Table Attachment
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The newer, currently preferred, World Health Organization classification of AML incorporates and interrelates morphology, cytogenetics, molecular genetics, and immunologic markers. It attempts to construct a classification that is universally applicable and prognostically valid. The World Health Organization system was adapted by National Comprehensive Cancer Network to estimate individual patient prognosis to guide management.

Risk Status of AML Based on Cytogenetic and Molecular Factors

Risk Status	Cytogenetic Factors	Molecular Abnormalities
Favorable	Inv16, t(8;21), t(16;16)	Normal cytogenetics with isolated NPM1 variant
Intermediate	Normal +8 only, t(9;11) only Other abnormalities not listed with better-risk and poor-risk cytogenetics	c-KIT variant in patients with t(8;21) or inv16
Poor	Complex (greater than or equal to 3 abnormalities) -5, -7, 5q-, 7q-, +8, inv3, t(3;3), t(6;9), t(9;22) Abnormalities of 11q23, excluding t(9;11)	Normal cytogenetics with isolated FLT3-ITD variant

AML: acute myeloid leukemia; ITD: internal tandem duplication.