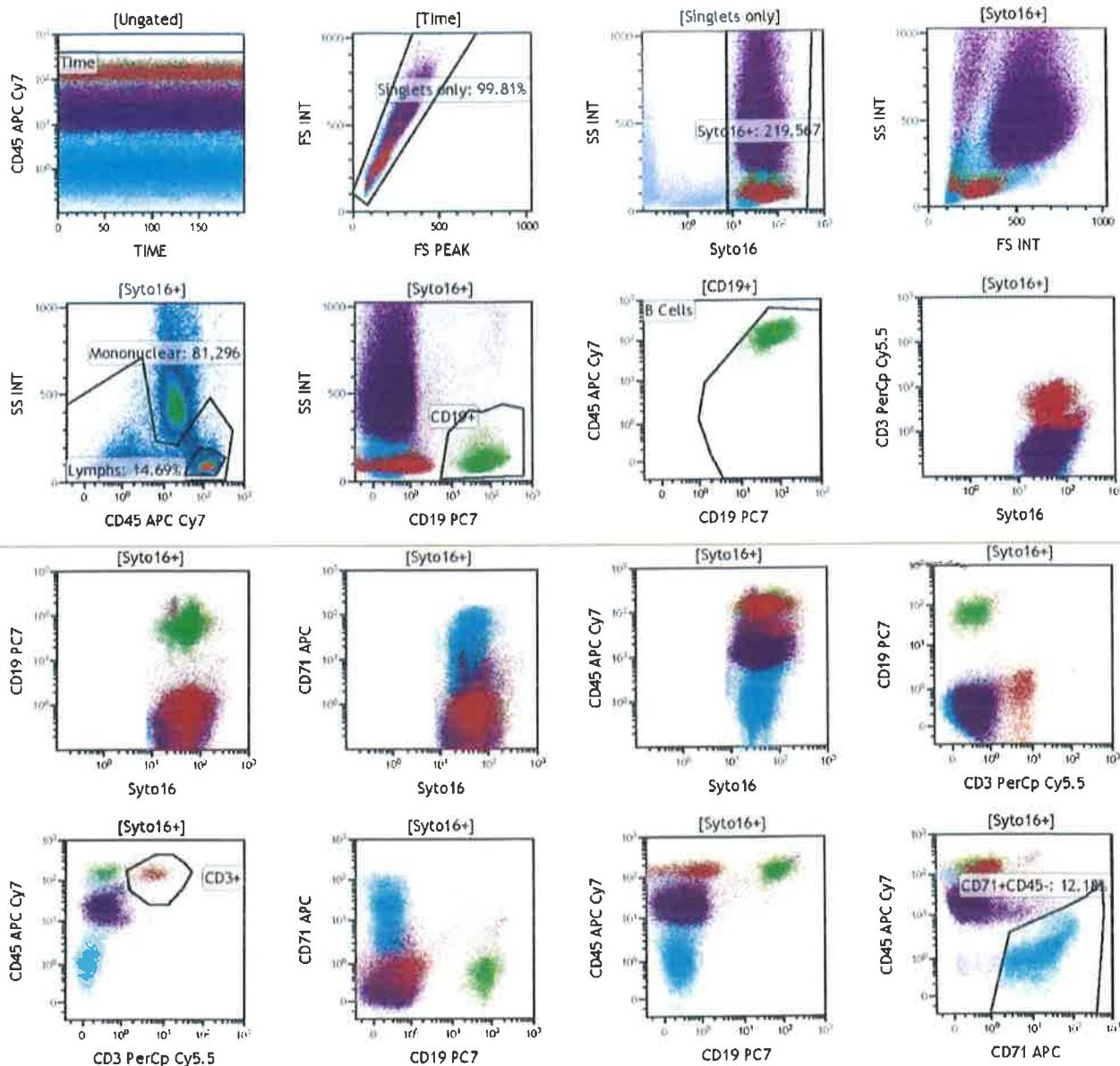
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PATHOLOGISTS

FLOW CYTOMETRY  
B-ALL MINIMAL  
RESIDUAL DISEASE  
BALL-B 2019 (BALL-06)

\*CAP 2019

BALL-06

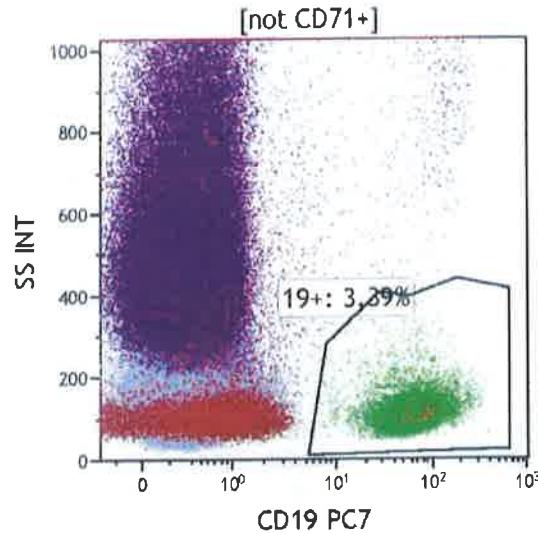
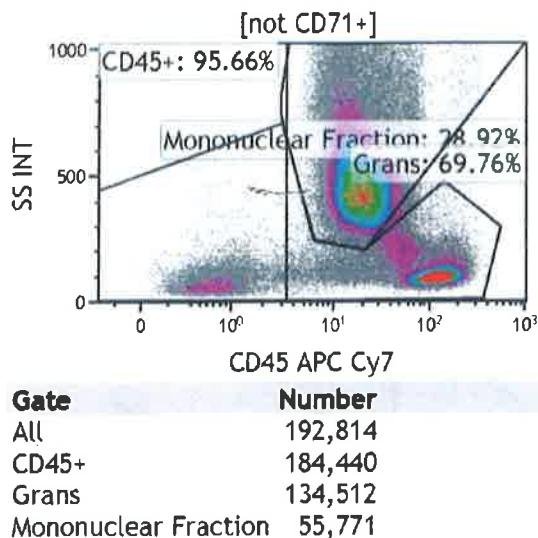
Day 29 - Tube 3



Total # 265,012  
[B Cells] Number 6,491  
[Lymphs] Number 32,259  
[Mononuclear] Number 81,296  
[CD3+] Number 11,320



Day 29 - Tube 3, cont'd



Differential for reporting

Total Lymphocytes	9.26 % of Total Leukocytes
Total Grans	69.76 % of Total Leukocytes
Total of rest	20.98 % of Total Leukocytes

