



- Lecturer: Dr. Tariq Al-Adaily
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- 3<sup>rd</sup> floor, Hematology Lab
- Office hours: Thursday 12-1
- Reference: Robbins Basic Pathology 9<sup>th</sup> ed



A-LAB 0004

# Lab. Request Form



جامعة الأردنية  
مستشفى

Jordan University Hospital

Surname : .....  
 Forname : .....  
 Sex : ..... Date of Birth : .....  
 Hospital No. : .....  
 Ward / Clinic : .....  
 Consultant : .....  
 Address : .....

Lab. Ref. No. : .....

Rec. Date : .....

Rec. Hr. : .....

Charges J. D. Fils

Nature of Specimen / s .....

Date .....

Hr .....

Dr. Sig. .....

Code No.

Result

Result

C B C 103001

103005	<input type="checkbox"/>	WBC $\times 10^{12}/L$	4.0 - 10
103004	<input type="checkbox"/>	RBC $\times 10^9/L$	M 5.5 $\pm$ 1.0 F 4.8 $\pm$ 1.0
103003	<input type="checkbox"/>	Hemoglobin g/dl	M 16 $\pm$ 2 F 14 $\pm$ 2
103003	<input type="checkbox"/>	HCT	M 0.46 $\pm$ 0.05 F 0.42 $\pm$ 0.05
	<input type="checkbox"/>	MCV fl	80 - 100
	<input type="checkbox"/>	MCH pg / cell	26 - 34
	<input type="checkbox"/>	MCHC g / dl	31 - 36
103006	<input type="checkbox"/>	Platelet $\times 10^9/L$	140 - 440
103011	<input type="checkbox"/>	ESR mm / hr	M 0 - 15 F 0 - 20
103010	<input type="checkbox"/>	Retic. Count	0.005 - 0.015
103009	<input type="checkbox"/>	Eosin. Count $\times 10^9/L$	0.05 - 0.45
103020	<input type="checkbox"/>	Sickle Cell	Nil
103007	<input type="checkbox"/>	Blood Film	
103025	<input type="checkbox"/>	Malaria Smear	
103031	<input type="checkbox"/>	PT	
103032	<input type="checkbox"/>	PTT	
103033	<input type="checkbox"/>	EGT	

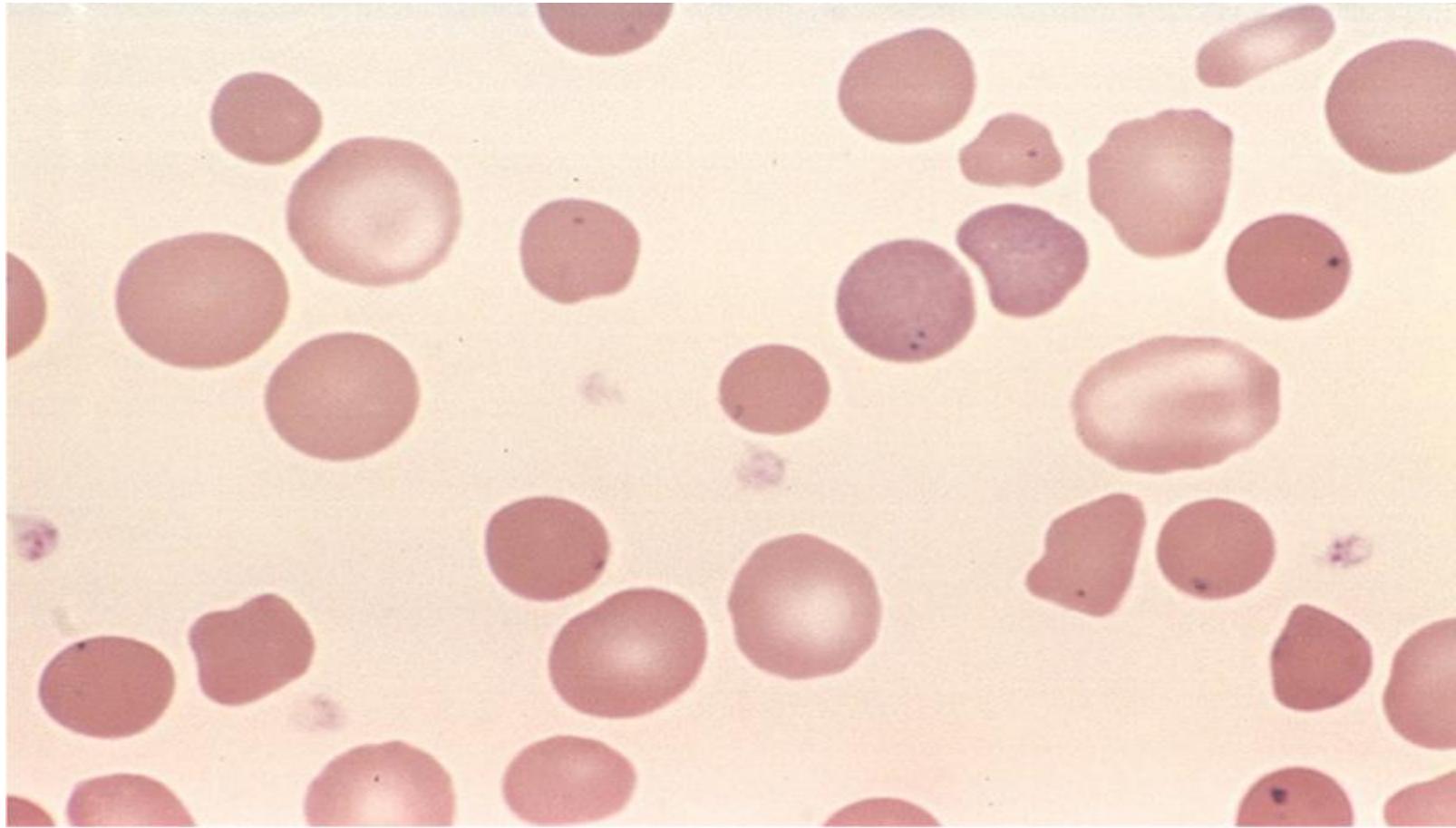
103012	<input type="checkbox"/>	Hb. Electrophoresis		
103008	<input type="checkbox"/>	Neut - Band %	0	
	<input type="checkbox"/>	Neut - Sig. %	40 - 75	
	<input type="checkbox"/>	Eosinophil %	1 - 6	
	<input type="checkbox"/>	Basophil %	0 - 1	
	<input type="checkbox"/>	Lymphocyte %	20 - 45	
	<input type="checkbox"/>	Monocyte %	2 - 10	

## LAB COMMENTS

Date Reported

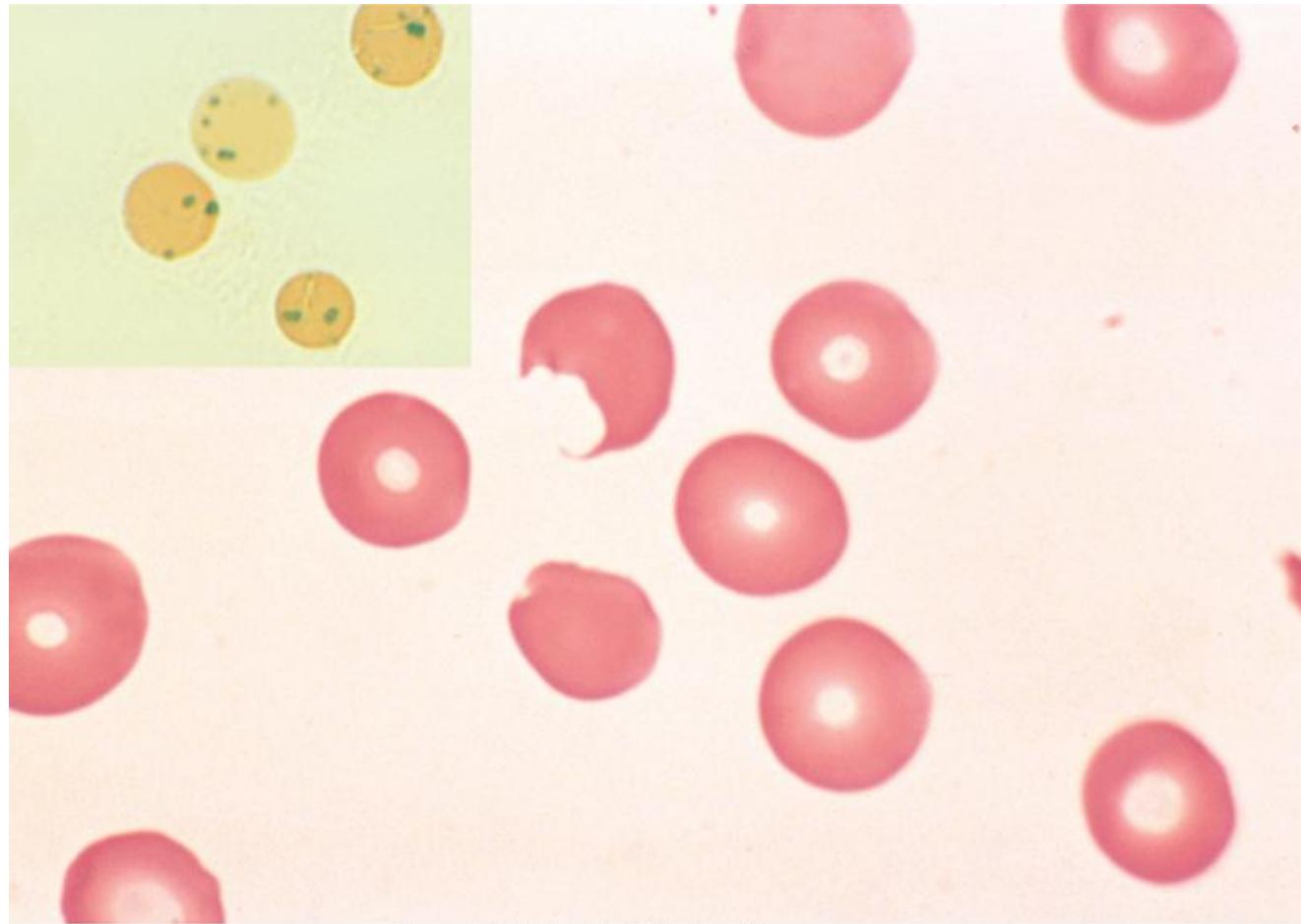
Reported By

HEMATOLOGY



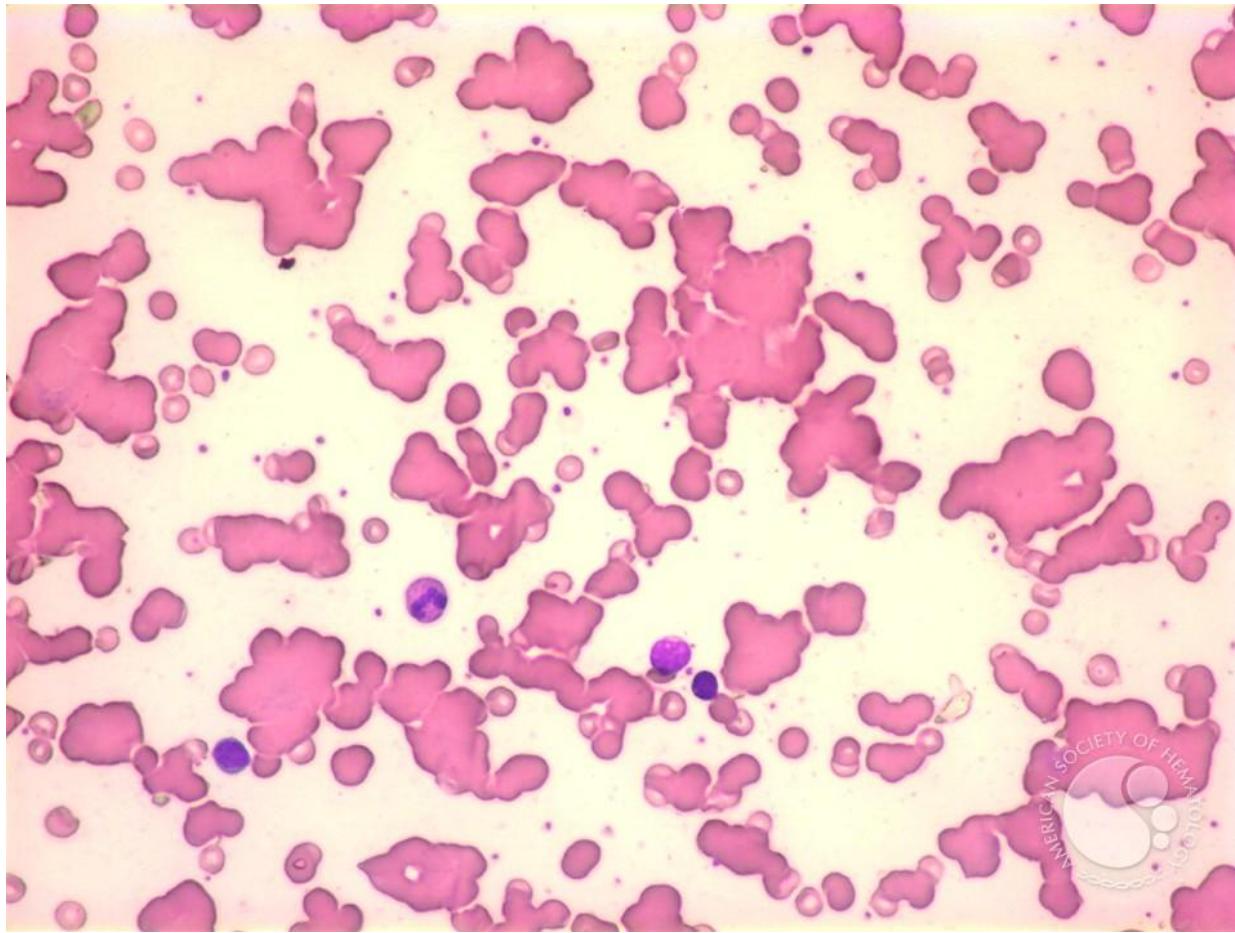
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- Spherocytes appear as small, round cells without the central pallor. Howell Jolly bodies are noted

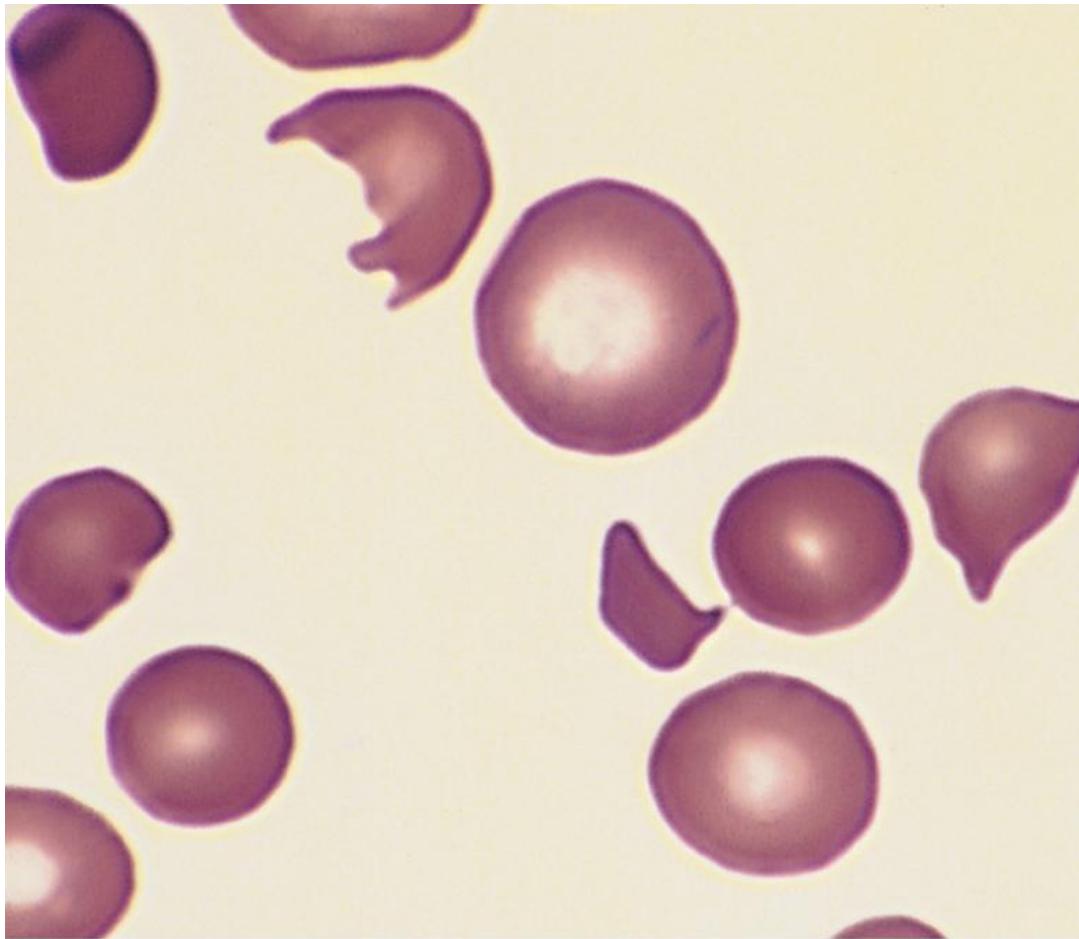


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- **Bite cells:** seen in G6PD deficiency. Supravital stain (crystal violet) highlights Heins bodies

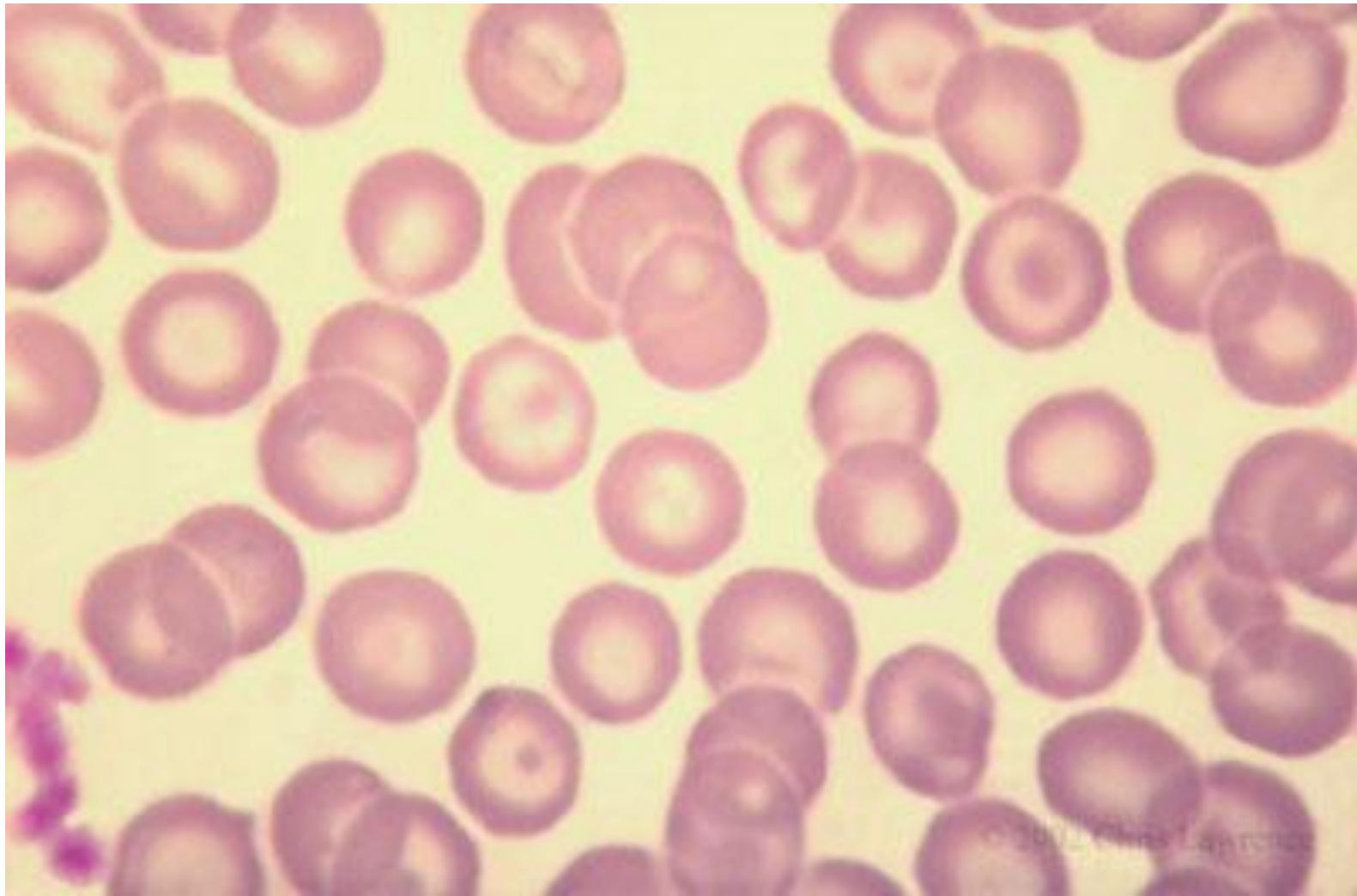


- RBC agglutination in autoimmune hemolytic anemia

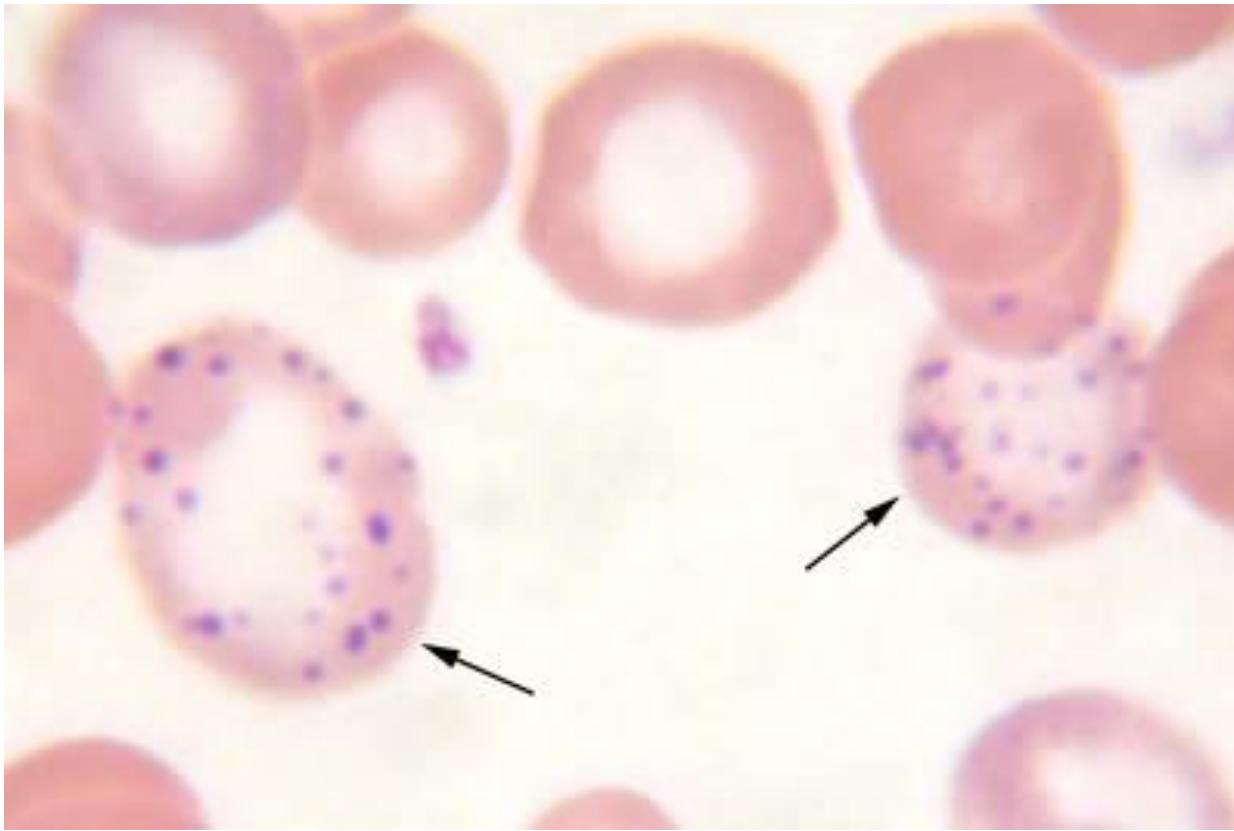


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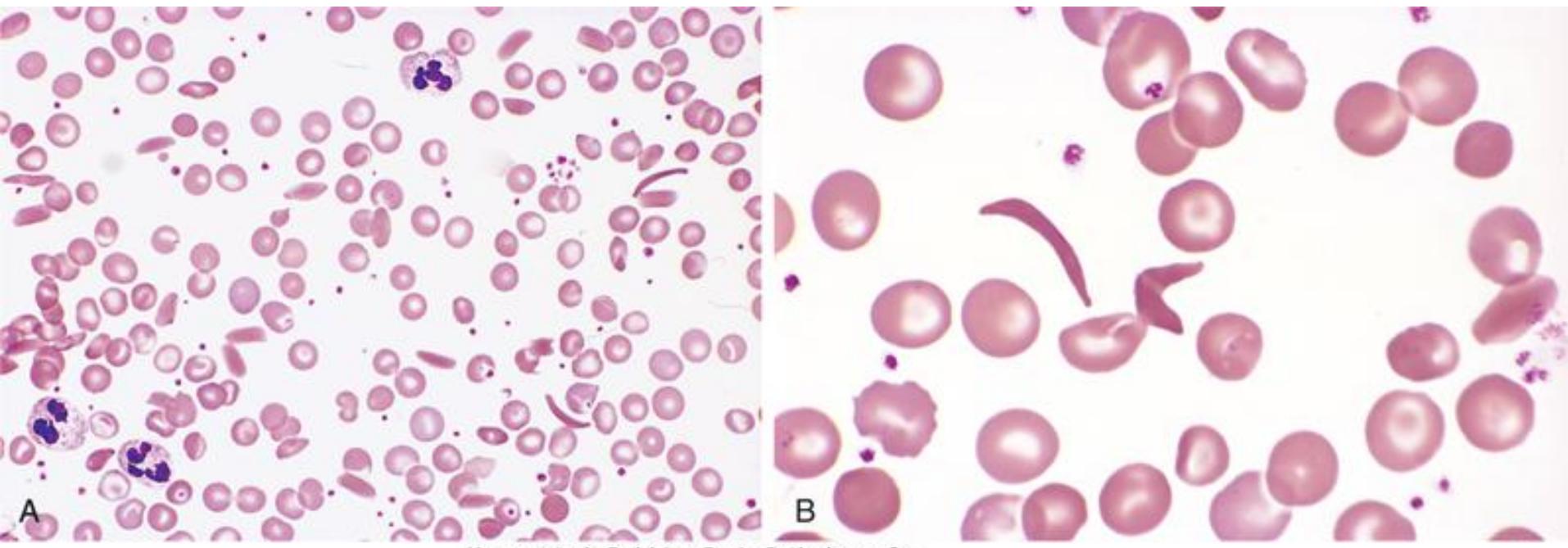
- Schistocytes: fragmented RBCs seen of different shapes



- Monomorphic hypochromic microcytic anemia with target cells, seen in thalassemia

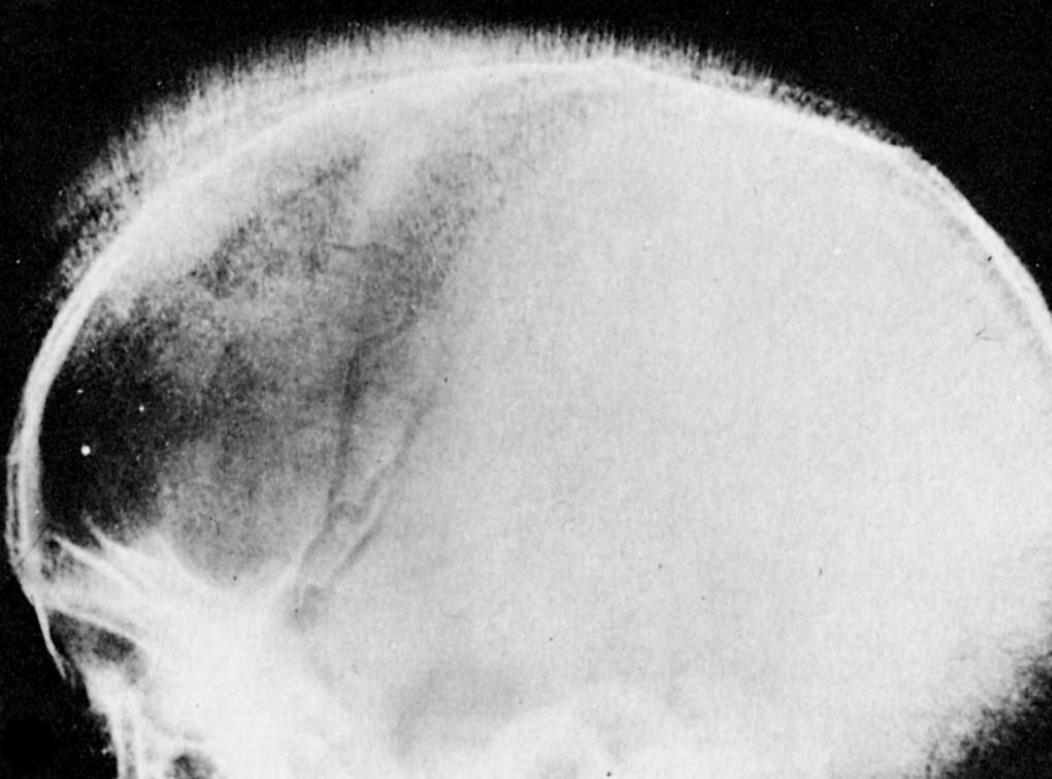


- Basophilic stippling: aggregates of ribosomes, appear as fine blue inclusions in RBCs

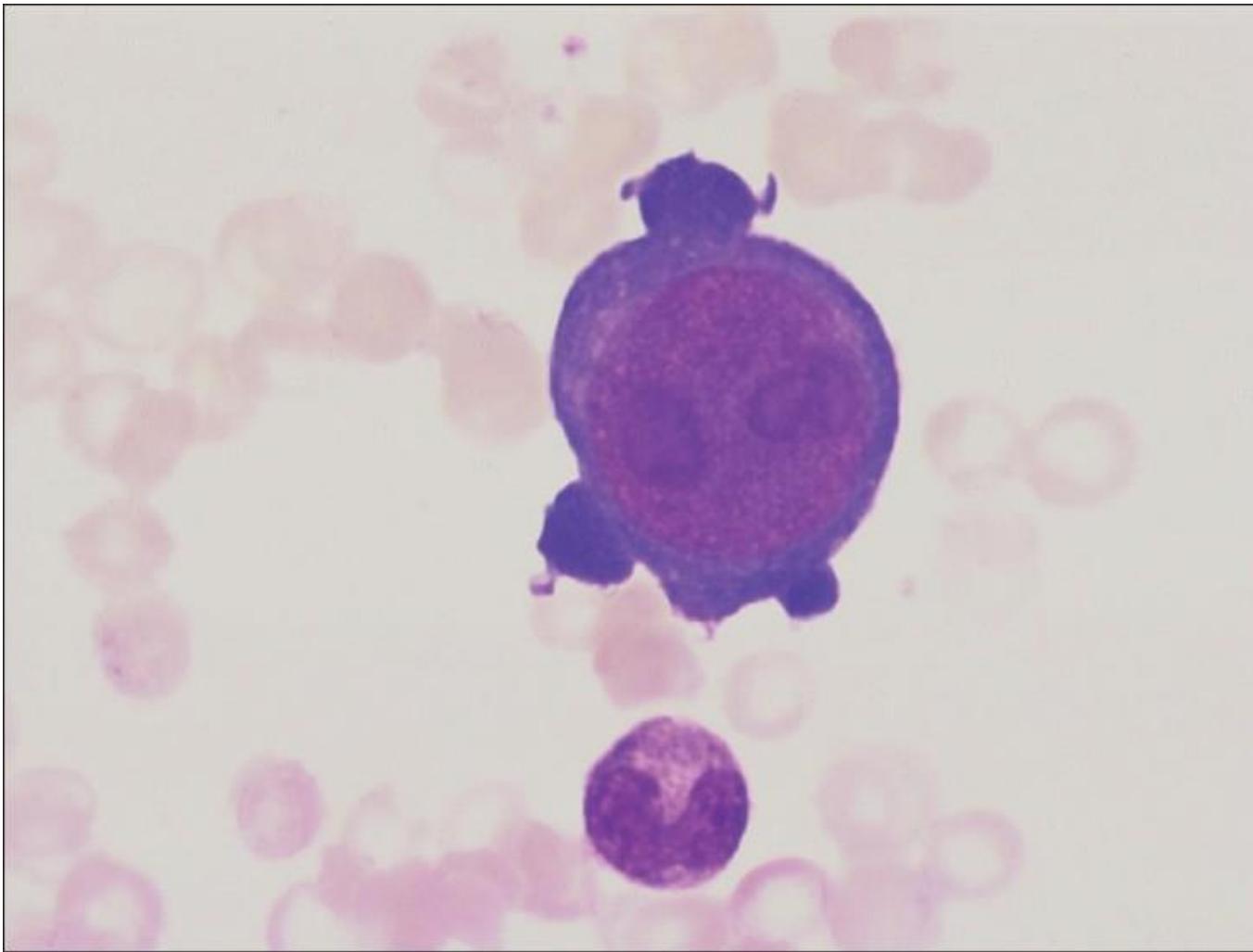


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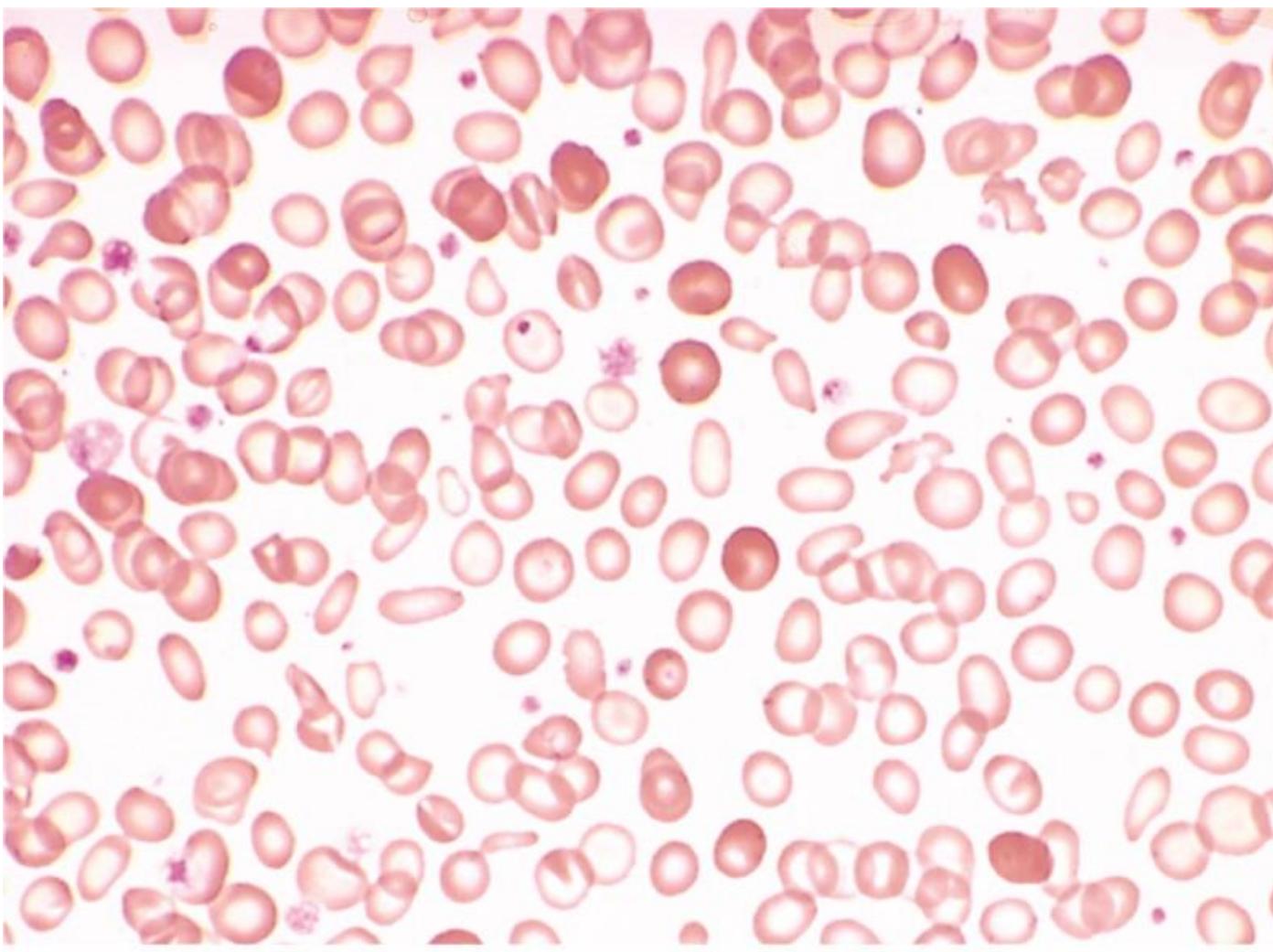
- Sickle cell anemia: numerous sickle cells and target cells



- Crew-cut appearance of skull of X ray:  
secondary to marked erythropoiesis in sickle  
cell anemia and B-thal

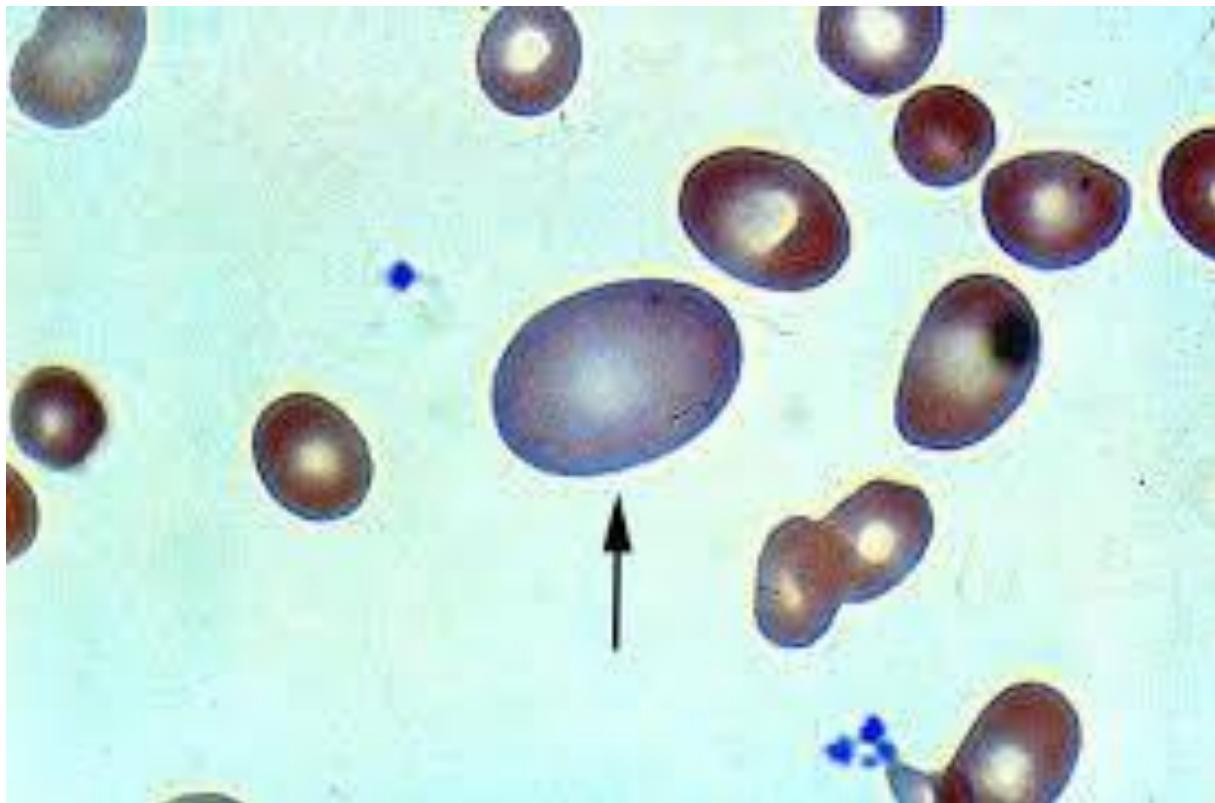


- Aplastic crisis: pronormoblast shows nuclear inclusions

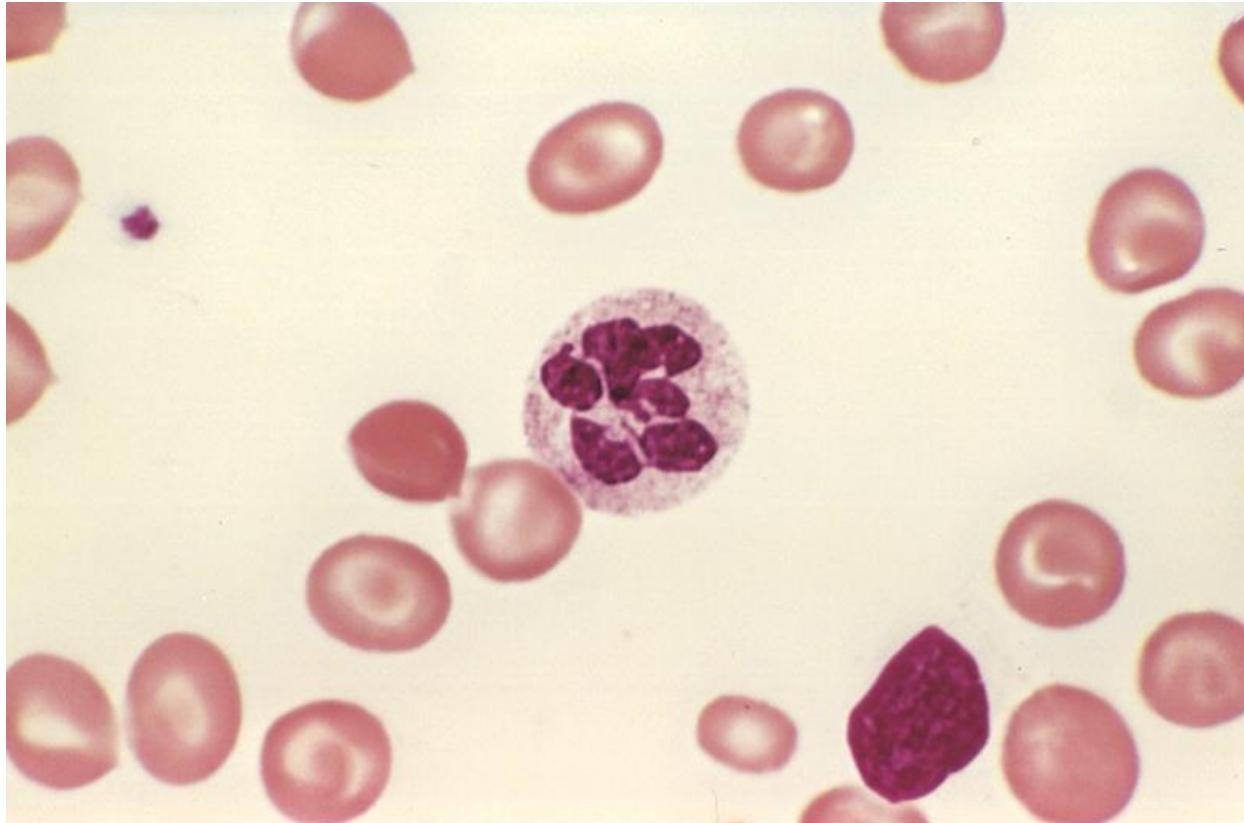


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- Iron deficiency anemia: hypochromic mircocytic RBCs, poikilocytosis, target cells

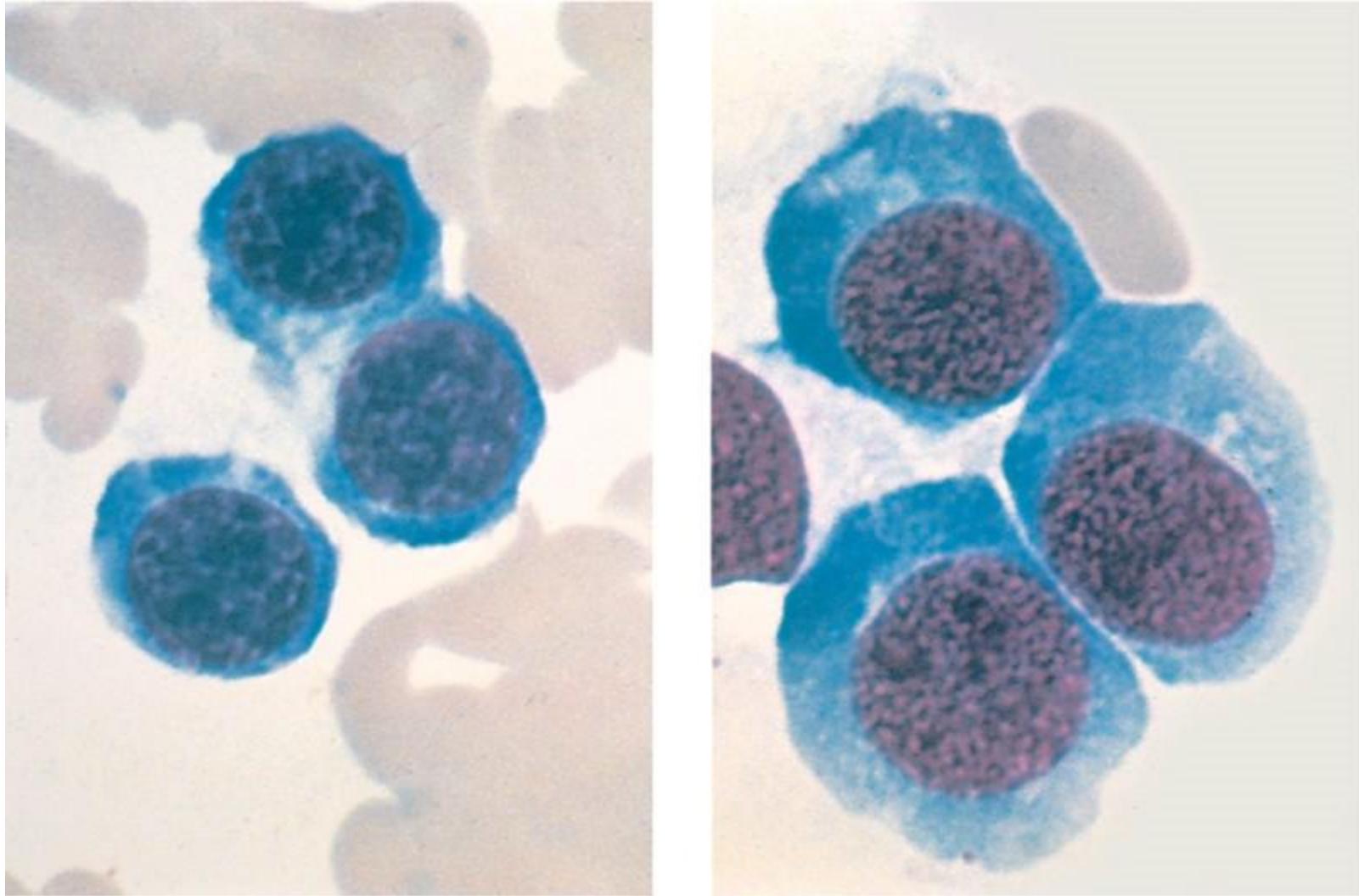


- PB: large ovalocyte is specific for megaloblastic anemia



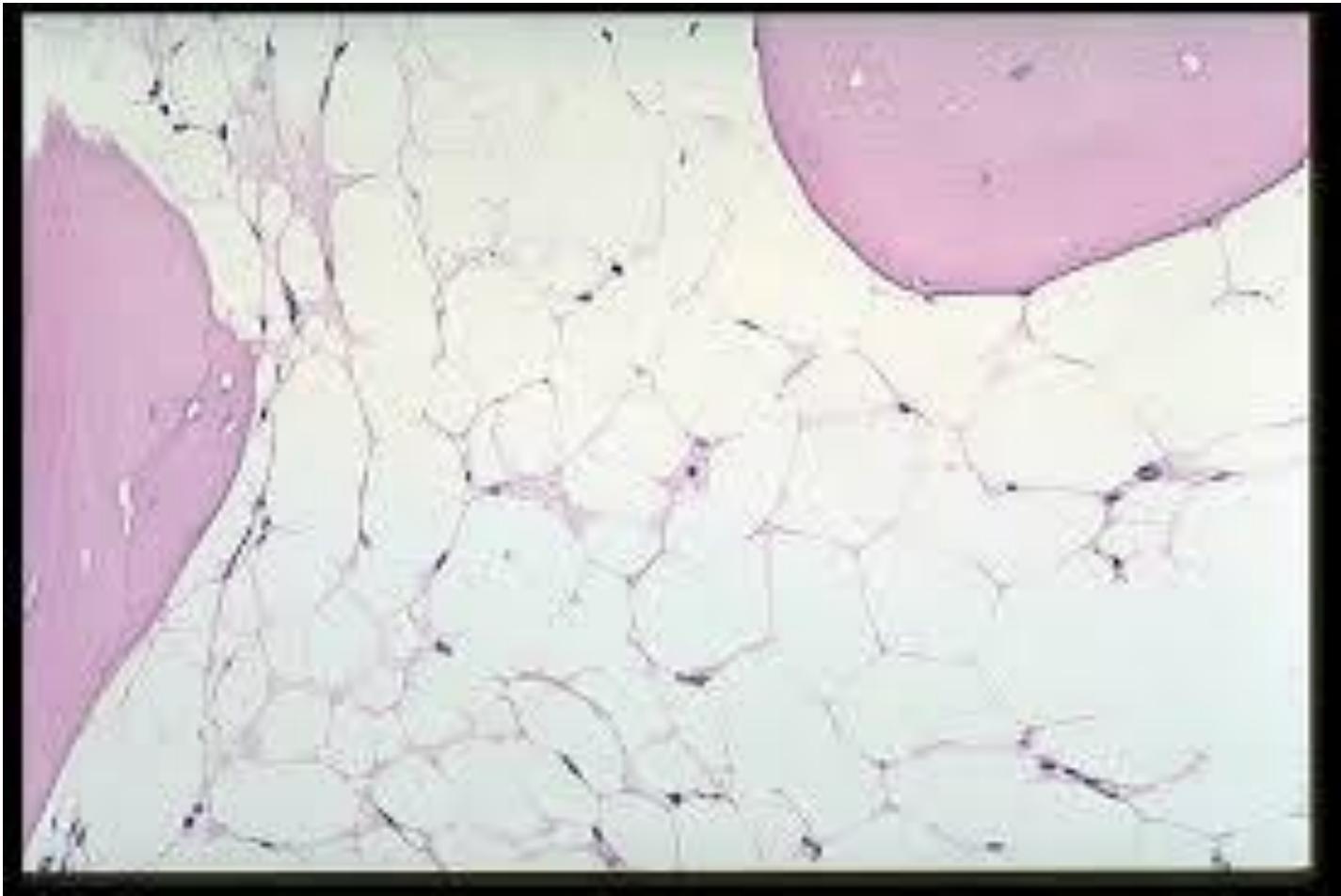
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- Megaloblastic anemia: hypersegmented neutrophil

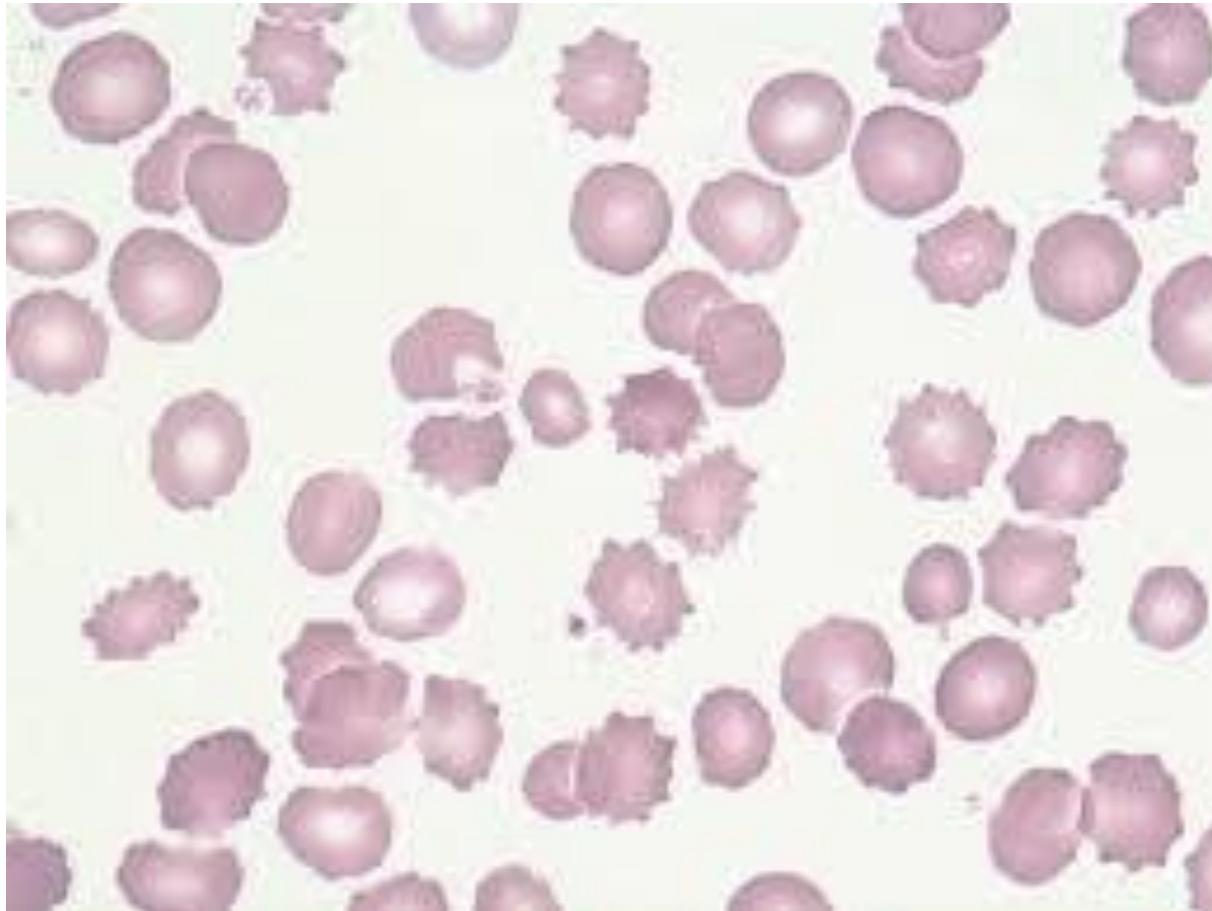


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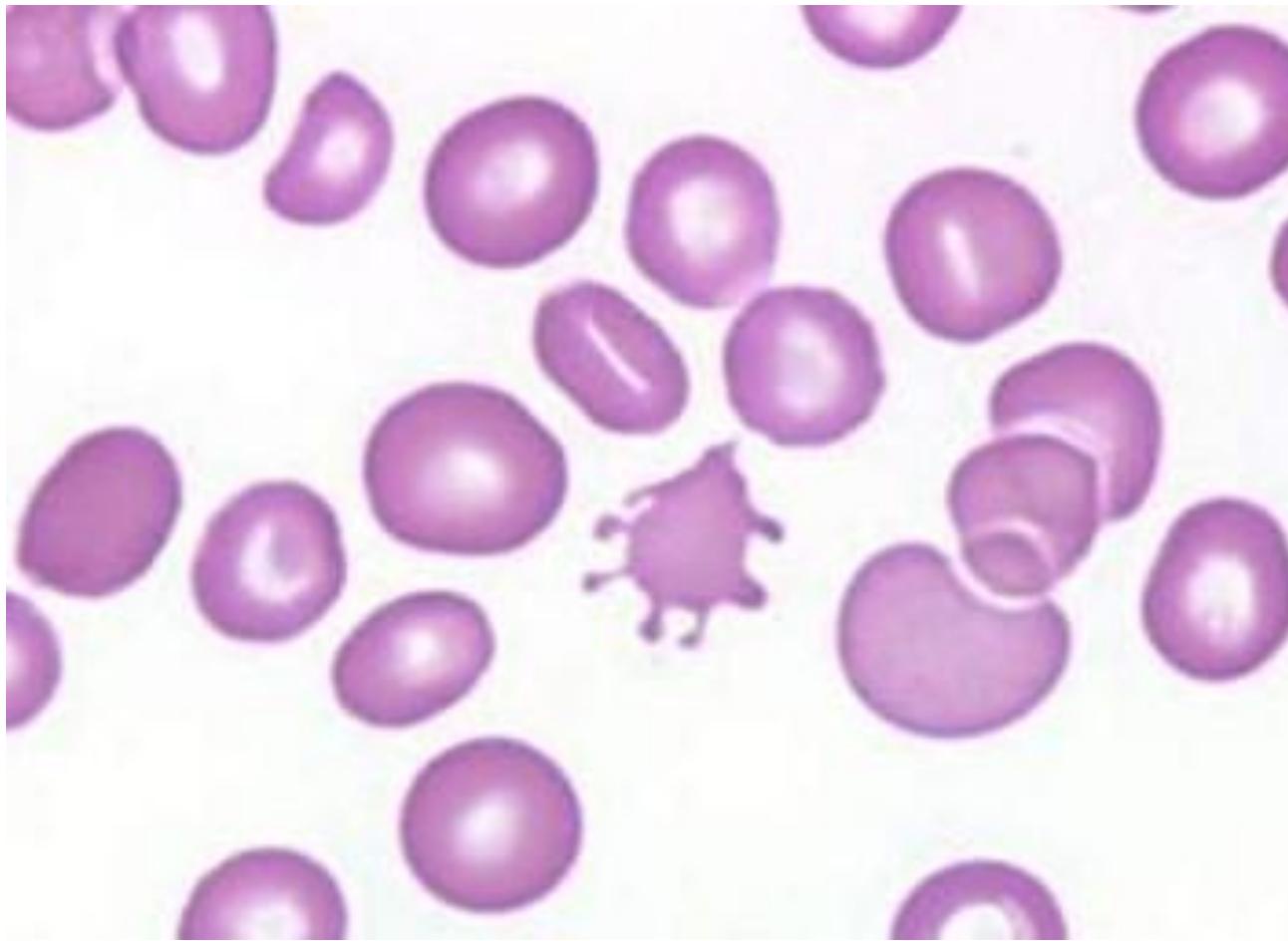
- Comparison of normoblasts (*left*) and megaloblasts (*right*). The megaloblasts are larger, have relatively immature nuclei with finely reticulated chromatin, and have an abundant basophilic cytoplasm



- Aplastic anemia: bone marrow is composed of adipose tissue with very scarce hematopoietic cells



- Echinocytes: circumferential small cytoplasmic projections, seen in uremia



- Acanthocyte: long membrane projections