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Hematology Proficiency Test Program

Statistical Summary – February 2016 (Event 16-1)

This statistical report summarizes participant data for the Hematology proficiency survey shipped 1 February 2016.

Five test samples were distributed to participants for each test category:

Routine Blood Counts (B21, B22, B23, B24, B25)

Routine Coagulation (C21, C22, C23, C24, C25)

Cell Identification (421, 422, 423, 424, 425)

Results for individual instrument and reagent systems where the number of laboratories using those systems is three or greater are provided. Mean and Standard Deviation (± 1 SD) values are calculated by a robust statistical technique that does not assume a Gaussian distribution.

Disclaimer:

Note: The use of brand and/or trade names in this report does not constitute an endorsement of the products on the part of the Wadsworth Center or the New York State Department of Health.

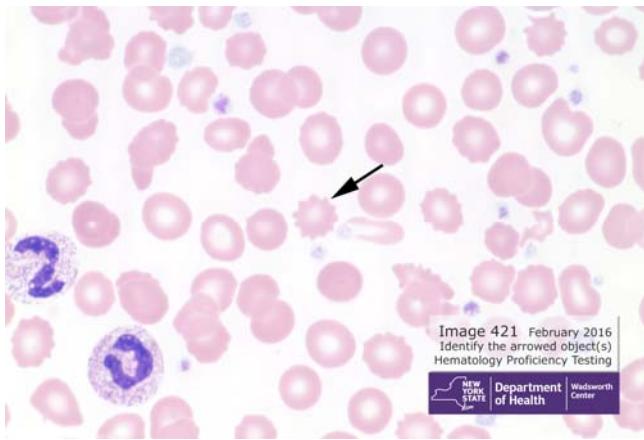
Should you have any questions regarding this report, please contact the Hematology Section at (518) 474-9878.

NEW YORK STATE HEMATOLOGY PROFICIENCY TEST PROGRAM

Test event of February 1, 2016

Images on the New York State Department of Health – Wadsworth Center web page: <http://www.wadsworth.org/regulatory/clep/pt/hematology> were used to test all laboratories that perform manual white cell differentials. A summary of responses appear below, acceptable responses are shown in shaded areas.

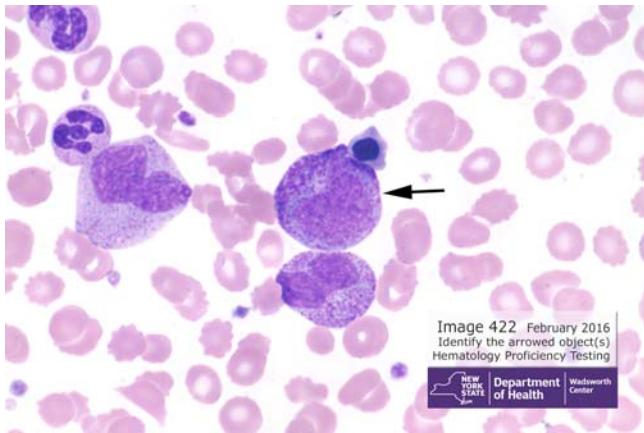
Image 421



Number of Responses	Percent of Laboratories	Cell type or finding
177	98.9%	Echinocyte (crenated cell) or burr cell
2	1.1%	Acanthocyte

The arrowed red blood cell in Image 421 has central pallor and evenly distributed cell membrane projections. The red blood cell is an echinocyte as correctly reported by 98.9% of the participants. The presence of echinocytes is often the result of an improperly prepared smear (i.e. thick smear; slow drying). Rare causes of echinocytosis include uremia, vitamin E deficiency, liver disease and myeloproliferative disorders. In this case, the image was obtained from the peripheral smear of an 84 year-old male diagnosed with unexplained leukocytosis and anemia; the origin of the echinocytes was unknown.

Image 422

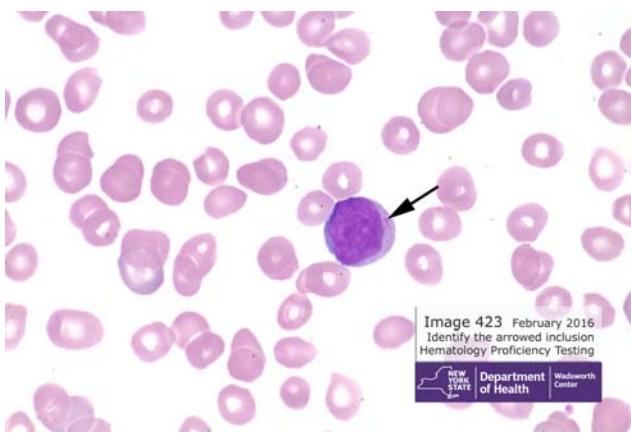


Number of Responses	Percent of Laboratories	Cell type or finding
130	72.6%	Promyelocyte
30	16.8%	Myelocyte
17	9.5%	Metamyelocyte
2	1.1%	Blast cell, not classified

The arrowed white blood cell in Image 422 is large, the cytoplasm includes the diagnostic primary, coarse azurophilic granules and prominent nucleoli are present in the nucleus. The cell is best classified as a promyelocyte as 130 participants concur. Thirty participants identified the image as a myelocyte.

The presence of secondary (specific) granules and absence of nucleoli would identify the cell as a myelocyte. The image was obtained from the peripheral blood smear of a 54 year-old female diagnosed with anemia and multiple sclerosis. The white blood cell count in this case was 18.5K/ μ L and immature white blood cell forms were observed including promyelocytes, myelocytes, metamyelocytes and band neutrophils. Due to lack of 80% consensus for both participant and referee laboratories, pass credit was issued.

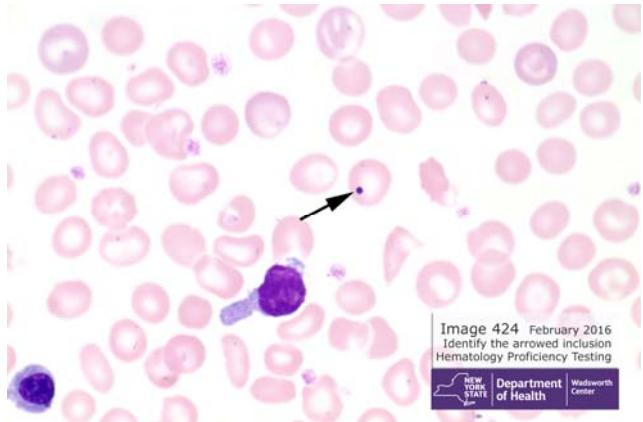
Image 423



Number of Responses	Percent of Laboratories	Cell type or finding
179	100%	Auer rod(s)

The arrowed inclusion in the white blood cell of Image 423 is pink in color and needle-shaped, it is an Auer rod as correctly identified by all participants. Auer rods are aggregates of primary (azurophilic) granules and are associated with acute myelomonocytic leukemia, erythroleukemia and, as in this case, acute myelogenous leukemia.

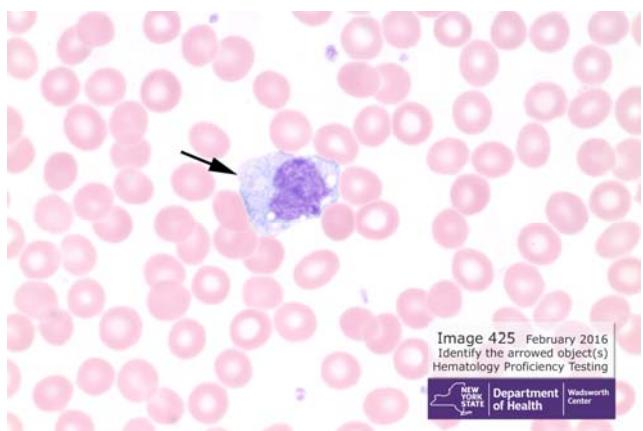
Image 424



Number of Responses	Percent of Laboratories	Cell type or finding
179	100%	Howell-Jolly body

The arrowed inclusion in the red blood cell of Image 424 is dark blue, round and located on the periphery of the cell. The inclusion is a Howell-Jolly body as correctly reported by all participants. The image was obtained from the peripheral blood smear of a 24 year-old female diagnosed with sickle cell anemia where Howell-Jolly bodies would be an expected and significant diagnostic finding.

Image 425



Number of Responses	Percent of Laboratories	Cell type or finding
178	99.4%	Monocyte
1	0.6%	Reactive/Atypical lymphocyte

The arrowed cell in Image 425 possesses ample blue-gray cytoplasm with few noticeable granules and vacuoles. The nuclear chromatin is slightly clumped and without nucleoli. The cell was correctly identified as a monocyte by 99.4% of the participants. Monocytes are normal constituents of the peripheral blood, an increased percentage can be expected in chronic infections and malignancy as in this case of a 66 year-old female diagnosed with liver cancer.