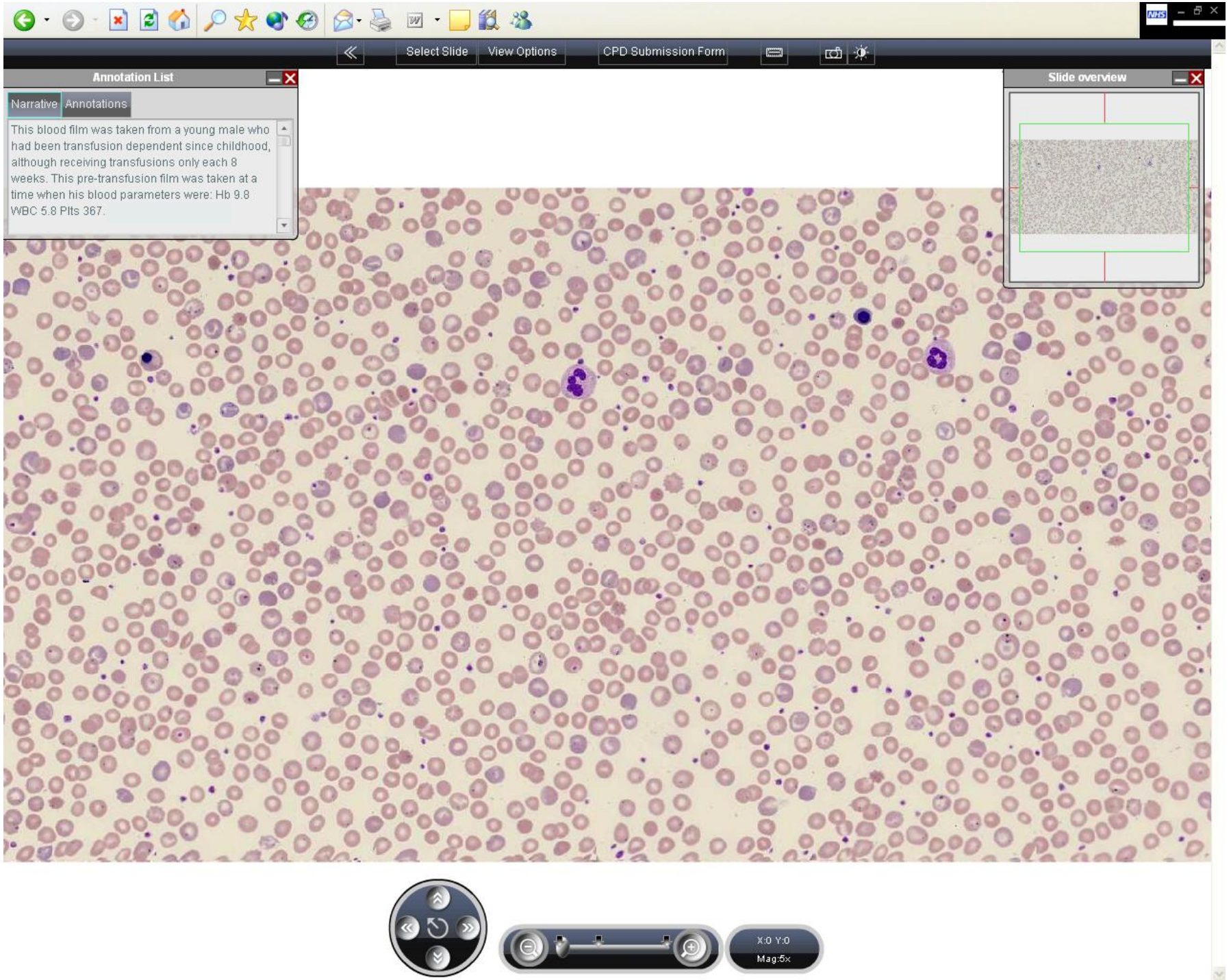
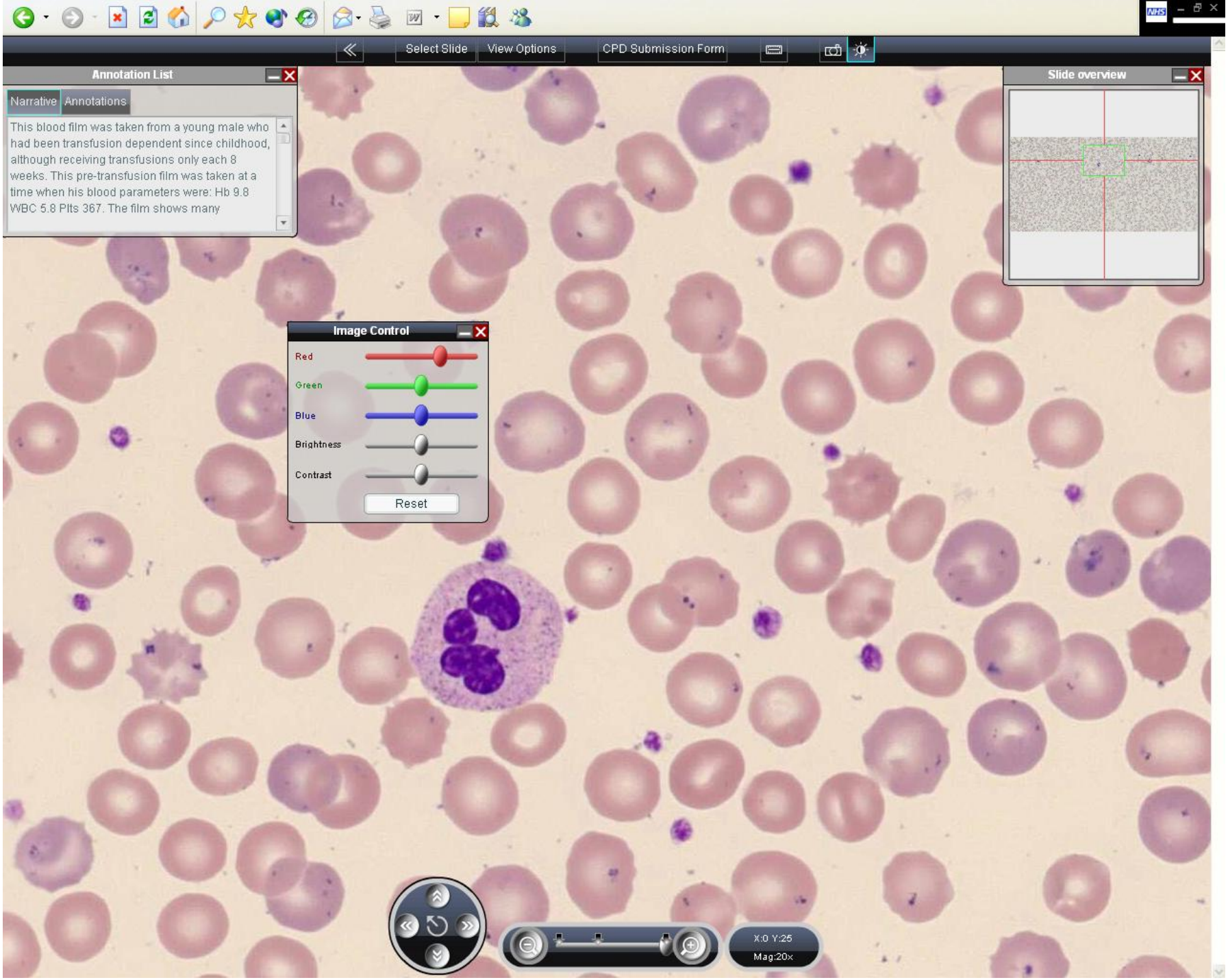
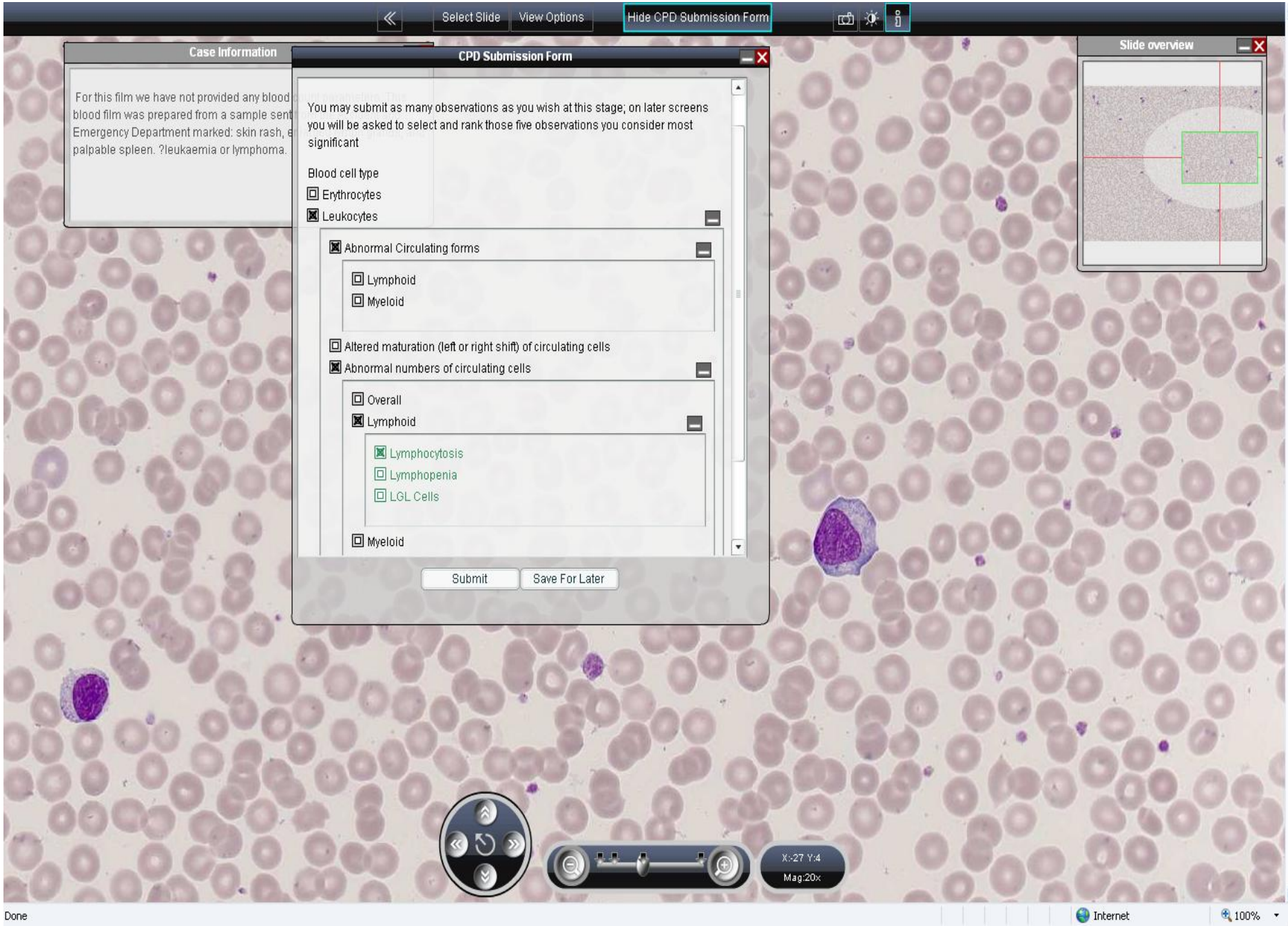

Select Slide
View Options
CPD Submission Form
Annotation List
Narrative
Annotations
This blood film was taken from a young male who had been transfusion dependent since childhood, although receiving transfusions only each 8 weeks. This pre-transfusion film was taken at a time when his blood parameters were: Hb 9.8 WBC 5.8 Plts 367.
Slide overview
X:0 Y:0
Mag:5x


Select Slide
View Options
CPD Submission Form
Annotation List
Narrative
Annotations
This blood film was taken from a young male who had been transfusion dependent since childhood, although receiving transfusions only each 8 weeks. This pre-transfusion film was taken at a time when his blood parameters were: Hb 9.8 WBC 5.8 Plts 367. The film shows many
Slide overview
Image Control
Red
Green
Blue
Brightness
Contrast
Reset
X:0 Y:25
Mag:20x


Select Slide
View Options
Hide CPD Submission Form
Case Information
For this film we have not provided any blood
blood film was prepared from a sample sent
Emergency Department marked: skin rash, e
palpable spleen. ?leukaemia or lymphoma.
CPD Submission Form
You may submit as many observations as you wish at this stage; on later screens you will be asked to select and rank those five observations you consider most significant
Blood cell type
Erythrocytes
Leukocytes
Abnormal Circulating forms
Lymphoid
Myeloid
Altered maturation (left or right shift) of circulating cells
Abnormal numbers of circulating cells
Overall
Lymphoid
Lymphocytosis
Lymphopenia
LGL Cells
Myeloid
Submit
Save For Later
Slide overview
X:-27 Y:4
Mag:20x
Done
Internet
100%

Help Contact Logout

UK NEQAS General Haematology Digital Morphology Scheme

Welcome Module Administrator

My Slidebox | Search | Administration

Home » CPD Demo

Review your CPD Submission

Please rank up to 5 of your top observations before completing your CPD Assessment. You can do this by entering 1,2,3,4,5 into the text boxes provided beside your observations:

The observations that you have selected are:

Target cells	4
Stomatocytes	
Polychromatic cells	3
Nucleated RBCs	1
Acanthocytes	5
Echinocytes/Crenated cells	2

Assuming that this is a new case to your hospital, and clinical details do not su
please suggest the action you would take:

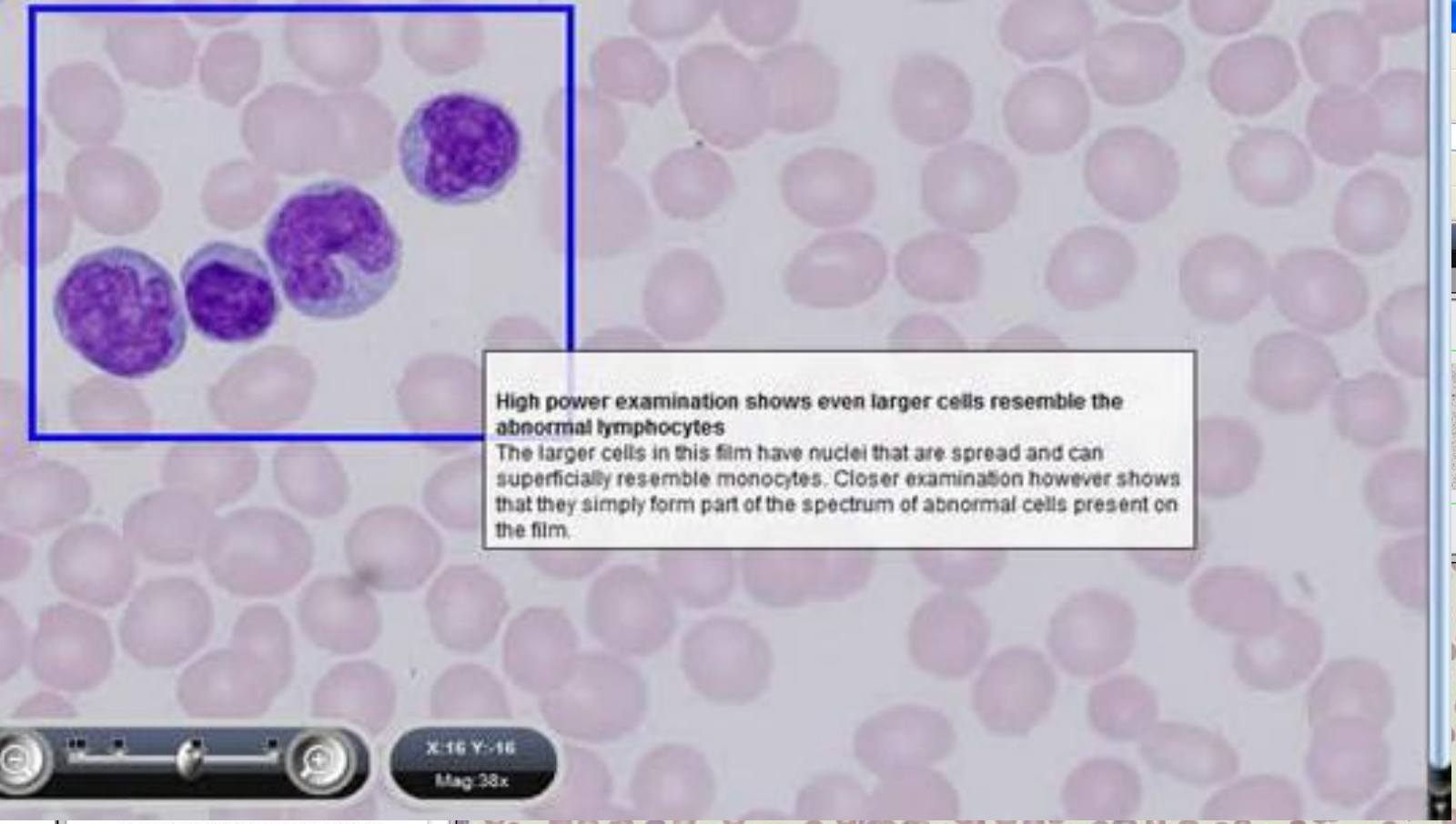
- ○ Refer to medics (urgent)
- ◉ Refer to medics (routine)
- ○ Send out report
- ○ 4
- ○ 5

Based on your morphological observations suggest a diagnosis (e.g. sickle cell
category (e.g. haemoglobinopathy):

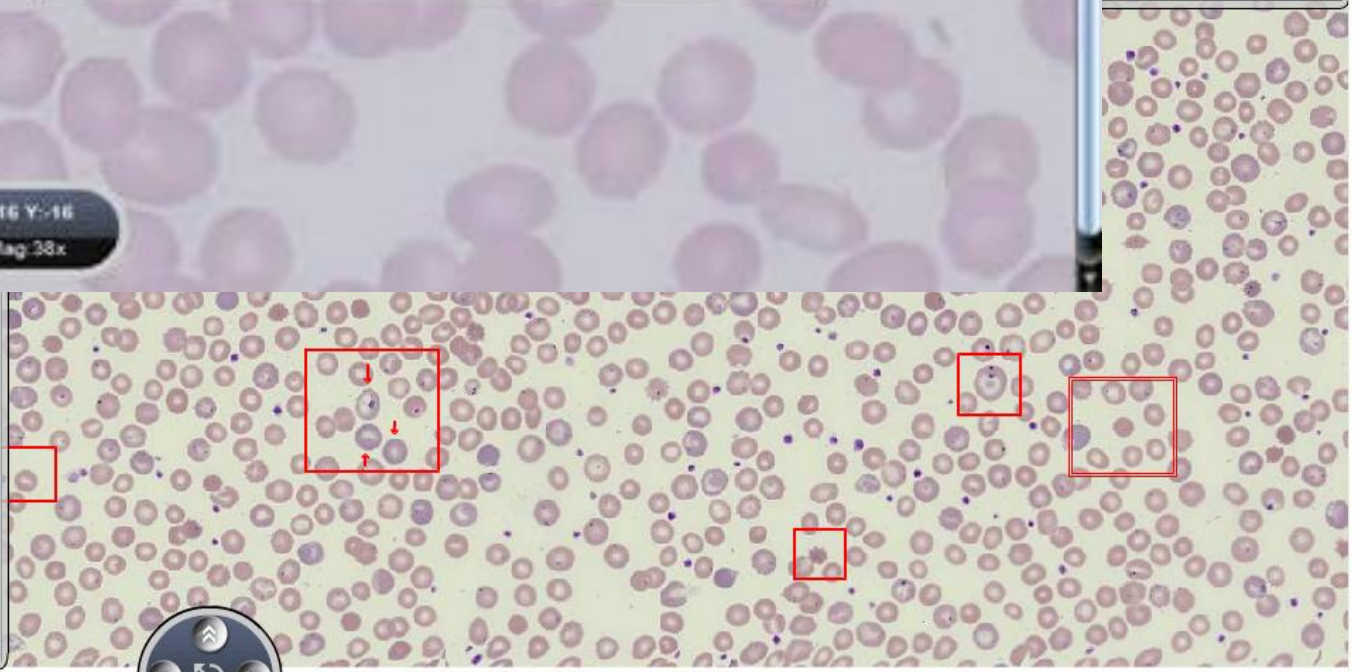
Haemolytic disorder ?type

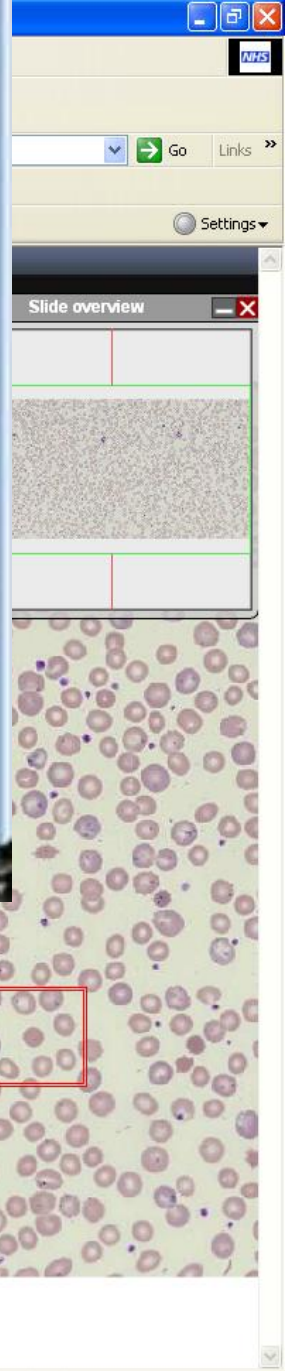
Submit Reset

- Immediate access to annotated case.
- Email notification when statistics and consensus opinion available.
- Certificate with reflective notes.



this film is the added features present within erythrocytes. Some artefact is present in the form of stain debris, and platelets overlying erythrocytes, however it is clear that there are additional added staining elements within many erythrocytes. These certainly include some typical Howell Jolly Bodies, and some peripherally located small inclusions very suggestive of Pappenheimer Bodies, but for the most part these purple staining inclusions are more coarse, and while very atypical could also resemble basophilic stippling. Essentially, the appearance of the inclusions are too atypical to allow them to be clearly labelled,





Done
Internet
start
Inbox - Microsoft Out...
http://ukneqas.digital...
Microsoft Office
14:38

Case Narrative

Narrative | Annotations

Cinical details

This blood film was prepared from a blood sample
Accident and Emergency Department marked: skin
lymph glands, and palpable spleen. ?leukaemia o

General

Clinical details can be helpful, but should not alwa
opinion too much. In this age group both leukaemi
may occur, but viral illness and other reactive state
common. In this case it is clear that there are large
present on the film and that require full asessmen

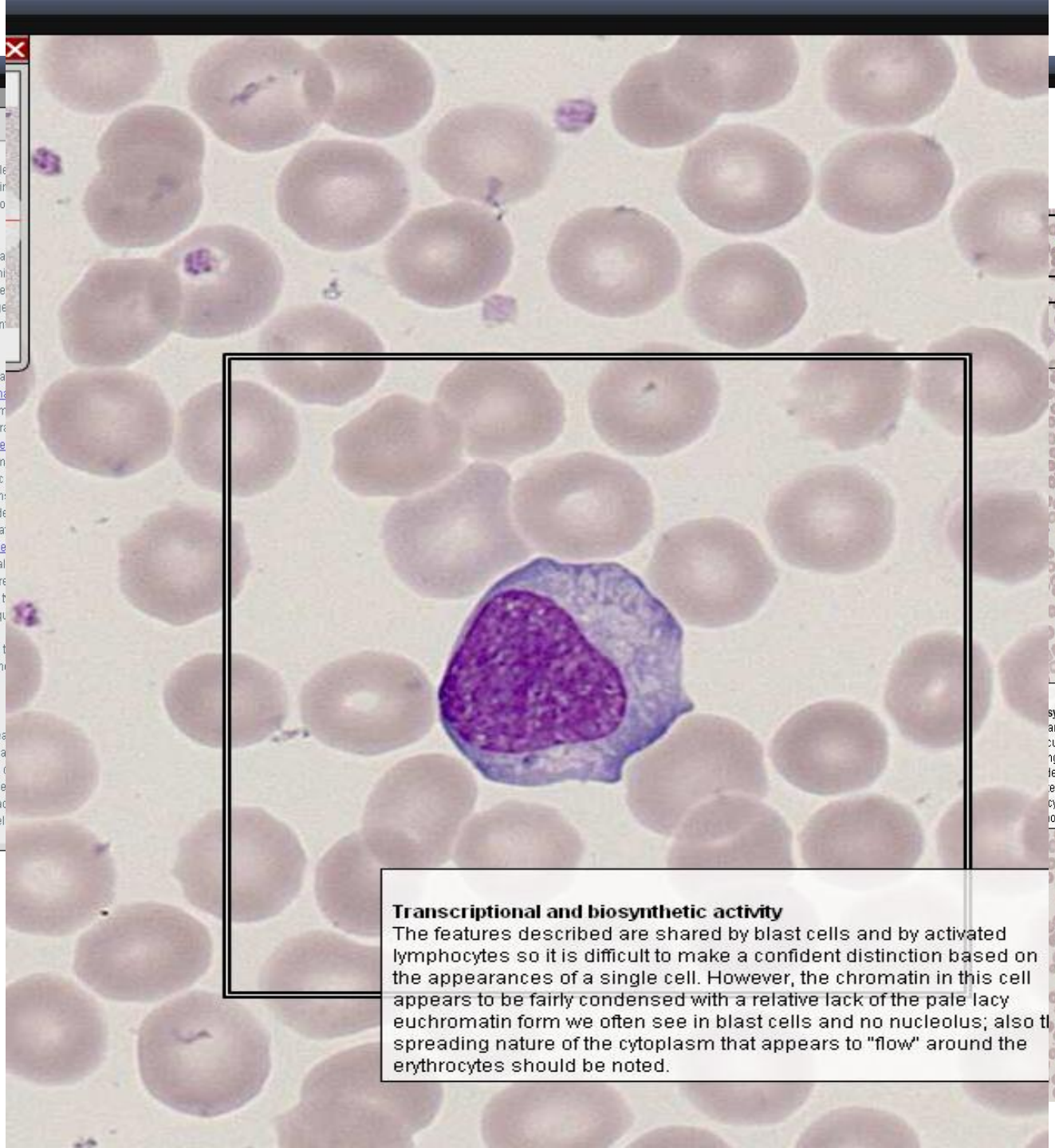
Assessment normal cells

The erthrocytes of this blood film show some varia
not appear macrocytic or microcytic (see the norma
comparison - arrowed) and have no major abnorm
Some variability is normal, and this can be exagera
without implying intrinsic marrow abnormality (see
comment). Although this digital image is small, im
findings are the normal numbers of polychromatic
of nucleated red cells or tear drop erythrocyte form
true of the platelets. Although no count was provide
platelets are clearly numerous, and although varia
considerable, this level of variability is normal (see
comment) and there are no very large or abnormal
there is one monocyte, and several neutrophils pre
have varing features, but none are dysplastic and t
associated with reactive states; (see these in sequ

Overall the absence of abnormal features among t
this slide is reassuring (although not proof) that th
infiltrated by leukaemia or other neoplasm.

The abnormal cell population

The large cells on this field show characteristic fea
question on a film such as this is: Are the cells rea
neoplastic? To a large extent the approach to this
an assessment of the overall characteristics of the
as discussed are relatively reassuring), the charac
abnormal cells, and any other clues from other cel



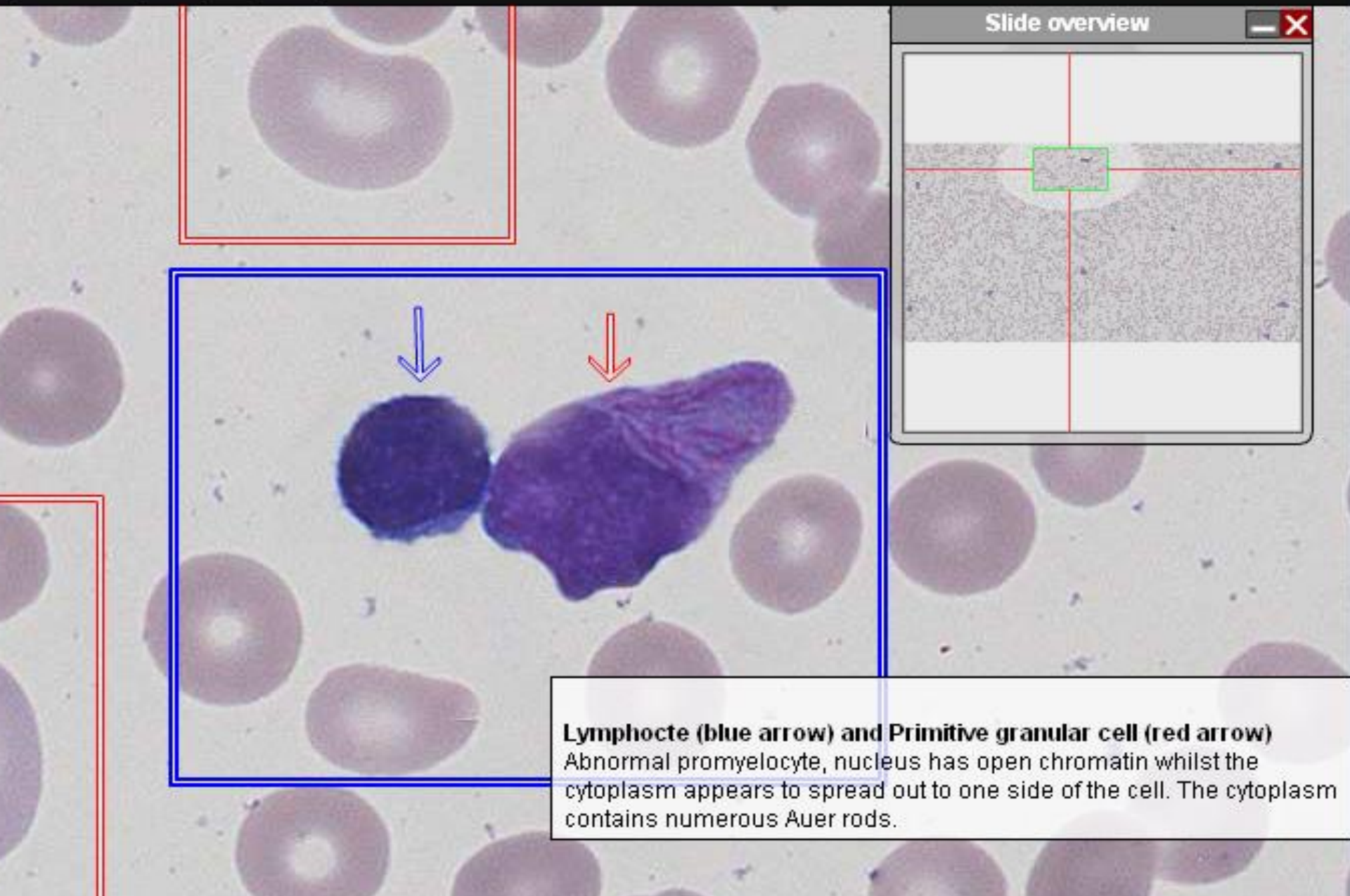
Transcriptional and biosynthetic activity
The features described are shared by blast cells and by activated lymphocytes so it is difficult to make a confident distinction based on the appearances of a single cell. However, the chromatin in this cell appears to be fairly condensed with a relative lack of the pale lacy euchromatin form we often see in blast cells and no nucleolus; also t
spreading nature of the cytoplasm that appears to "flow" around the erythrocytes should be noted.

synthetic activity
are shared by blast cells and by activated
cult to make a confident distinction based on
ngle cell. However, the chromatin in this cell
densed with a relative lack of the pale lacy
en see in blast cells and no nucleolus; also the
cytoplasm that appears to "flow" around the
oted.

Select Slide View Options

Case Narrative

Slide overview



Lymphocte (blue arrow) and Primitive granular cell (red arrow)
Abnormal promyelocyte, nucleus has open chromatin whilst the cytoplasm appears to spread out to one side of the cell. The cytoplasm contains numerous Auer rods.