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## **Clinical Image**

## Pediatric Acute Promyelocytic Leukemia

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## **Clinical Image**

A previously healthy 4-year-old boy presented to the pediatric emergency department with high fever, headache, asthenia and neutropenia. The fever started two days prior along with the appearance of purple skin lesions. Laboratory results were as follows: White Blood Cell (WBC) count of  $44.2 \times 10^{\circ}$  hemoglobin 62g/L; hematocrit 18.9%, platelet count  $30 \times 10^{\circ}$ /l, international normalized ratio (INR) 1.06, lactate dehydrogenase (LDH) 479u/l, creatinine  $37\mu$ mol/l.



Figure 1:



Peripheral blood smear demonstrated: 80% of abnormal omyelocytes with bilobar nuclei and cytoplasmic granules; some

promyelocytes with bilobar nuclei and cytoplasmic granules; some contained multiple Auer rods. Immunophenotyping demonstrates CD13, CD33, CD117, and myeloperoxidase positivity with a high side-scatter. Fluorescence *in situ* hybridization revealed the t(15;17) (q22;q21.1) (PML-RARA) (Figure 1 and 2).

What type of leukemia corresponds to these findings?